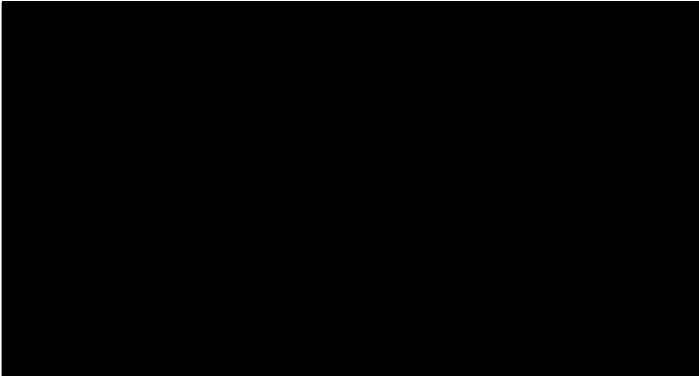


18 August 2020

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Re Official Information Request – copy of the women's health midwifery recruitment and retention oversight report

I refer to your official information request dated 27 July 2020 requesting the following information:

A copy of the women's health midwifery recruitment and retention oversight report, as mentioned in hospital advisory committee minutes from February.

Attached please find the requested report. Please note that we have redacted an administrative section at the top of the report as it does not fall within the scope of your request.

You are entitled to seek a review of the response by the Ombudsman under section 28(3) of the Official Information Act. Information about how to make a complaint is available at www.ombudsman.parliament.nz or freephone 0800 802 602.

Please note that this response, or an edited version of this response, may be published on the Auckland DHB website.

Yours faithfully



Ailsa Claire, OBE
Chief Executive

Women's Health update: Midwifery Recruitment and Retention – Oversight Report

Recommendation

That the Hospital Advisory Committee:

1. **Receives the Women's Health Update: Midwifery Recruitment and Retention Oversight Report for November 2019, and**
2. **Reviews reporting frequency for the Midwifery Recruitment and Retention Oversight Report.**

Prepared by: Angela Beaton (General Manager, Women's Health)
 Endorsed by: Deborah Pittam (Midwifery Director, Women's Health)
 Rob Sherwin (Director, Women's Health)
 Jo Gibbs (Director, Provider Services)

Glossary

Acronym/term	Definition
FTE	Full-time Equivalent
MERAS	Midwifery Employee Representation & Advisory Service
NZCOM	New Zealand College of Midwives
NZNO	New Zealand Nurses' Organisation
RN	Registered Nurse
SUDI	Sudden Unexplained Death in Infancy

1. Executive Summary

The persistent and chronic shortage of midwives, concentrated across the greater Auckland region, has been well documented in our regular reports to the Oversight Committee. We have consulted with staff and implemented refinements to existing models of care, to support and increase the attractiveness of Auckland DHB as a place for midwives to work. In addition to this we have launched our Recruitment, Retention and Responsiveness strategy and other initiatives.

The purpose of this paper is to provide the Hospital Advisory Committee with an update on the performance of our maternity workforce initiatives. Specifically, improvements in workforce wellbeing metrics have been noted; we have recruited to key leadership positions and the Women's Health leadership team is stable; the midwifery workforce has been stabilised and augmented by the recruitment of registered nurses; and a position paper is forthcoming, which will examine and

respond to the broad issues in women's health. Therefore, we wish to request a review of reporting frequency for midwifery recruitment and retention oversight by HAC.

2. Background

The chronic midwifery shortage places significant pressure on midwifery staff to deliver the standard of care that they aspire to provide. The 2018 New Zealand District Health Boards' Midwifery Workforce Report¹ states that as of December 2017, Auckland and Counties Manukau DHBs had the highest vacancy FTE and highest national vacancy rates with a combined vacancy FTE of 58.9, over half (57.4%) of the national vacancy FTE. Auckland DHB's share of this was reported at 30.9 FTE of with an annual voluntary turnover of 26.1%; the second highest in the country.

Meetings began in May 2017 between Auckland DHB, the Auckland branch of New Zealand College of Midwives (NZCOM), Midwifery Employee Representation & Advisory Service (MERAS) and New Zealand Nurses' Organisation (NZNO) to jointly agree priorities and to monitor progress in strengthening our midwifery workforce. This culminated in the Midwifery "3Rs" framework; Recruitment, Retention and Responsiveness. Getting this right is crucial to creating a place where midwives want to work and stay. This strategic piece of work underpins long term sustainability and workforce development.

In October 2018, a temporary reduction in overall maternity bed capacity was approved to improve midwifery staffing ratios by achieving a reduced bed base, a model of care that provided increased Registered Nurse (RN) FTEs to achieve better support for our midwifery staff to deliver the standard of care they aspire to provide, and bed re-allocation and patient selection according to risk assessment to better allocate staff according to care needs. Reduced bed utilisation continues to be challenging to achieve, therefore whilst bed occupancy on Tamaki Ward is nearly always (96% of the time) above the planned 25 bed base, staffing across the Women's Health Service is supported by the Auckland DHB resource Registered Nursing team and bureau Registered Midwives.²

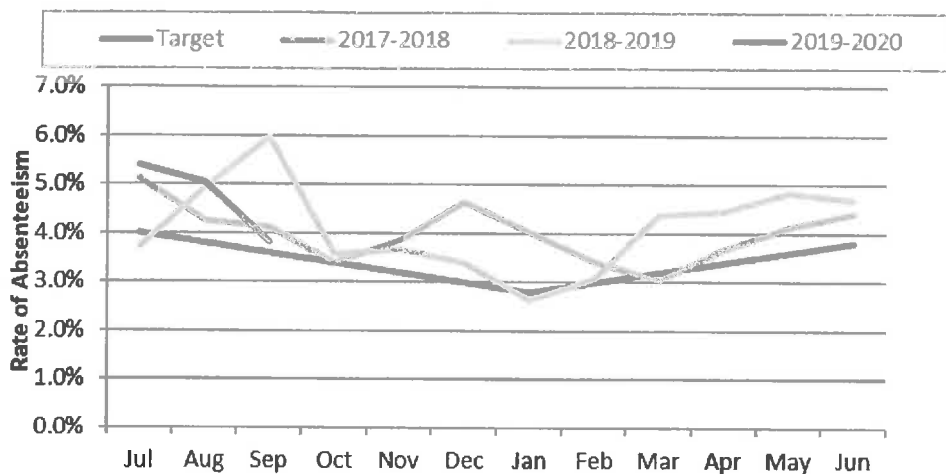
3. Current Situation

The key workforce imperatives that underpinned initial efforts to improve midwifery staffing ratios and the subsequent midwifery recruitment and retention initiatives have improved over the first quarter 2019/20 (Q1 to September 2019).

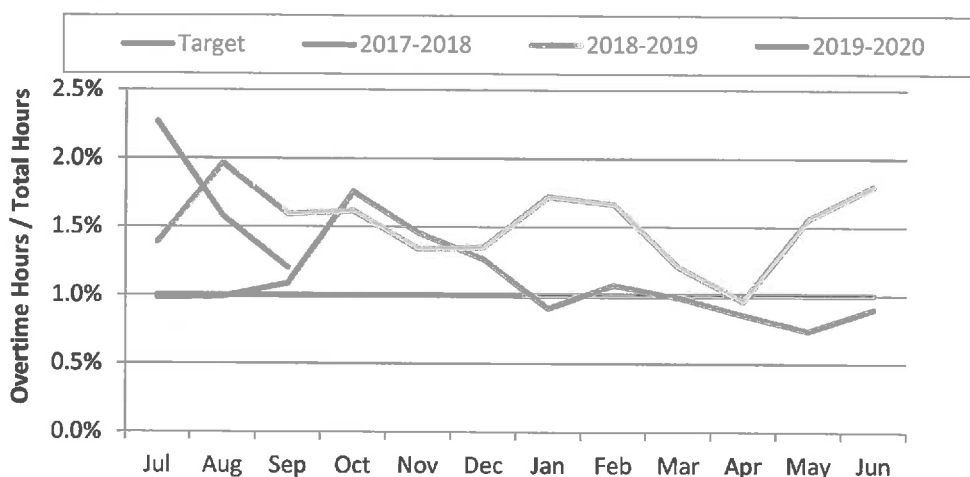
- **Reduced absenteeism: number of sick days per quarter** – a more highly engaged workforce will typically experience lower rates of absenteeism

¹ October 2018. TAS. New Zealand District Health Boards' Midwifery Workforce Comprehensive Workforce Information Report.

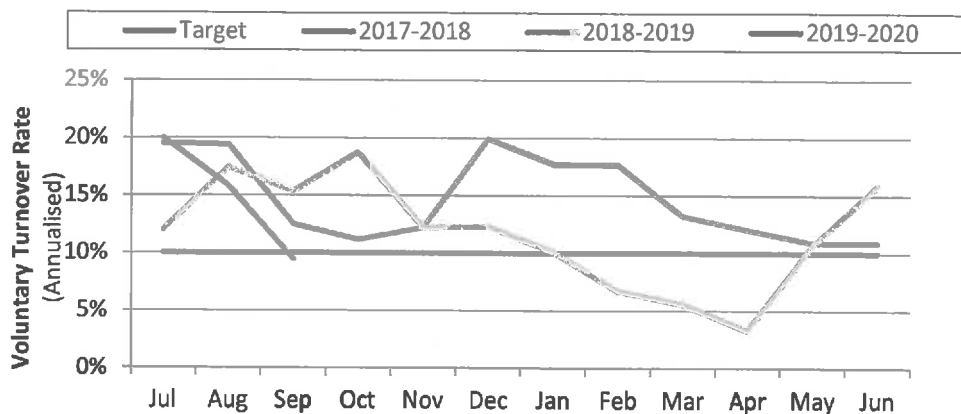
² February, March and April 2019: Oversight reports to HAC



- **Reduced overtime hours: overtime hours compared to regular hours worked** – reduced rates of overtime can be due to improvements in workload or improvements in working culture



- **Improved quarterly staff turnover: voluntary turnover** – reducing turnover rates can imply improving staff satisfaction



Overall, these trends are encouraging as the single biggest item of feedback at the workshops to discuss the 2018 staff engagement survey was the lack of adequate and appropriate staffing resources and the impact that this has on wellbeing, feeling valued and the ability to do a good job.

These metrics will be closely monitored by the Women's Health leadership team as we continue to work with our staff, union partners and midwifery organisations to provide a supportive working environment and help grow the midwifery profession in New Zealand. Continued support for our midwifery 3Rs framework clearly remains the top strategic priority for our sector partnerships.

It is noted that with this interim model of care, training and champion support for key prevention programmes – sudden unexplained death in infancy (SUDI) and smoking cessation – presents an ongoing challenge due to the levels of core staff, and we are considering options to improve this using flexible rostering options alongside a review of the SUDI SLA.

4. Midwifery retention initiatives

Following approval of midwifery retention initiatives aimed at increasing the capacity of our midwifery workforce, union feedback has been sought. Whilst midwifery union feedback has been positive, nursing feedback while supportive in principle cited concerns that this is not equitable for nursing staff or other maternity services in the region. While we understand their concerns regarding nurses working in the unit, at this stage we have targeted core midwives specifically as it is particularly difficult to recruit and retain midwives in these roles. We have not had the same difficulties recruiting to senior midwifery, community midwifery or nursing positions. Our neighbouring DHBs have been provided with a copy of the paper and implementation process and we understand that a similar application has been submitted for senior management consideration at Waitematā DHB. Communications are currently being planned to support the implementation of this initiative, in consultation with Auckland DHB Human Resources and Communications staff; and communication and implementation processes will be commenced in the week of 4 December, 2019.

5. Women's Health Leadership

The new Women's Health Midwifery and Nursing Leadership Structure change process is well underway. We have appointed to the positions of Associate Director of Midwifery (Physiological Birth) and the Associate Nurse Director. The Associate Director of Midwifery (Māori Health and Equity) position will be advertised in the next week. This new structure clarifies responsibility and reporting lines and will support more effectively the Women's Health midwifery and nursing staff. In addition, the appointment and commencement of the General Manager, Women's Health completes the Level 2 leadership team and will add stability to the management of the service.

6. Te Manawa o Hine

The redesigned Te Manawa o Hine initiative has been finalised. We are currently advertising for the Te Manawa o Hine Charge Midwife position and continuity of care midwifery positions and expressions of interest for self-employed midwives to join this initiative will commence in November. Te Manawa o Hine is a midwifery continuity of care service aimed to provide appropriate

and targeted care to Māori wāhine and whānau in the Auckland DHB area. It is envisaged that this will extend to more women, including Pasifika women, over time.

7. Conclusions

As we continue to develop longer-term approaches to persistent and chronic workforce challenges, the interim model of care provides the most sustainable model for adequate, safe staffing levels and improved wellbeing of the midwifery and nursing staff. Our progress to date is consistent with an incremental approach to change that will be further supported by the development of a position paper that proposes strategic resolutions to known and emerging women's health issues and challenges at Auckland DHB and across the region.

8. Recommendations

We recommend that the Hospital Advisory Committee:

- Notes the improvement in key workforce metrics, which indicate a more engaged workforce with improving staff satisfaction levels and workplace culture.
- Reviews the reporting frequency for midwifery recruitment and retention oversight by HAC based on:
 - improvements in workforce wellbeing metrics;
 - recruitment to key leadership positions within Women's Health Services;
 - stability of the Women's Health leadership team; and
 - the forthcoming Women's Health position paper, which will examine and respond to known and emerging service challenges.
- Notes our intention to bring a position paper to ELT in December 2019 to support a strategic response to known and emerging challenges to women's health service delivery at Auckland DHB and across the region.

