

Tū Mata Kokiri: Hearing from our leaders June 2024

Margie Apa, Chief Executive: Recruitment pause update

Thank you for your patience as we work at pace to implement the recruitment pause.

I'd like to confirm recruitment for clinical roles is continuing. Decision making for Hospital and Specialist Services has moved from a national approval process to Regional Recruitment Forums.

The new process will help us continue to address the budget overspend, but in a way that is closely informed by local clinical priorities. No frontline budgets are being cut.

The Regional Recruitment Forums will assess, prioritise and where appropriate approve recruitment. Staff and patient safety and clinical delivery remain the focus.

The forums will meet weekly, chaired by the relevant Regional Director, and attended by Medical, Nursing, Allied Health, Rural, Finance and People and Communications partners.

They will consider roles within a district that have been presented by the General Director Operations and Chief Medical Officer. The forum will be working towards a total workforce allocation across the region and a critical workforce shortage list. They will consider geographical location with the greatest frontline need and allocate resources to address the highest priority shortages first.

Managing recruitment is an important part of the broader savings programme that will allow us to live within our means.

Margie Apa

Chief Executive

(ends)

Appendix: About the recruitment pause:

- In recent times, Health NZ has made significant advances recruiting to vacancies following the success of a range of workforce initiatives in our first 18 months.
- In the year to March 2024, we recruited an extra 2,899.5 nursing FTE; 205 Senior Medical Officers; 103.5 FTE Resident Medical Officers and 390.8 Allied Health workers.
- This led to some professional groups now having FTE ahead of budget. In turn, this meant we found ourselves spending over our current year budget.
- Health NZ has also been affected by the same general cost pressures felt in the wider economy.
- We have brought in an organisation-wide pause on all current and new recruitment of hospital roles that are not patient impacting and Public Health roles that are not community facing. There are similar restrictions on all enabling services, such as People and Communications and Finance.

Recruitment process guidance

13 June 2024

Introduction

Effective 14 June there are two key changes we are making to our Recruitment processes:

- **An organisation-wide pause on all current and new recruitment** of hospital roles that are not patient facing and Public Health roles that are not community facing with immediate effect. The only exception is where a letter of offer and contract has been formally issued to a candidate or a verbal offer made before midday 13 June 2024. There are similar restrictions on all enabling services, such as People and Communications or Finance.
- **Replacing the national approval process for Hospital and Specialist Services roles** with regional forums for Hospital and Specialist Services to assess, prioritise and approve the recruitment of roles in hospitals in a timely manner. The process for approval of frontline public health roles will continue.

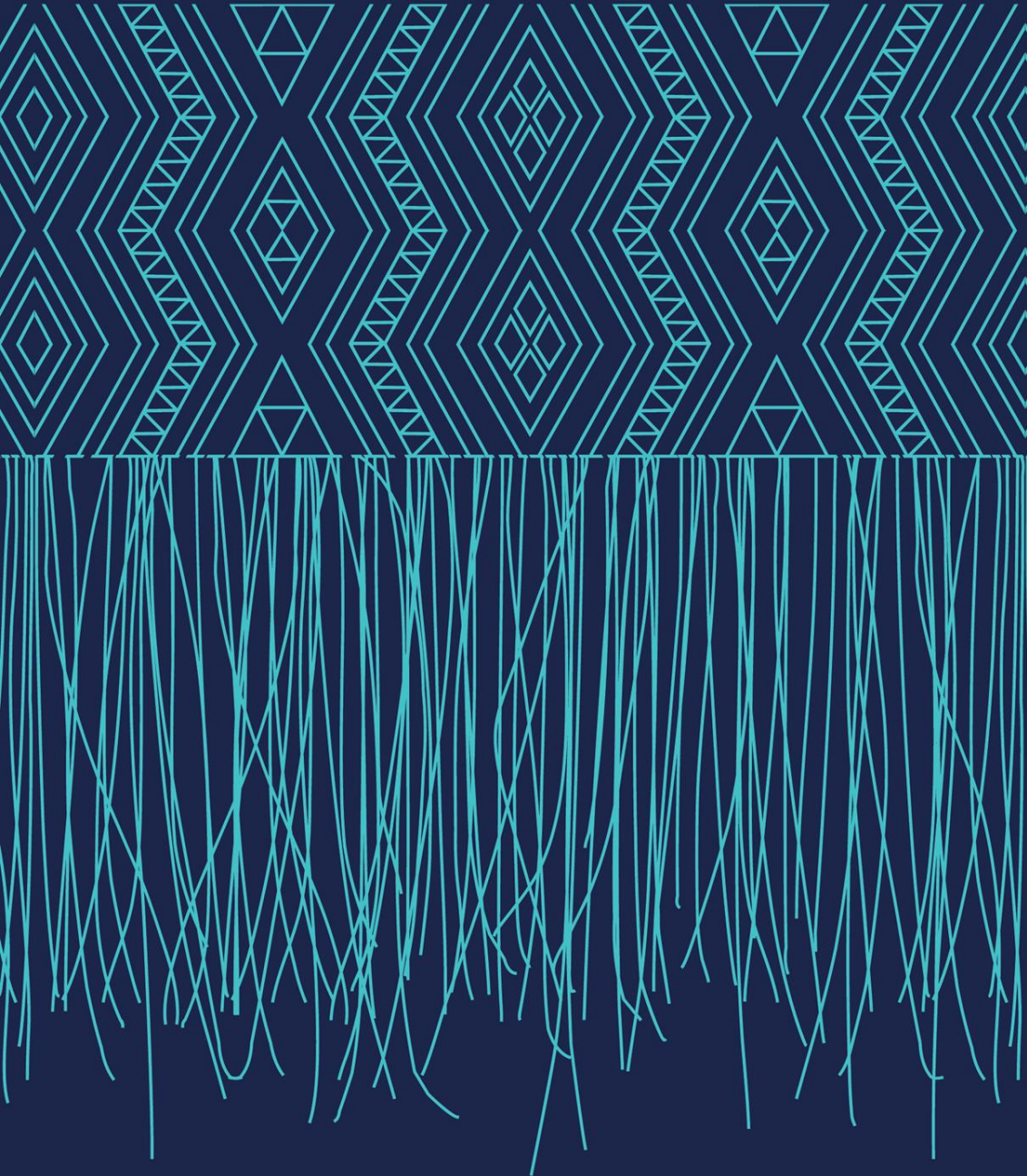
Note that on Thursday 13 June 2024 all candidates in the recruitment process (outside of international recruitment) will receive the message in Appendix 1 advising them recruitment is pausing at this time.

Candidates scheduled for interview, who have been interviewed or are in the reference checking stage, will also receive a phone call from a member of the recruitment team to explain why we are pausing the recruitment process.

This document sets out the process to:

- Recruit to a hospital-based or community facing public health role.
- Proceed with a role that was under active recruitment but has now been paused.
- Initiate a new request to recruit to a non-hospital-based role.

Managers and clinical leaders should only request an endorsement for recruitment if the risks of not recruiting are considered high. These measures will be in place until further notice and will be reviewed regularly in terms of how budgets are tracking.



Process: Hospital and Specialist Services

Regional Recruitment Forum decision making

Regional Recruitment Forums are required to make H&SS recruitment decisions and oversee the total H&SS recruitment pipeline within a set of parameters.

The first parameter is **total workforce**, which is directly linked to **affordability**.

A means of calculating total allowable roles to fill and total allowable pipeline by profession within each region will be agreed by the steering committee for the cost savings programme. Each District will prioritise their recruitment needs to bring to the Regional forum.

Every fortnight, this analysis will be updated for changes in the relevant variables (e.g. paid FTE, turnover rate etc) and each Regional Recruitment Forum will be supplied with regional specific information on total allowable roles to fill and total allowable pipeline by profession.

By only approving **up to** the total allowable roles as provided, the Regional Recruitment Forum will ensure that we are keeping the total H&SS workforce at a pre-determined size.

The second parameter to guide decision making by Regional Recruitment Forums is **skills shortages**.

Within the total allowable roles to be filled priority should be given to recruitment that:

- Addresses a shortage on the critical workforce shortage list, the Regional Forums will agree this list at their first meeting
- Works through regional prioritisation of resource provided by each District.

The Regional Recruitment Forums, when considering requests that match the description above, are asked to consider the geographic location with the **greatest frontline need** and allocate resources to address the highest priority shortages first.

There are two exemptions to the above process:

- Internal movements within a District that do not add cost are exempt from the Regional Recruitment Forum process. These decisions can be approved by the GDO and Chief Medical Officer. An example of this might be filling a vacant Cleaning Supervisor role by promoting an existing staff member who has applied.
- Appointments that grow Health NZ's workforce capacity (through attracting candidates from the private sector or from overseas) in an area of need nationally or extreme need locally. Appointments to these roles are outside the regional allowance and Regions can approve these positions. The positions clinical skills shortage will be advised on a monthly basis.

Regional Forum membership

Regional Forums will meet weekly and be chaired by the relevant Regional Director.

The membership of each Regional Forum is outlined in the table below. The forum is attended by each GDO as well.

		Northern	Te Manawa Taki	Central	Te Waipounamu
Operational	RD	Mark Shepherd	Chris Lowry	Russell Simpson	Ngarie Buchanan
Decision Makers	Medical	Johnathon Christianson	Kate Grimwade	Ben Pearson	David Gow
	Nursing	Marg Dotchin	Sue Hayward	Karyn Bousfield	Becky Hickmott
	Allied Health	Sanjoy Nand	Claire Tahu	Gabrielle Scott	Helen McLauchlan
	Rural	Alex Pimm	Philip Daniel	Ngaira Harker	Brendan Marshall
Enablers	Finance	Geoff Goodwin	Andrew McKinnon	Frank van Ham	Grant Paris
	P&C	Tui Vito	Jacquie Sherborne	Sueanne McGlashan	Tanya Basel

The impact of recruitment decision making by Regional Forums will be examined in the H&SS regional performance meetings, which have recently been augmented to include a detailed examination of financial performance.

Recruitment process – Active recruitment as at 13 June 2024

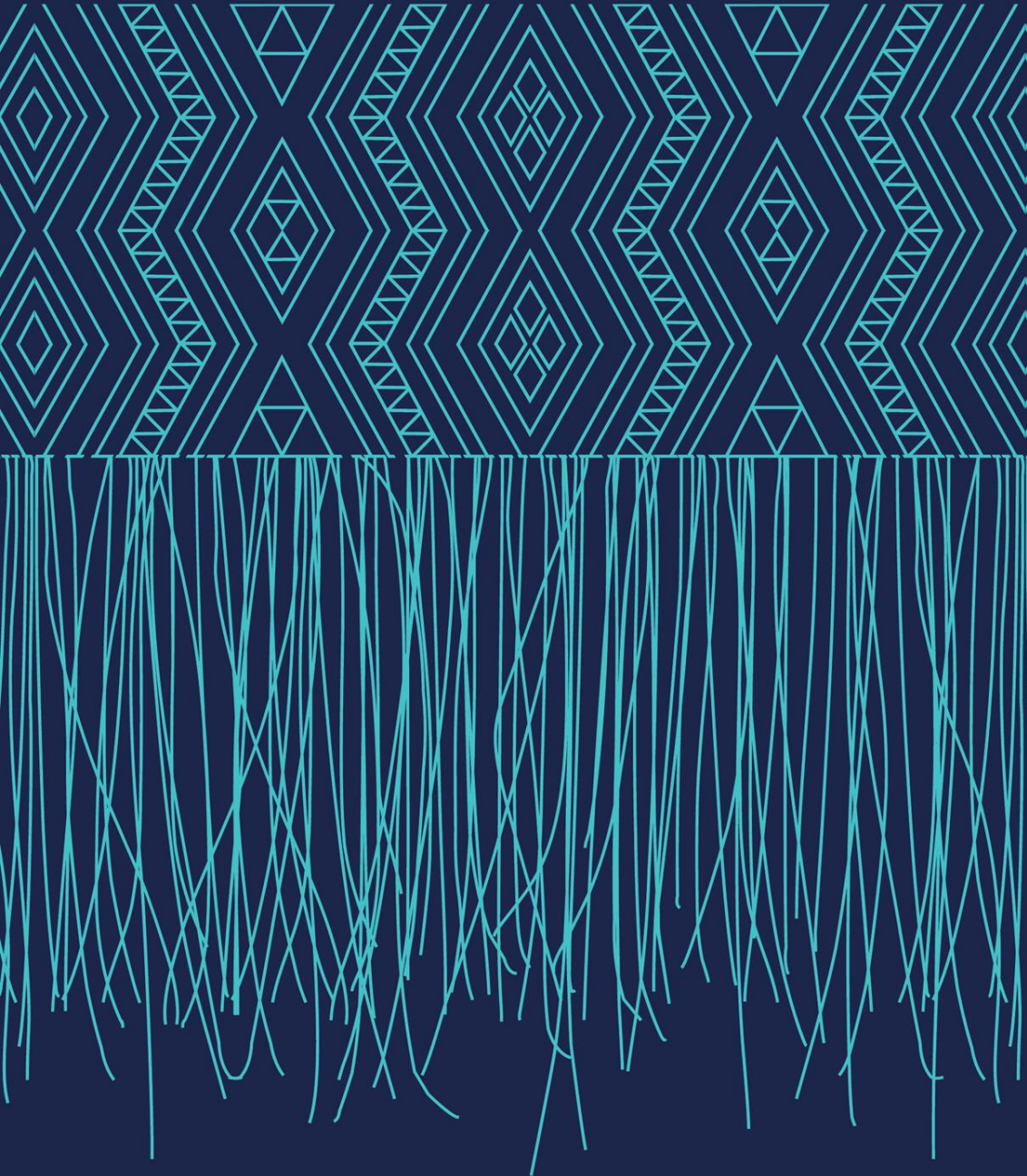
For all patient facing recruitment that is inflight as at 13 June 2024 this is the process that will be undertaken:

Responsible	Action
Hiring Manager	No action is required
Recruitment Partner	By 5pm Thursday 13 June: Recruitment Partners to complete the District Template for roles under active recruitment and send to the relevant GDO to rank
GDO / Director Public Health	Friday 14 June / Monday 17 June: Regional Recruitment Forum meets, reviews current active recruitment, assigns relevant categories for roles and priority orders relevant category returning the template to the Recruitment Partner
Recruitment Partner	Tuesday 18 June: Recruitment Partners to compile District view of roles for discussion
Regional / NPHS Recruitment Forum members	From 5pm on Tuesday 18 June – 9am Thursday 20 June: Regional Forum meet and make decisions on recruitment requests
Recruitment Partner	By Thursday 20 June - Record outcome of Regional Forum decisions in summary spreadsheet and commence recruitment - Forward Regional Forum summary spreadsheet to careers@tewhatuora.govt.nz
National Recruitment team	By Thursday 5pm: Assemble Regional Forum approved forms for noting by ELT and modelling in combined Summary of Submissions.

Recruitment process – New recruitment as at 13 June 2024

For all patient facing recruitment in Hospital, the following **weekly process** needs to be followed. Please contact your HR Partner with any queries about this process.

Responsible	Action
Hiring Manager or Clinical Lead / Senior Manager	By Wednesday noon: - Complete the normal recruitment Initiation form - Recruiters in your area will gather all the requests and gain endorsement from your relevant GDO and CMO who will prioritise roles for the District and send to the regional Recruitment Partner.
Regional Recruitment Partner	By 5pm Wednesday: Regional Recruitment Partner to assemble all completed forms and provide to Regional Recruitment Forum Recruitment Partner to provide information on fortnightly allowable recruitment and pipeline size (see slide 4).
Regional Recruitment Forum members	Thursday morning: Regional Recruitment Forum Recruitment Forum meet and makes decisions on recruitment requests.
Recruitment Partner	Thursday morning (post Regional Forum): - Advise Hiring Manager of declines same day. - Record outcome of Regional Recruitment Forum decisions on Summary of Endorsement Requests.
Recruitment Partner	By Thursday noon: Forward Regional Recruitment Forum approved forms to careers@tewhatuora.govt.nz with a summary table of submitted forms (filtered view of Summary of Endorsement Requests).
National Recruitment team	By Thursday 5pm: Assemble Regional Recruitment Forum Regional Forum approved forms, and summarise in combined Summary of Submissions for finance modelling and ELT noting.
Cost Savings Programme team	Tuesday: Note Summary of Submissions.
National Recruitment team	By Tuesday 5pm: Record outcomes of ELT meeting on combined Summary of Submissions, copy and paste in email to Recruitment Partners.
Hiring Manager or Clinical Lead / Senior Manager	Action recruitment decisions through the normal recruitment initiation process.



Process: All other recruitment

Recruitment process: All other recruitment

Guidelines for seeking an endorsement to remove hold

You should only request an endorsement to continue a recruitment process if the risks of not recruiting are deemed too high. It does not matter what stage in the recruitment process you are at, you can only continue without an endorsement if a letter of offer has been issued, or you can confirm a verbal offer has been made before noon 13 June 2024.

You will need to provide evidence of risks in one of the following areas:

- Impact on service delivery / health targets.
- Impact on clinical quality / patient safety.
- Impact on staff safety.
- Position is an identified profession shortage locally.
- Other – please be very specific.

What happens to current in-flight recruitment:

If recruitment has commenced, put on hold immediately, unless or until endorsement to remove hold has been obtained, specifically:

If an ATR has been approved	No further action
If advertising has commenced	Withdraw advertising immediately until endorsement is obtained
If advertising has closed	Proceed to shortlisting. Notify unsuccessful candidates and contact shortlisted candidates to explain recruitment on hold. Get permission to contact again once recruitment recommences
If interviews have been scheduled	Cancel any remaining interviews and contact candidates to explain recruitment on hold. Get permission to contact again once recruitment recommences
If ready for reference checking	Do not reference check Contact preferred candidate and get permission to contact again once recruitment recommences
If SAF has been raised	Notify unsuccessful candidates – if still an option to appoint, get permission to contact again once recruitment recommences Contact preferred candidate and get permission to contact again once recruitment recommences
If letter of offer has been issued to candidate	Proceed to appointment once candidate accepts

Recruitment process: All other recruitment

When requesting an endorsement to remove a recruitment hold or initiate a new recruitment action, the following **weekly process** needs to be followed. Please contact your people partner with any queries about this process.

Responsible	Action
Hiring Manager or Clinical Lead / Senior Manager	By Wednesday noon: • Complete the Endorsement for Removal of Recruitment Hold form. Ensure that your justification is sound and the risks of not recruiting are clearly articulated • Gain endorsement from your Senior Approving Leader (see next page) • Return approved form to your Recruitment Partner
Recruitment Partners	Wednesday afternoon: • Assemble all endorsed forms for your recruitment areas • Record on Summary of Endorsement Requests and send to careers@tewhatuora.govt.nz
National Recruitment team	By Thursday 5pm: • Assemble Senior Leader-approved forms for noting by ELT and Cost Savings Programme forecast.
Executive Leadership Team	Tuesday: • Notes Summary of Submissions and financial forecast
National Recruitment team	By Tuesday 5pm: • Email to Recruitment Partners confirming which holds are removed
Hiring Manager or Clinical Lead / Senior Manager	Action recruitment decisions

Recruitment process: All other recruitment

Recruitment Partners

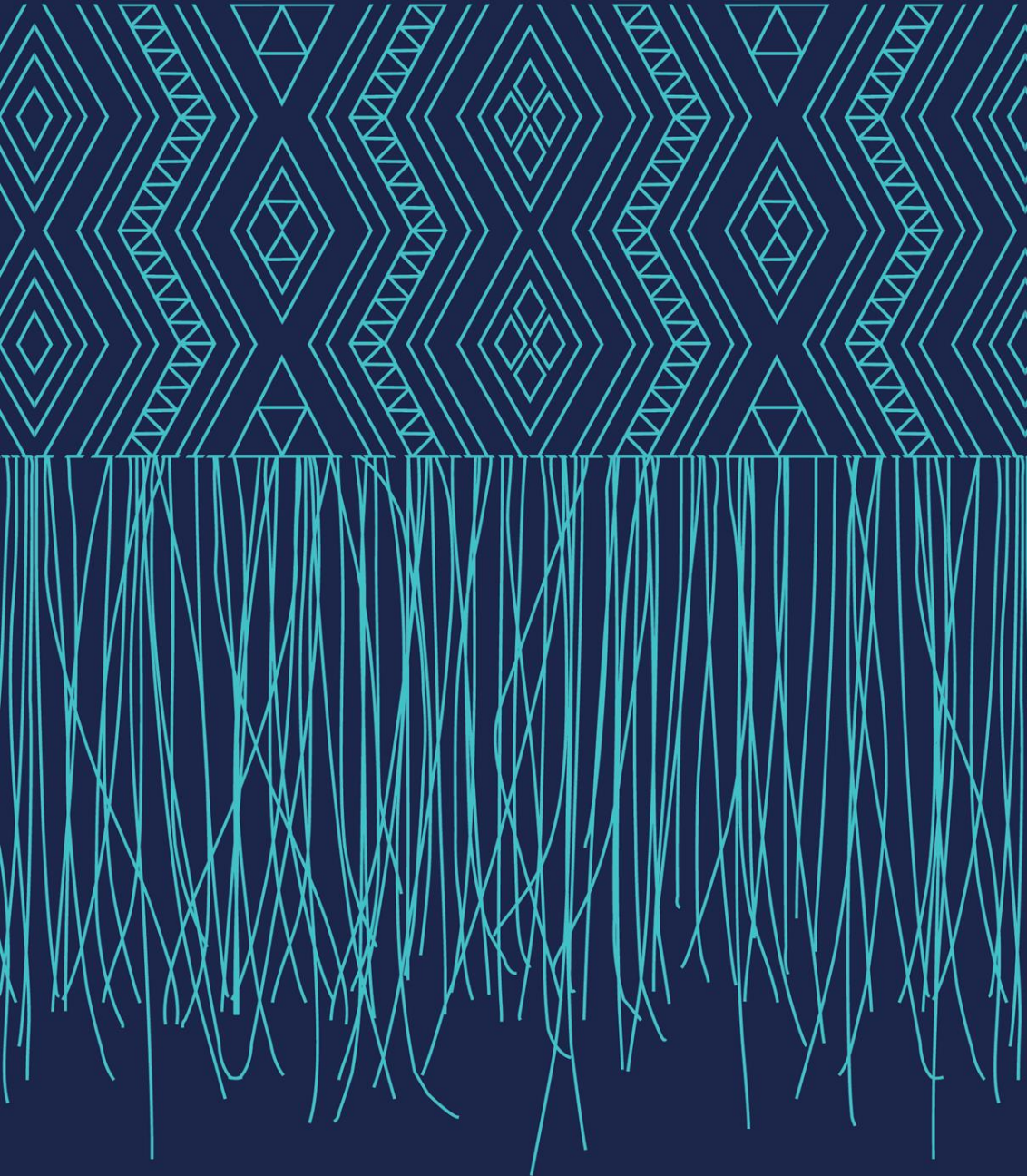
If recruitment would normally be actioned through a District, this process to be led by District / Shared Service Agency Recruitment Manager.

For Delivery & Enabling roles recruited through National Office, the process should be led by the Recruitment partner for the team.

Senior Leaders

Hiring managers should seek final approval of Senior Leader before submitting to National Recruitment team. The senior leaders as at 14 June are:

Business unit	Approving Senior Leader
Hospital and Specialist Services	Fionnagh Dougan (national roles only)
Clinical	Richard Sullivan
Commissioning	Abbe Anderson
Data & Digital	Leigh Donoghue
Finance	Rosalie Hughes
Hauora Māori Services	Riana Manuel
Improvement and Innovation	Dale Bramley
Infrastructure & Investment	Jeremy Holman
National Public Health Service	Nick Chamberlain
Office of the CE	Peter Alsop
Pacific Health	Markerita Poutasi
People & Communications	Andrew Slater
Transformation Office	Patrick O'Doherty



Appendices

Email to candidates where jobs are put on hold post the first regional review or 14 June whichever is the latest

Thank you for your interest in working with Health NZ and your recent application for the role of [x].

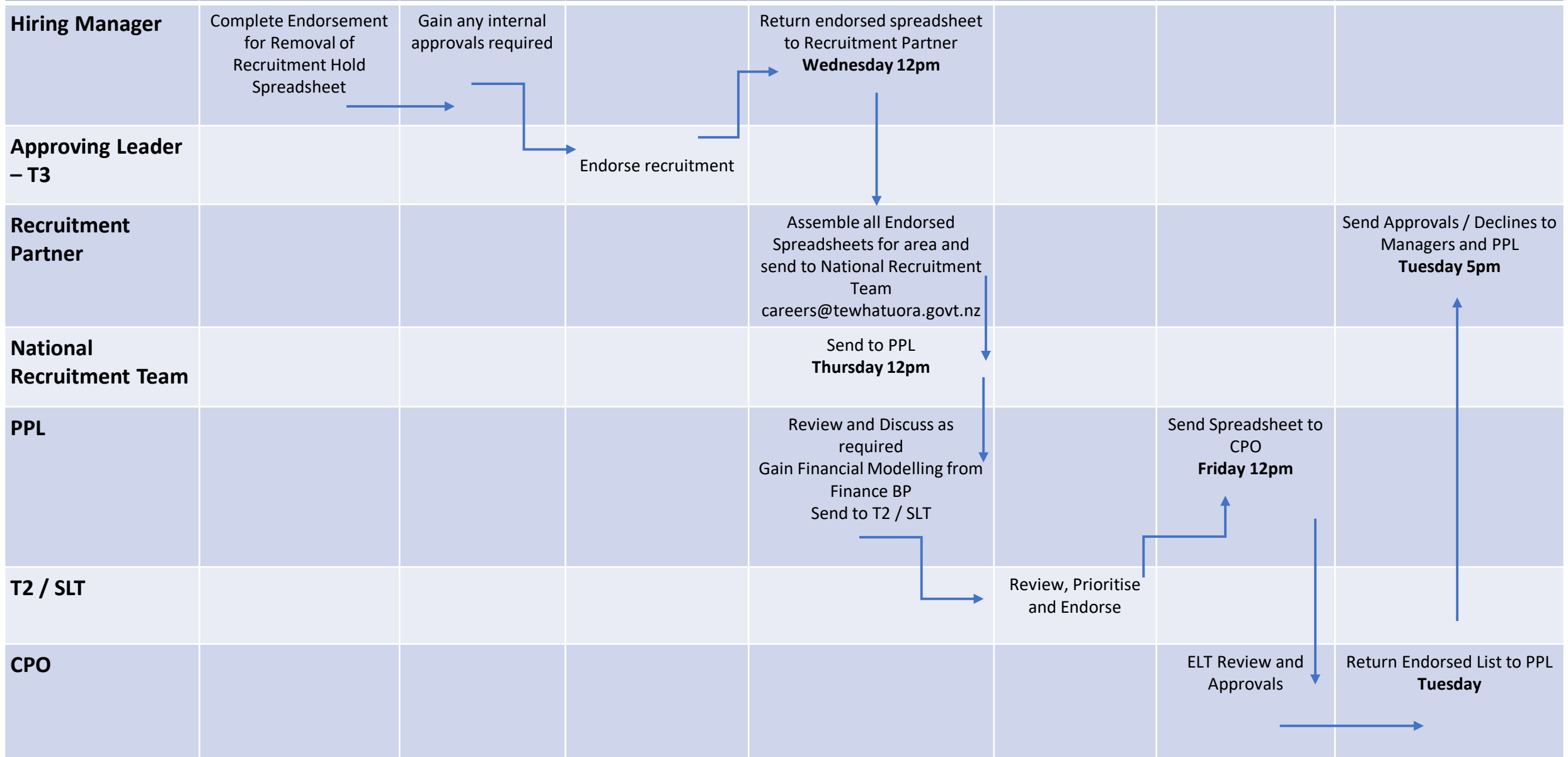
Health NZ has made the decision to pause recruitment for non-patient facing roles until we have approved our new plan for the year ahead.

This decision affects the role you have applied for.

We may advertise this role again in future. Should we do so, it would be after July 2024.

We appreciate that you have put considerable time and effort into submitting your application. The pause in recruitment is a short-term measure and we encourage you to keep an eye on our recruitment portals for future opportunities to work with us.

Requesting an Endorsement for Removal of Recruitment Hold





Issue #15 – 3 July 2024

Out of Scope

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Reminder – recruitment process guidance and FAQs

Message for you

Last week we shared our recruitment process guidance and FAQs, which are being updated regularly.

Actions

- Please take a look at the [Temporary Recruitment Process page on Te Haerenga](#).
- Any questions contact:
- For H&SS – your HR Partner.
- For all other recruitment – your People Partner.

See Document
3.1 pge. 4. for
copy of Te
Haerenga page

Out of scope

Home

Our organisation

What's happening

Business Units

Regions & local areas

Initiatives

Get help with

A-Z & Contacts

myHR

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Recruitment

Health & safety

Kiosk login Health NZ

Kiosk login Hauora Māori Service

Māhi & Taea login

National Office OrgChart

Directory of HR Forms

Edit

Not following

Site access

+ New

Promote

Page details

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Immersive reader

Analytics

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Share

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myPEOPLE

Temporary recruitment approval process

There have been some changes to the way we manage our budgets to address cost pressures, and this includes recruitment. It's important that everyone knows how to apply our new recruitment approval process.

About the change
On 13 June 2024 Health NZ announced an organisation-wide pause on all current and new recruitment of roles that are not patient facing, and Public Health roles that are not community facing.

Approval delegations are as follows:

Hospital & Specialist Services	Executive Regional Directors have authority and delegation to approve recruitment for their regions. Executive Regional Directors will also approve: - relocation packages if they are within national framework, and - recruitment costs for international search.
Regional Commissioning	Executive Regional Directors have authority and delegation to approve recruitment for their regions. Deputy CEOs will also approve: - relocation packages if they are within national framework, and - recruitment costs for international search.
National Public Health Service All other National Delivery & Enabling Services	National Director Public Health Service has authority and delegation to approve recruitment for all permanent and new fixed term offers. They will also approve: - relocation packages if they are within national framework, and - recruitment costs for international search.

What you need to know
Links on this page take you to general guidance documents and specific processes. FAQs and documents for Hospital & Specialist Services, NPHS and Delivery & Enabling Services.

Talk to your Recruitment Partner or HR Business Partner if you have any questions about these processes.

Extra support for people leaders
We have started a series of twice weekly online **Leading through Challenging Times** workshops to support people leaders through this period of particularly rapid and sustained change. They are also an opportunity to connect and discuss practical approaches to leading and managing in this environment.



Can't find what you need? Contact your Recruitment Partner or HR Business Partner

General guidance

Leading through Challenging Times' online workshops

Hospital & Specialist Services

PROCESS: Endorsement for recruitment - H&SS

Frequently asked questions: H&SS

Frequently asked questions: NPHS

NPHS Recruitment guidance

BULK SPREADSHEET: NPHS Request to hire new or replacement positions

Delivery & Enabling Functions

PROCESS: Endorsement for recruitment Delivery & Enabling

Frequently asked questions: Delivery & Enabling

FORM: Endorsement for recruitment - Delivery & Enabling

Recruitment use only: SUMMARY of endorsement for recruitment - D&E

Edit

Te Haerenga Help

Career opportunities

Health NZ Website

Health Information and Services

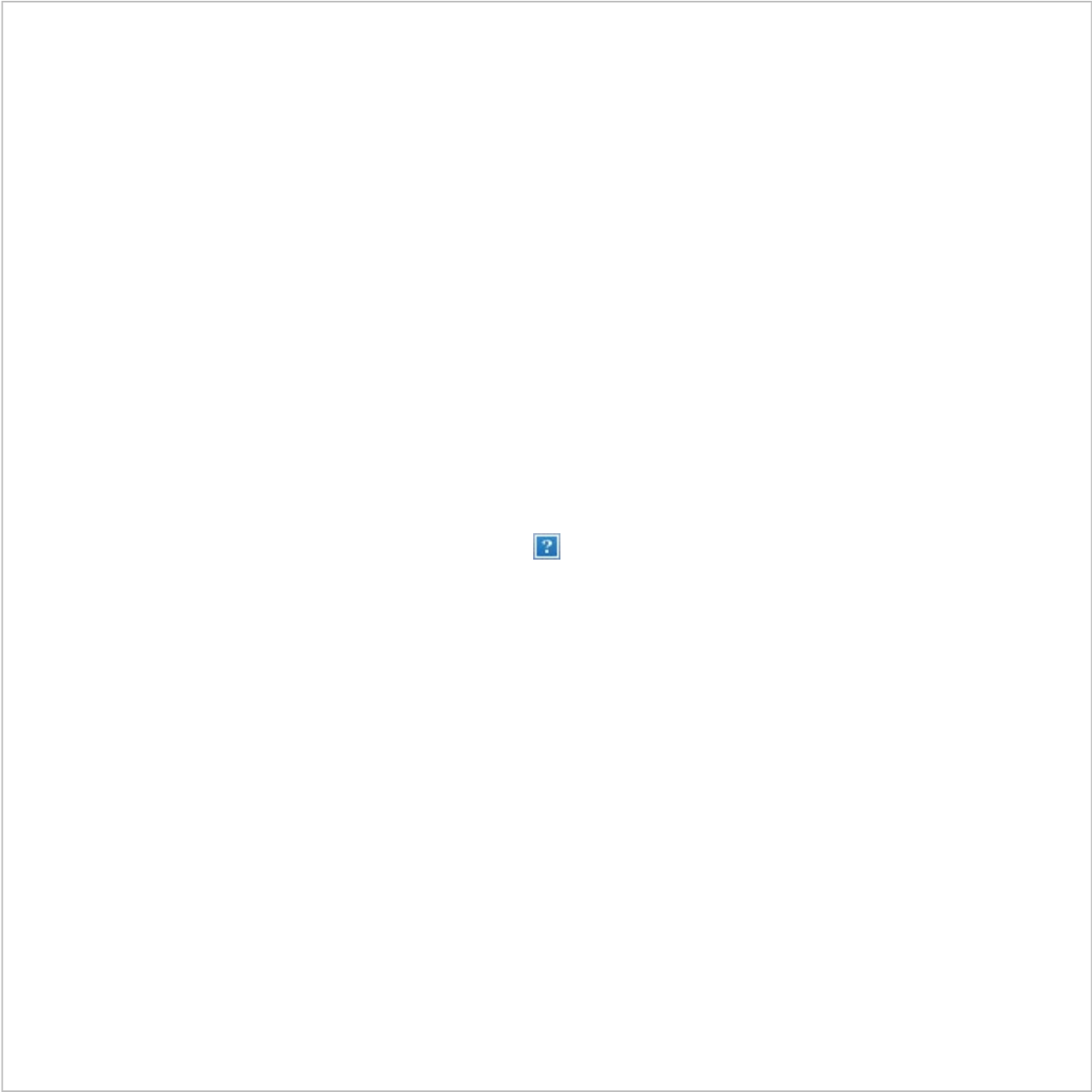
Ministry of Health

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18 July 2024

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- Message from the Chief Executive
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Message from the Chief Executive

Tēnā koutou katoa,

We’ve now commenced our 2024/25 financial year, our third year as Health New Zealand | Te Whatu Ora. Thank you for working alongside us in 2023/24, and for the important contribution you made – and continue to make – to supporting New Zealanders’ health and wellbeing.

The [Government Policy Statement 2024-27](#), a key direction setting document, has just been released and is important reading. The GPS sets out five priority areas that will help galvanise the focus of our work: Access, Timeliness, Quality, Workforce and Infrastructure.

The Government’s health targets also came into effect on 1 July. There are five national health targets and five for mental health and addiction. Delivering on the targets is central to our work ahead – you can read them in more detail [here](#).

The GPS and targets now critically shape Health NZ’s 3-year plan, the New Zealand Health Plan | Te Pae Waenga 2024-27, which we are currently completing. I look forward to further updating you on this plan ahead.

Recruitment has been a high-profile matter lately as we have been taking careful decisions to help manage our budget position. Clinical recruitment continues, led by regional leaders. You can read more about several new key clinical leadership appointments further below.

While we now look ahead to 2024/25 and beyond, it is also important we reflect on our progress so far. Health NZ’s latest [performance report](#) has just been released, which sets out a wide range of operational achievements, while also acknowledging significant ongoing challenges for the system.

Again, we are grateful for the role that all parties have played in our recent work; there is always a very wide range of contributions across the system.

Another recent highlight for me was supporting the Minister of Health to open Tōtara Haumaru, the exciting new surgical facility at North Shore hospital. You can read more in the article below. Thank you to everyone involved in bringing this important facility to life.

With Te Aka Whai Ora being formally disestablished on 30 June, I also want to again acknowledge the important mahi of all involved, and further extend the warm welcome of kaimahi to Health NZ. Better meeting the health needs of Māori remains central to our collective work as a health system.

I hope you enjoy this issue. The stories below are great examples of our continuing mahi together to support New Zealanders.

Ka nui ngā mihi,

Margie.

Out of Scope

Seventeen out of scope pages have been removed from this section of Attachment One HNZ00200949

CEO Report for week ending 28 October

**Health New Zealand
Te Whatu Ora**

Out of Scope

2.Operations

Content from weekly commissioner reports not repeated here.

Measure:

Financial:

- Achieve Planned Budget or better
- Implement agreed capital expenditure plan

Non-Financial:

- Achieve National Health Targets and Mental Health and Addiction Targets as soon as possible
- Improve clinical health & safety of services provision
- Maintain and/or improve where agreed with Commissioner Group/Ministrer service coverage minimum requirements as described in Operating Policy Framework including access to primary and community services

Financial Performance

Out of Scope

2.2 FTE Controls

While \$ budgets have been devolved, devolution of contracted FTE budgets have not been completed in all HSS functions. This is because the contracted FTE load is greater than budget, and the spread of savings down to RC level is not yet decided by GDO/COO level. Finance and Dep CEOs are working to clarify how establishment will be reset given over employment against budget in nursing.

On controls, I am confident Dep CEOs have workarounds to manage the flow of recruitment (i.e. spreadsheets) at regional level while P&C improve the automation of reports on the pipeline. The weekly starters/leavers report continues to offer assurance that we have more people leaving than starting – although marginal in context of overall size of organisation. We continue to see reductions albeit small with leavers > starters.

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Note pp 5-17 out of scope.

Recruitment approval process

For HSS and Regional Commissioning teams and NPHS

Deputy CEOs & the National Director Public Health Service (NPHS) have authority and delegation to approve recruitment for their regions.

For HSS:

- Your team should not progress any recruitment without evidence that Dep CEOs have signed this off or that they have formally delegated this to their GDO.
- Dep CEOs will also sign off recruitment costs if they are within national framework, policy and recruitment settings (add link)

For National & Enabling Functions

CE has delegation to approve as per below. CE will advise which ELT members have their delegations back in writing.

- All permanent new roles / replacement roles will only be approved by CE on Tier2 recommendations.
- New fixed term offers, extensions to fixed term and secondment agreements, new secondment arrangements and Higher / Extra Duties Allowances can be approved by Tier2s following discussion with Margie.
- Process for seeking approval
 - All approvals must be endorsed/approved by Tier3s for each of their services/business unit (to make sure they are within budget i.e. has been checked with their Finance Business Partner) before sending it to Tier2s.
 - Tier2s to approve/decline subject to discussion with Margie via email to Tier3s
 - Based on Tier2s approval and endorsement from Margie, Tier3s to commence recruitment via their Hiring manager and Recruitment team
(Hiring manager to provide the email approval from Tier2s as evidence of approval to recruitment)
For auditing purposes AskHR & Recruitment team will require a copy of the email from Margie confirming approval

Contractors

Contractors are managed outside of this process and Tier2s are able to approve within delegated authority, but Tier3s will need to ensure they have checked with their Finance Business Partners to make sure within budget.