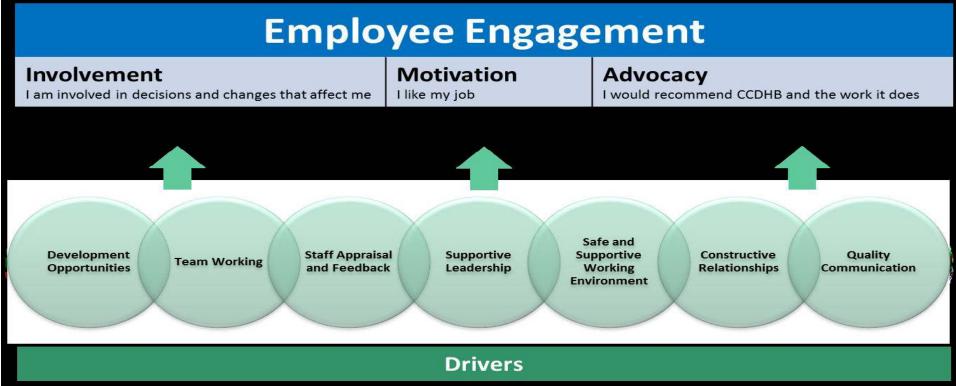
Nursing & Midwifery Workforce Programme 2017 -2021 Leading our workforce to deliver quality patient care









Goal 1 – Safe working environments

Best Value for Money – Use of Smart Workforce System
Working collaboratively to initiate and ensure safe & quality care delivery

Goal	Objective	Measures - 2017	Who
Optimal skill mix Grow workforce capability and diversity to enable sustainable flexible service delivery	 Care Capacity Demand Management implemented: Evidence based optimal skill mix, staff satisfaction and retention rate monitored TrendCare/Care Capacity Demand Management/Releasing Time to Care 	 Care Capacity Demand Management Council established and functioning to ensure: CCDM implemented with RTC TC data used to inform safe roster shift patterns (reflected in roster audit), efficient and safe staffing and acute demand for patient care Appropriate TC reports available to appropriate levels of organisation to inform long term workforce requirements Skill mix report used to increase graduate recruitment. Monitor staff satisfaction and retention 	Andrea, Jo, Fiona
Smart systems that support the workforce (use of technology)	 Mobility of Information and Communication Technologies that support nursing/midwifery utilisation of smart systems e.g. mobility ICT/patient Apps/electronic record keeping. 	 2. Mobility of Information - work towards mobility with: a. Patient Track or similar b. Mobile devices c. Workforce accessing mobile Apps e.g. Lippincott d. Medical charting and pyxis e. Develop process for App use 	Sheryl, Jo, Fiona

Goal 2 – Promoting health, wellness and safety of the workforce

Growing our People

Workforce Leadership: Knowing, Growing and Engaging our workforce

Goal	Objective	Measures - 2017	Who
•A healthy, well, safe workforce •Focussed improvement and staff empowered to innovate	 Ensure effective systems and strategies in place that promote the health, wellness and safety of the nursing & midwifery workforce. Enabling systems allow workforce to work to full extent of education & training e.g. increasing safe delegation and direction of HCA develop EN/RN/RM scope, expanded practice increase target for Nurse Practitioner roles develop RN prescriber roles Full participation in the Improvement Movement training to build capability with regards improvement methodology. 	 Professional Development and Career Pathway - all areas with Maori and Pacific staff have a PD and Career Path: a. A stocktake is done a. PD and Career Path developed for all areas b. Advanced practice, NP roles that meet population need are implemented e.g. Health of Older person, MHAID, Endoscopy (colorectal), Ophthalmology, Medicine, Primary, Acute Care. c. Maori Nurses MECA is included in MECA negotiations. d. 100% of those who attend PDRP training submit a portfolio. e. Leadership development and resilience via new programme — peer supervision, restorative justice methodologies 	Helen, Fiona, Jo, Emma Andrea Anjana Jo, Fiona

Goal 3 – Integrated Care

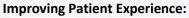
Shorter, Safer Health Journeys- Consumer Focused Improvement
Working collaboratively to initiate and ensure safe & quality care delivery

Goal

Objective

Measures - 2017

Who





 Develop and evaluate integrated models of care that deliver services closer to home and enable improved health outcomes for our population. 1. <u>Team Nursing</u> embedded.

2. Integrated Care

a. transfer of care, either to home or another area within the hospital, has a documented plan of care.

3. <u>Health Care Home (HCH)</u> - initiative implemented across all PHOs with increased integration of services and roles in crosscontinuum care.

b. Work with District Nurses to integrate into HCH practices (9 practices in tranche 1, Tranche 2 (6-8 practices).

c. Promote and monitor patient "goal of care setting" and ACP

NAML Emma

Emma/ Fiona

Emma

Enablers to Attain the Goals

Growing our People

Workforce Leadership: Knowing, Growing and Engaging our workforce

Goal	Objective	Measures - 2017	Who
• Develop nursing/midwifery leadership capability	 Deliver workforce development/leadership (with a focus on Maori/Pacific) with reporting and monitoring of: a. PDRP/QLP/PG qualifications/expanded skills b. TEP collaboration & extend DEU support clinical learning environment project 	 Maori and Pacific Workforce Plan implemented: Two Maori or Pacific Nurse Practitioner or advanced practice roles identified and developed Identify Maori and Pacific leaders in ARC/Primary providers to work with high needs patients so 100% have a plan on Interai/Shared Care Record. Establish a Dedicated Education Unit for Maori and Pacific students to support pipeline Maori and Pacific workforce. 80% of Maori and Pacific students have placements in DEU. Maori and Pacific Year 3 students have career plan and if they identify primary, work with TEP to enable most placements in that setting to support recruitment into Primary and NETP (2). NETP/NESP will positively discriminate through the ACE recruitment to reach target of 40% Maori and Pacific RNs recruited 	Helen Emma Anjana Anjana, Sheryl Anjana
		 Senior Maori and Pacific Workforce - staff identified for development into the senior workforce roles: Peer Support training for Maori and Pacific nurses/midwifery Career planning for these nurses Support 3 Maori, 3 Pacific nurses/ midwives to attend Nga Manakura Aopopo or Aniva leadership Identify appropriate contact people for Maori and Pacific to approach re bullying, discrimination. 	Helen Anjana, Sheryl Jo, Fiona Anjana, Sheryl

Measuring the Goals

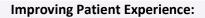
Shorter, Safer Health Journeys- Consumer Focused Improvement
Working collaboratively to initiate and ensure safe & quality care delivery

Goal

Objective

Measures - 2017

Who





 Ensure effective systems based on best practice to monitor nursing/midwifery care delivery & our population to enable focussed improvement. Key patient safety improvement activities 2017 reduction hospital acquired pressure injuries, improved use of EWS, improved medication administration safety. 1. <u>Pressure Injury</u> - reduce hospital acquired pressure injuries:

a. 90% of inpatients have a completed e-

b. PI and Malnutrition care process added to e-PADP

2. Medication administration - improve safety:

c. medication administration e-learning developed and rolled out add measure

3. <u>Deteriorating Patient</u> – improve use of:

d. EWS, PFE (paediatric family escalation)
MEWS and fluid balance charts audit
added to schedule

e. Electronic integration of PADP, EWS

Helen

Helen

Jo, Fiona