

Sector Update from the Office of the Chief Nursing Officer

February/March 2019

Office Update

We are delighted Margareth Broodkoorn started her role as the Chief Nursing Officer on Monday 11 February 2019. She was welcomed with a pōwhiri at Pipitea Marae, Thorndon Quay, Wellington. Margareth joins the newly formed executive leadership team in the Ministry reporting directly to the Director-General, Dr Ashley Bloomfield.

Following the Ministry restructure, the Office of the Chief Nursing Officer (the Office) is now part of the Clinical Cluster. The Clinical Cluster is jointly led by the Chief Nursing Officer, the Chief Medical Officer, Dr Andrew Simpson, and the newly-established Chief Allied Health Professions Officer, Martin Chadwick. The Clinical Cluster is responsible for contributing strategically to service planning and delivery for the benefit of New Zealanders. This includes identifying and promoting innovations at a national level, providing oversight and direction on clinical and professional issues across the sector, and supporting the response to current and future workforce demand.

The Office looks forward to working more closely with medicine and allied health in the Ministry and role modelling joined up clinical leadership.

For more information about the restructure, roles and functions see the following link:
<https://www.health.govt.nz/about-ministry/leadership-ministry/executive-leadership-team/changes-ministrys-second-tier-structure>

Safer Staffing Accord

The Accord commits the New Zealand Nurses Organisation (NZNO), district health boards (DHBs) and the Ministry of Health to the following:

- a) to explore options for providing employment and training for all New Zealand nursing and midwifery graduates, taking into account the current model for doctors, and report to the Minister of Health by the end of November 2018
- b) to develop any accountability mechanisms that the Parties believe are necessary (over and above those already agreed) to ensure DHBs implement the additional staffing needs identified by CCDM within the agreed timeframe (June 2021) and report to the Minister of Health by the end of February 2019
- c) to develop a strategy for the retention of the existing nursing and midwifery workforce and the re-employment of those who have left the workforce, and report to the Minister of Health by the end of May 2019.

The Accord Operations Group (the group) is continuing to meet most weeks. Pamela Kiesanowski has joined to provide a rural and smaller DHB Director of Nursing perspective. The group has now turned its attention to parts B and C of the Accord commitments as above. The report on the advice for part B is due to go to the Minister at the end of this month and the group have begun work on Part C.

The Signatories to the Accord will be meeting with the Minister for the second time to discuss progress on 11 March.

The Office is meeting regularly with the Safe Staffing Healthy Workplaces Unit (SSHW) to monitor implementation of CCDM. A number of existing accountability mechanisms for CCDM have now been strengthened including within the role of the SSHW Governance Group, the

Minister's Letter of Expectation for DHBs and the Ministry's Operational Policy Framework. The SSHW Unit are also working on an approved national reporting framework for DHBs which will be more streamlined and less onerous. In addition HealthCERT are currently trialling including CCDM in their audit process.

Analysis of DoNs, NENZ and nurse educators surveys completed late last year will be fed back to the sector very shortly. The Office has also asked DHBs to send their most recent new NETP/NESP graduate surveys to us so we can analyse and include national themes.

Additional funding to address workforce capacity issues and CCDM programme implementation

As part of the government's commitment to addressing issues raised by nurses during the 2017/18 MECA negotiations, \$38 million was made available to address immediate staffing issues and \$10 million for CCDM implementation support.

All DHB plans have now been approved by the SSHW Unit Governance Group. DHBs have started to receive funding and early indication suggests they are well along with recruitment into the positions. We will have a more accurate appraisal in early March when reporting on the additional funding is due to the SSHW Governance Group.

The Office will be working with the sector to monitor the flows and impact of recruitment on non-DHB settings, including aged residential and primary care.

Registered Nurse workforce data

Central TAS have released initial results from the November 2018 ACE recruitment round, showing the number of graduate registered nurses matched to positions. The report is available here: <https://tas.health.nz/employment-and-capability-building/workforce-information-and-projects/advanced-choice-of-employment-ace-programme/#ACE>

The results show a continuing positive trend toward more graduates being matched sooner (71.3% of applicants were electronically matched compared to 57% the same time last year) and more positions being available (1075 positions at the time of the match compared to 913 the previous year).

With 894 of the 1253 applicants matched, this left 359 (28.6%) applicants remaining. Some of this group will now have been manually matched to a position (results not yet available). Those not matched will have been placed into the talent pool. Based on past trends we can expect a further 21.6% of all applicants to be employed from the talent pool - so this bodes well for around 93% of graduates employed by the end of the round, which is due to close in July 2019.

More Māori and Pacific nurses were matched with positions. Of the 18% of applicants who identified as Māori, 77% were matched (compared to 70% the previous year). By comparison, of the 6.7% of applicants who identified as Pacific, 87% of Pacific applicants were matched (63.5% at the same time the previous year).

(*Note: From 2017, the Match Reports no longer include data from the manual match, so caution is needed when comparing results to previous years).

Nurse Practitioners

On 1 March 2019, the Office and the Ministry's Health Workforce Directorate are hosting a workshop with nursing educator providers to discuss the growth of a work-ready nurse practitioner workforce and to explore funding mechanisms for the Nurse Practitioner Training Programme (NPTP).

In April, the Minister of Health and Margareth Broodkoorn will both be presenting at the Nurse Practitioner Conference on 10-12 April 2019 in Blenheim <https://www.nurse.org.nz/npnz-conference-2019.html>

Exemption and Statutory Defence for people requiring palliation under the Misuse of Drugs (Medicinal Cannabis) Amendment Act 2017

The Misuse of Drugs (Medicinal Cannabis) Amendment Bill came into effect on 18 December 2018. The Act provides an exemption and a statutory defence for people who require palliation, to possess and use illicit cannabis or a cannabis utensil. In the Act -

... "a person requires palliation if, in the opinion of a medical practitioner or a nurse practitioner, the person has an advanced progressive life-limiting condition and is nearing the end of their life."

There is guidance for nurse practitioners and medical practitioners on the Ministry's website. <https://www.health.govt.nz/our-work/regulation-health-and-disability-system/medicines-control/medicinal-cannabis/guidance-medicinal-practitioners-statutory-defence-and-exemption-provisions>

Although currently only doctors can prescribe cannabidiol products (because only doctors can prescribe unapproved products and there are no approved cannabidiol products) this may change in the future as other products become available.

See [here](https://medsafe.govt.nz/profs/Rlss/unapp.asp) for information on unapproved medicines: <https://medsafe.govt.nz/profs/Rlss/unapp.asp>

Older Persons Health and Changes to Immigration Settings

The Ministry of Health's Healthy Ageing team are working collaboratively to develop a second implementation plan for the Healthy Ageing Strategy (the Strategy). A refresh of the Strategy's implementation plan is required after two years. The Healthy Ageing team will be engaging with stakeholders and key partners including DHBs, central government agencies, Māori and Pacific communities and consumers in February and March. The development of the implementation plan will be aligned with relevant strategies such as the Positive Ageing Strategy and Carers Strategy, including timelines and outcomes, to enable cross government well-being approaches to be well explored and developed.

Consultation on immigration settings

Also relevant to the older persons' health workforce are the government's proposed changes to immigration settings, and in particular the skills shortage lists. The proposed changes will see them replaced with regional skills shortage lists. This is a part of a new approach to employer assisted work visas and regional workforce planning, set out in a consultation discussion paper released by MBIE in December 2018. The consultation is open to 18 March 2019 and details can be found here: <https://www.mbie.govt.nz/have-your-say/consultation-on-a-new-approach-to-employer-assisted-work-visas-and-regional-workforce-planning>). Decisions are expected by Government in mid 2019.

The intent of proposals is to simplify the temporary work visa system, reduce the number of application pathways; better reflect regional skills shortages, and introduce sector agreements to reduce employer reliance on migrant labour while increasing flexible access where there is genuine need. The aged care sector will be one of the first to be considered for a sector agreement.

Kathy Glasgow will be discussing the proposed changes with the Health Workforce directorate, and the cross-Ministry group that meets regularly to consider the sustainability of the health of older persons' workforce.

Primary Health Care

ACC General Practice Roadshows

The Accident Compensation Corporation (ACC) are wanting to better connect with general practice and along with their partners NZMA, RMZCG and GPNZ, are running a series of roadshows across the country from 11 February 2019 to 5 March 2019. ACC currently fund most GP, nurse, and nurse practitioner services via the Cost of Treatment Regulations on a fee-per-visit basis.

The roadshows will provide an opportunity for front line general practice teams and owners to participate in a discussions on building a partnership to increase access to care, ensure quality and consistency of care, and improve patient outcomes. These 90 minute sessions will be held in 13 centres across New Zealand. For more information see: <https://www.acc.co.nz/about-us/news-media/latest-news/gp-connect/>

Primary Care Governance Group

Ramai Lord sits on the Primary Care Governance Group and provides a nursing perspective on improved access to primary care.

Some of this work to date includes overseeing of the implementation of two 2018 Primary Health Care (PHC) initiatives; low fees for Community Services Card (CSC) holders and the zero fees extension to under 14 year olds.

There has been a good response from the PHC sector since the launch of these initiatives on 1 December 2018, with 85 percent of non-Very Low Cost Access (VLCA) practices opting into the CSC scheme as at 1 January 2019.

Primary Health Care Nurse Leaders Group

The working group formed following the primary health care nurse leaders workshop last year continues to work on a range of initiatives relevant to primary health care nursing, including the professional role of nurses and building understanding among colleagues and clients on the value of nurses.

Key messages from the primary health care nurse leader's day are available on our website: <https://www.health.govt.nz/our-work/nursing/nursing-leadership/primary-health-care-nursing-leadership>.

Achieving Equity in Health Outcomes

The Ministry has prioritised achieving equity in health outcomes as a deliberate work programme with a particular focus on Māori and Pacific population groups.

The Achieving Equity team have been engaging with different groups across the health and disability sector to gain broader perspectives and deeper insights as part of the discovery phase of the programme. The Office has had some input and along with the Achieving Equity team met with a small group of nurses in late November last year to increase understanding of Māori and Pacific nurses' perspectives on inequity.

Margareth Broodkoorn will be part of the Ministry's newly established Outcomes and Equity Committee, an Executive Leadership team subgroup.

Mental Health and Addictions

The Mental Health and Addictions Directorate are busy working on the Ministry's response to the recommendations in the Report on the Inquiry into Mental Health and Addictions. Toni dal Din, Nurse Director, Mental Health and Addictions Directorate 3DHB, has been seconded to work on the Ministry's response.

Jane Bodkin recently met with the NZNO Mental Health Nurses Section and Te Ao Maramatanga, College of Mental Health Nurses. These two professional organisations representing mental health nurses are collaborating on a discussion paper about the future of mental health nursing.

Jane continues her role providing advice on the Governance Group for Safe Practice Effective Communication (SPEC). In conjunction with SPEC and the restraint minimisation work, the Ministry is drafting national guidelines on the use and reporting of the use of restraint, to assist the mental health, addictions and intellectual disability (MHAID) workforce who are at times required to use restraint techniques in emergency situations in line with *the Health and Disability Services (Restraint Minimisation and Safe Practice) Standards*.

Registered Nurse Prescribing in Community Health

The Nursing Council completed a trial and evaluation of registered nurse prescribing in community health in August 2018. The Office is supporting a planned announcement of the results of this trial by Nursing Council in conjunction with Counties Manukau DHB. This is likely to occur in March/April.

Development of a National Hepatitis C Action Plan

The Ministry has begun work on the development of a draft National Hepatitis C Action Plan that is part of its work plan for 2018/19. A national plan will help work towards the World Health Organization's viral hepatitis elimination goal.

Regular updates will be provided on the Ministry's website, which will include how cross-sector input will be sought to help develop the plan. Work is underway to explore how nurses working in Hepatitis C Services, Needle Exchanges, Alcohol and Drug Services, prisons and other areas can best contribute to this Plan. Jane Bodkin is involved in this work.

<https://www.health.govt.nz/our-work/diseases-and-conditions/hepatitis-c/development-national-hepatitis-c-action-plan>

Vocational Education Review

The Government is currently consulting on the reform of the vocational education and training system. The Reform of Vocational Education brings together the original Review of the Vocational Education and Training (VET) system, led by the Ministry of Education, and the Institutes of Technology and Polytechnics (ITP) Roadmap 2020, led by the Tertiary Education Commission, which looked at ways to secure a sustainable future for New Zealand's institutes of technology and polytechnics (ITPs). The current consultation will inform the next stages of work. They are seeking feedback from stakeholders and the public over the next six weeks, by 27 March 2019. A Cabinet decision on the proposed changes will likely be made in mid-2019, with a view to legislation being introduced in 2019. For more information on how to have your say see:

<https://conversation.education.govt.nz/conversations/reform-of-vocational-education/>

The Office and the Ministry's Health Workforce Directorate have been part of conversations with the Ministry of Education, the Tertiary Education Commission, and the Nursing Council of New Zealand on potential impacts of proposed changes on the nursing pipeline and for students in the regions, including Māori and Pacific nursing students.