

IN CONFIDENCE

Office of the Minister of Health

Cabinet

Health Workforce Plan 2023

Proposal

1. This paper informs Cabinet of the Health Workforce Plan 2023, designed to stabilise and transform our health workforce to deliver on the promise of health reforms. This paper is the third in a suite of papers about my priorities for 2023, the others being Winter and Waitlist.

Relation to government priorities

2. The Government is committed to protecting, promoting and improving the health of New Zealanders, which is only achievable with a strong and well-supported health workforce. The Health Workforce Plan 2023 appended to this paper addresses both immediate and long-term needs for the health workforce. This Plan directly relates to the Government's refreshed priorities towards focusing on key issues such as the economy, education, health and keeping communities safe [CAB-23-MIN-0019 refers]. It also builds on commitments made in the Speech from the Throne by investing more in the health workforce.

Executive Summary

3. Supporting the health workforce to be sustainable and safe is a significant priority for the Government. We have already made headway over the past five years for several of our key workforces, including investments in mental health and addictions workforce and increasing the number of nurses we employ. Health agencies have been working to increase the impact of current spend since the inception of Te Whatu Ora and Te Aka Whai Ora.
4. However, our health workforce is still under pressure, and some services are struggling because they do not have the people they need to operate sustainably. We know that there will be changes in the population of Aotearoa over the next decade. Parts of the population will get older and this will come with greater healthcare needs. Māori and Pacific peoples will represent a greater proportion of our communities, and we know these are populations with complex healthcare needs, are younger, and life expectancy is shorter. We need to better serve our disabled communities, both in the care they receive, and their experiences in our health workforce. Our Plan also applies to our diverse ethnic communities, including Asian, Middle Eastern, and Latin American.

5. We train exceptional people, and we need to ensure they feel valued, safe and supported at work, and that there are enough of them for our health system's demand – including representation for all our diverse communities.
6. Our data indicates that we have current shortages across professions, and the health sector across Aotearoa will likely need around 1,700 more doctors (including general practitioners), 4,800 more nurses, 1,050 more midwives and a range of additional allied, scientific and technical professionals to make the system fully sustainable. We will also need to grow these workforces into the future; we need training and recruitment pathways that produce an additional 1,400 health professionals each year in order to maintain current staffing levels into the future. We also know that Māori and Pacific peoples make up far too small a proportion of our health workforce to reflect the diversity of our communities. Better representation of ethnic communities and disabled people in our workforce will have significant social and economic benefits.
7. There are choices available to us in the way we deliver healthcare services across the motu in order to achieve a modern workforce that is future fit. We know that we cannot rely on managing our health system the same way we have in the past. We will need to become less reliant on international supply of health workers as we enter a sharpening, global workforce shortage; and will need to deliberately shape flexible pathways for people into health careers out of our whānau and communities.
8. My officials at Te Whatu Ora and Te Aka Whai Ora have worked together to develop a Health Workforce Plan (the Plan) for 2023. The Plan outlines how health agencies intend to stabilise the sector over the next year and take initial steps towards the longer-term transformation which is required to create a sustainable workforce over time. This paper provides Cabinet with an overview of the Plan.
9. Officials will also work alongside other government agencies, including the Ministry of Social Development, on existing employment initiatives to build more pathways into the health workforce.
10. In addition to the suite of initiatives within the Plan, my officials in Te Whatu Ora, alongside Te Aka Whai Ora, will undertake intensive action on filling current vacancies across the health sector, and maintain visibility across initiatives which support clinical workers.
11. The Plan builds on the key actions adopted by Te Whatu Ora and Te Aka Whai Ora set out in Te Pae Tata – the Interim New Zealand Health Plan 2022. This includes a commitment to the current health action plans Whakamaui and Ola Manuia, and acknowledges the developing national New Zealand, Māori, Pacific, Whaikaha, Women and Rural health strategies for Aotearoa. The Plan also outlines how Te Whatu Ora and Te Aka Whai Ora intend to deliver on the expectations of the Manatū Hauora Workforce Strategic Framework, which outlines how immediate and long-term priorities for our health workforce translate into pae ora (healthy futures) for our communities.

12. The Plan identifies six areas to deliver on the workforce components of Te Pae Tata over the next year to make life better for our workforce now, and make progress towards the goal of a sustainable, supported and equitable health workforce. The focus areas are:
 - 12.1 Growing pathways for Māori in health
 - 12.2 Growing pathways for Pacific peoples in health
 - 12.3 Driving local-led innovation in training
 - 12.4 Bolstering priority workforce groups
 - 12.5 Supporting and retaining our valued health workers
 - 12.6 Growing our future leaders.
13. These action areas are all underpinned by the Government's commitments to health equity and to te Tiriti o Waitangi through targeted support to grow and develop Māori in the health workforce and equity through an explicit approach to Pacific health workforce growth and development.
14. We know that developing a sustainable workforce will take time. COVID-19 exacerbated long standing health workforce challenges, both in New Zealand and around the world. Growing capability and capacity in our training providers across the motu will require sustained commitment through financial support and central coordination over many years. I have made it clear to health agencies that I want to explore all levers available to the Government, including regulatory changes, investing more in our workers, through recruitment processes, and through partnerships across the health and education sectors.

Workforce is a strategic priority for the health system

15. Our health workforce is integral to our health system, and a strong workforce means a strong system. However, we know our workforce needs support, which is reflected in the Te Pae Tata commitments:
 - 15.1 Health and care workers will be valued and well-trained for the future health system and key actions in relation to our health workforce
 - 15.2 Equity matters for everyone
 - 15.3 Embedding a Tiriti-led health system
 - 15.4 Implementing a population health approach
 - 15.5 Ensuring a sustainable health service delivery system.
16. This plan draws on the Manatū Hauora Health Workforce Strategic Framework, which outlines how immediate and long-term priorities for our health workforce translate into pae ora for our communities. This Plan

articulates how Te Whatu Ora and Te Aka Whai Ora will work together to support our workforce.

Further investment in supporting the supply of our health workforce is crucial in the immediate and short term

17. We know that our health workforce and health system are under strain. The drivers which prompted the Government to reform our health system – including systemic inequities, maldistribution of services and workforce, and coordination challenges across the previous breadth of health entities – have all contributed to shortages in key workforces. These pressures are a barrier to our health system providing consistently excellent care to New Zealanders.
18. We know that over the next decade, the health workforce is projected to experience further pressures. Our health system will need to:
 - 18.1 reflect our obligations under te Tiriti o Waitangi and the WAI2575 Hauora principles in how we ensure Māori health needs are met
 - 18.2 be prepared for greater care needs for our aging population, which will have increasingly complex health and social needs – and to manage the impact of an aging workforce
 - 18.3 be better placed to manage the complex healthcare needs of our Māori and Pacific peoples who will represent a greater proportion of our communities and have a shorter life expectancy
 - 18.4 better reflect in the workforce Pacific peoples, disabled people, Asian peoples and LGBTQIA+ communities.
 - 18.5 manage an increasingly competitive global market for health workers.
19. Our strategic planning will need to address the immediate and short-term supply needs of workers to prevent service delivery failures and the accumulation of need elsewhere within the health system – and to plan in advance for changes to supply-demand pressures, models of care, and anticipated population and health trends. Our health system has not historically done this well.
20. Te Whatu Ora has developed estimates of what our health system needs today, and what it is likely to need in future to be sustainable. While our health system is managing with current levels of workforce, the current state is not sustainable – and can make specific services and professions vulnerable, and restrict our health system’s ability to provide excellent, equitable care everywhere. This is particularly true in primary, community and rural settings, and for Māori and Pacific communities. Te Whatu Ora’s estimates indicate that:¹

¹ Demand projections and shortage estimates are modelled based on data from the Health Workforce Information Programme (HWIP), and from annual practising certificate (APC) data from relevant responsible authorities, mapped against anticipated trends in population demand for 2032 projections.

- 20.1 Today, our health system would need around 7,000 more health workers to be fully sustainable (as against a total health system of around 260,000 people) – and addressing even a proportion of that unmet need would have a significant impact on our health system. This number includes (across the whole health sector) an estimated 1,700 more doctors (including general practitioners), 4,800 more nurses and 1,050 more midwives.
- 20.2 Over the next decade, our health system will need to train and recruit significantly more health workers than we have today if we are to keep up with growing population demand. Te Whatu Ora estimates we need training and recruitment pathways to produce 1,400 more graduates a year; and that by 2032 we will need to have another 8,070 nurses, 3409 doctors, and over 500 pharmacists.
21. As our workforce grows, we will need to grow our proportion of Māori and Pacific workforce if we are to achieve equitable care and representation for Māori and Pacific communities. By 2033, based on Stats NZ projections, we will need to have grown our Māori and Pacific workforces to represent 19% and 10% of our health workforce respectively to make our workforce representative. The 2022 Te Whatu Ora Workforce Report indicated that our Te Whatu Ora District workforce is currently 9% Māori and 5% Pacific. These are only initial estimates, and health agencies will work to improve data quality over time so we can better understand what we need and the impacts of interventions. But this indicates clearly that we need urgent action to address our shortfalls today, and to responsibly prepare for future trends.
22. By adopting models of care that make better use of our workforce and care better for our communities – like offering more care closer to home – we can reduce and reallocate pressures on our workforce to aid sustainability. In the long term we need to focus on shifting towards a health care approach closer to people’s homes, with improved primary and community care. This would include public health, mental health and addiction, addictions, long-term conditions, mothers and babies, oral health, and better wrap-around care for our whānau. Strengthening clinical and professional networks can drive consistent and excellent standards of care across New Zealand; and investments in technology and infrastructure can lift productivity and help our limited workforce go further.
23. However, demand-side interventions will take us only so far. If our workforce is to be sustainable it must be sufficient – which will require that we commit over time to significant growth from our current numbers. If we are to do so equitably, we will need to lessen our reliance on international recruitment through significant expansion in domestic training, with a particular focus on Māori and Pacific peoples; and to establish more reliable, enduring training pipelines for at-risk professions. We will also need to do better by our workforce today, ensuring that we can retain them in our health system caring for whānau.

Health agencies have developed a Health Workforce Plan

24. Agencies will continue to work on realising the benefits of the health reforms and will incorporate workforce planning for Budget 2024.
25. The Workforce Plan is available in **Appendix One**. The Plan is focused on how Te Whatu Ora and Te Aka Whai Ora intend to take action over the next year to improve the sustainability of our workforce.
26. Officials have ensured the Plan is underpinned by the Government's commitments to health equity and to te Tiriti o Waitangi. It has been jointly developed by Te Whatu Ora and Te Aka Whai Ora and includes a focus on growing our Māori and Pacific workforces alongside commitments to the retention of our current staff, to the growth of key workforces to ensure sufficiency, and towards achieving the needed transformation in our health workforce over the next decade.

Overview of initiatives

27. The Workforce Plan expands each of the six focus areas into actions that encompass key initiatives.
 - 27.1 Growing pathways for Māori in health includes support for Māori students to choose hauora pathways and see them through to completion. This involves growing programmes to increase Māori participation in secondary school science, technology, engineering, mathematics and Mātauranga Māori subjects, supporting more Māori tertiary students and supporting growth in training roles.
 - 27.2 Growing pathways for Pacific peoples in health includes streamlining pathways for Pacific learners into health careers and supporting them in training and in the workplace. This will also increase access to cultural, mentoring and scholarship support, developing speciality pathways and support progression into advanced career and leadership roles.
 - 27.3 Driving local-led innovation in training encompasses scaling excellence to develop a nationwide health training system, making the most of our community workforces and strengthening student placements. This involves expanding rural initiatives, building a nationwide framework for rural by rural training, launching earn as you learn frameworks for kaiāwhina and nursing training, and improving national placement co-ordination.
 - 27.4 Bolstering priority workforce groups endeavours to increase training numbers and improve recruitment in priority workforce areas, as well as encouraging kaimahi back into health. This looks like additional funding for 50 medical school places, new allied, scientific and technical places and new nursing places in key pathways. This also includes piloting community access to our health recruitment centre, lowering barriers to entry and offering flexible employment options.

27.5 Supporting and retaining our valued health workers involves keeping our people, well, safe, fairly paid and fostering their growth. This entails establishing a Health Workforce Wellbeing Hub, making food available during night shifts, establishing clearer progression pathways and sustaining investments in pay parity.

27.6 Growing our future leaders encompasses supporting leadership for our Māori, Pacific, and disabled peoples and investing in our next generation of clinical leaders. As part of this, a leadership academy will be launched, investment will be grown in our existing leadership programmes, and a disabled leadership programme will be established.

28. In **Appendix Two** I have attached an overview of the key milestone for 2023.

Building on existing initiatives

29. Officials will work alongside other government agencies, including the Ministry of Social Development, on existing employment initiatives to build more pathways into the health workforce and bolster employment opportunities for MSD clients.

Strategic context

30. The Plan will not address health workforce pressures alone. The Plan builds on the Manatū Hauora Health Workforce Strategic Framework, which outlines our long-term plan for health workforce – including legislative, policy and commissioning levers which will be vital to enduring improvement. I have asked officials from Manatū Hauora, Te Whatu Ora and Te Aka Whai Ora to continue to work together as the Framework and Plan move into implementation to ensure a cohesive response to health workforce pressures across the levers available to government.

Role of the Workforce Taskforce

31. Over the past 10 months, Te Whatu Ora and Te Aka Whai Ora have led a Workforce Taskforce. The Taskforce, which included representation from clinical and union leaders, sought to identify key initial steps needed to stabilise our health workforce.

32. The Taskforce's recommendations, which have been delivered to the Chief Executives of Te Whatu Ora and Te Aka Whai Ora, have been incorporated into the Plan.

Te Tiriti o Waitangi

33. This work furthers the Government's commitment to a Tiriti-led health system in its framing and actions. The Plan includes consideration of how commitments deliver on each of the WAI2575 Hauora claim Tiriti principles and on Whakamaua: the Māori Health Action Plan 2020-2025. Specific elements of the plan which deliver on Government commitments to te Tiriti o

Waitangi include an action area focused on *Growing pathways for Māori in health*; and an overarching commitment to health equity and to te Tiriti o Waitangi, which manifests in a prioritisation of Māori workforce development across initiatives, and in specific initiatives designed to deliver on Tiriti principles (for example, investments in growing iwi, hapū and whānau influence over health pathways; and in supporting Rongoa and kaupapa Māori providers with workforce development).

Monitoring and reporting

34. Te Whatu Ora and Te Aka Whai Ora are currently developing an implementation plan, against which progress can be monitored and reported.
35. As part of this, I will receive quarterly updates on progress against relevant milestones for each initiative.

Financial implications

36. s 9(2)(f)(iv)

Legislative and regulatory implications

37. No legislative change is required to implement these proposals.

Impact Analysis

Regulatory Impact Statement

38. This proposal does not have any regulatory implications.

Climate Implications of Policy Assessment

39. This proposal does not have climate implications.

Population Implications

40. Māori and Pacific peoples experience significant health inequities. In relation to Māori, the Crown has a duty under Te Tiriti o Waitangi to take action to remedy this inequity. Under-representation of Māori and Pacific people in health professions, contributes to health inequities. Supporting a culturally responsive and safe health system through workforce development will contribute to achieving equity.
41. The equity of Māori workers is supported by the Plan, including at the earliest stages of their journey through secondary and tertiary education, tuakana-teina models of care, into employment with appropriate pay, and leadership development. Equity for Pacific peoples is likewise supported through investments in the end-to-end education pathway for Pacific students – including through cultural support, mentoring and professional development–

and in enduring development and support for our Pacific workforce once working in health

42. Rural communities across New Zealand experience poorer health outcomes, caused in part by inequitable access to health services. This Plan drives better outcomes through increasing rural medicine initiatives, including improving recruitment of medical students from rural backgrounds, increasing rural placement opportunities, and expanding support for rural placements.

Human Rights

43. This proposal is consistent with the New Zealand Bill of Rights Act 1990 and the Human Rights Act 1993.

Consultation

44. Te Whatu Ora and Te Aka Whai Ora have consulted with Manatū Hauora, Health Quality and Safety Commission, the Treasury, Te Pūkenga, Whaikaha - Ministry of Disabled People, Tertiary Education Commission, Public Service Commission, Ministry for Social Development, Immigration New Zealand, Ministry for Ethnic Communities, Ministry of Education, Te Aho o Te Kahu, Cancer Control Agency and ACC.
45. The Department of the Prime Minister and Cabinet has been informed.
46. The Health Workforce Plan builds on engagement with the health sector which occurred in late 2022, including the Health Workforce Summit, which has influenced the focus of the plan and the initiatives it highlights to progress this year. Officials have also engaged with health sector unions while developing the plan, to seek feedback and input on initiatives which would have greatest impact for our frontline health staff.

Communications


47. I intend to make public announcements about the Plan once final decisions have been made by Cabinet.

Proactive Release

48. This Cabinet paper will be released within 30 business days of decisions being confirmed by Cabinet, with redactions as appropriate under the Official Information Act 1982.

Recommendations

The Minister of Health recommends that Cabinet:

1. **note** that supporting the health sector workforce is a key priority for progress in implementing the Government's vision for the health system reforms
2. **note** that Te Whatu Ora and Te Aka Whai Ora have jointly developed the Health Workforce Plan 2023, which provides actions to both stabilise the health workforce and transform it over the longer-term
3. **note** that the Health Workforce Plan 2023 outlines how Te Whatu Ora and Te Aka Whai Ora will deliver on workforce actions under the Interim New Zealand Health Plan -Te Pae Tata, and their component of the Manatū Hauora Health Workforce Strategic Framework
4. **note** that officials from Te Aka Whai Ora, Te Whatu Ora, the Ministry of Health, the Ministry of Social Development, Whaikaha, the Ministry for Ethnic Communities and the Ministry of Education will work together to achieve elements of the Health Workforce Plan 2023, and wider needed transformations in our health workforce system, which require joint action across the health and education systems
5. **note** that agencies have committed to fund the delivery of the Health Workforce Plan 2023 out of existing baseline
6. **s 9(2)(f)(iv)** 
7. **note** I will report back to Cabinet on progress against implementation of the Health Workforce Plan 2023 quarterly.

Authorised for lodgement

Hon Dr Ayesha Verrall

Minister of Health

Appendix One

Health Workforce Plan 2023

Information is publicly available on the Te Whatu Ora website

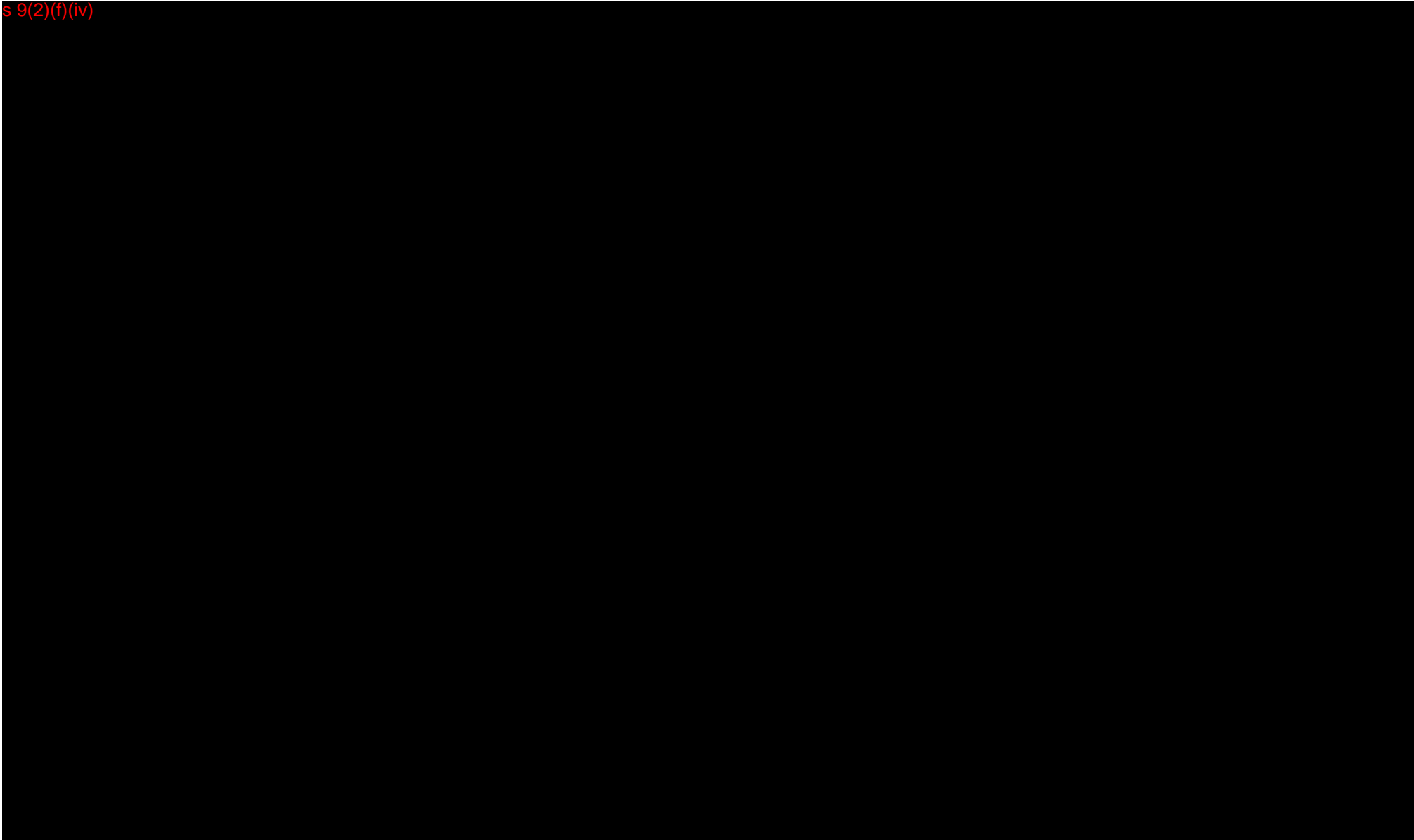
Proactively Released

Appendix Two

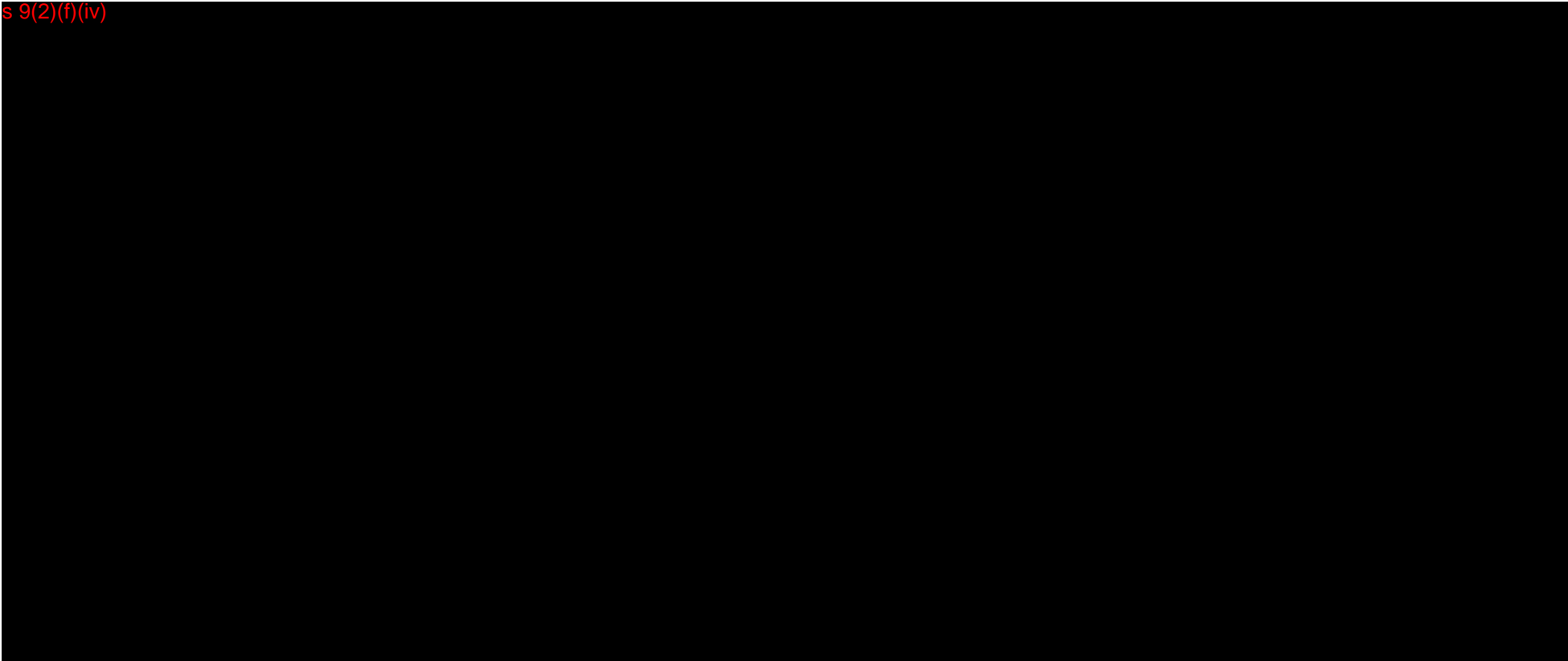
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