Getting it right

A series of workforce planning and development resources

Developing your workforce

An overview of a systems approach to workforce development

Te Pou o te Whakaaro Nui

Getting it right series of resources

This document is one of the *Getting it right* series of workforce planning and development resources produced by Te Pou o te Whakaaro Nui. The documents in this collection are available from our website, www.tepou.co.nz.

Te Pou o te Whakaaro Nui

Contents

List of figures

List of tables

Developing
your workforce

Introduction

The vision of the 2016 *New Zealand health strategy* is that:

> **All** New Zealanders **live well, stay well, get well**, in a system that is **people-powered**, provides services **closer to home**, is designed for **value and high performance**, and works as **one team** in a **smart system** (p. 13).[9]

A competent and capable workforce is critical to achieving this vision. Mental health and addiction services need to have the "right number of people, with the right skills, in the right place, at the right time, with the right work attitude, doing the right work, at the right costs, with the right work output" (p. 1).[33] The workforce is the most valuable and costly resource within health services and is key to achieving population health gains.
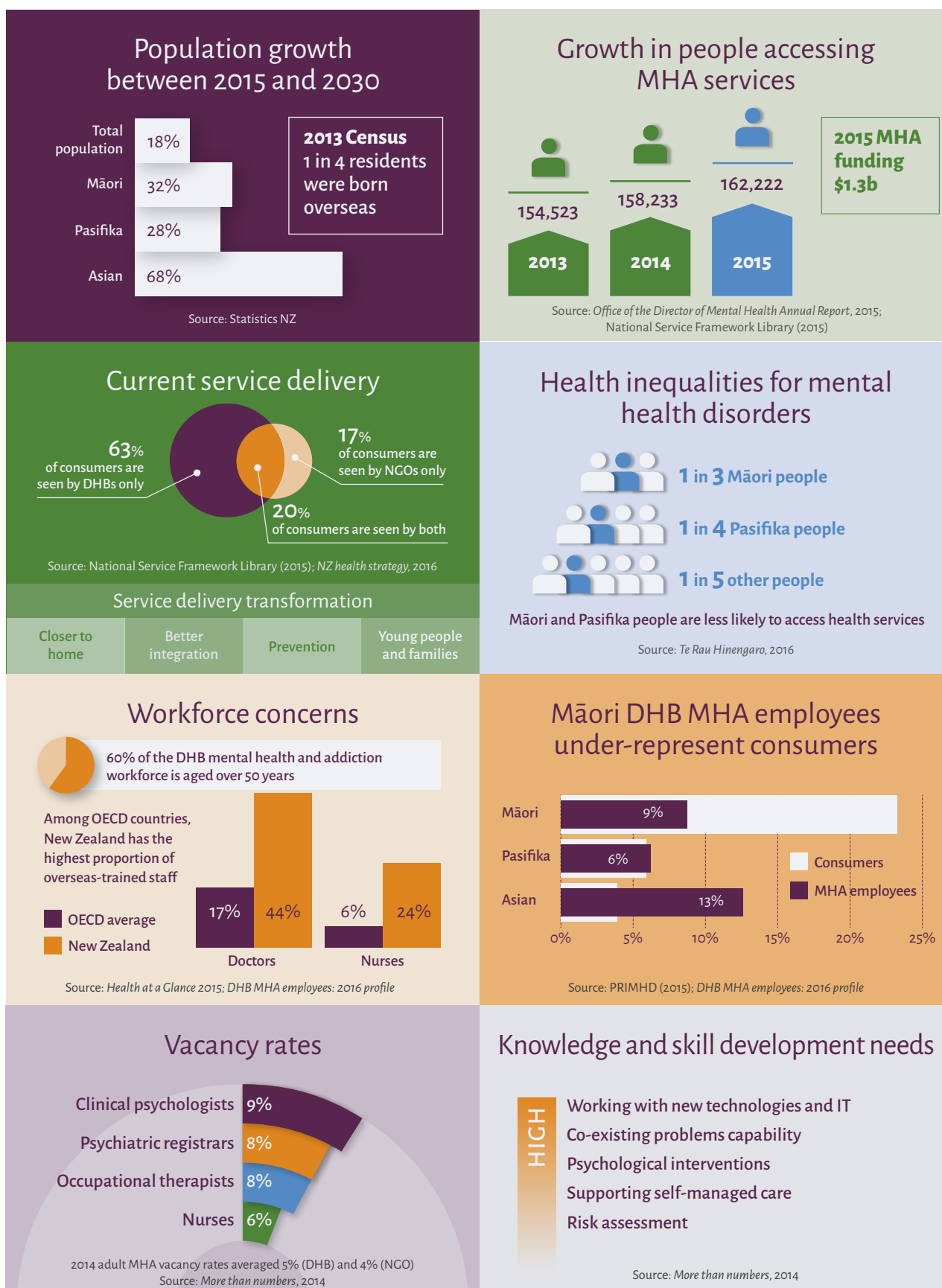
> A simple but universal truth is that there can be no health without a workforce.[5]

Effective workforce planning and development has never been more important. The workforce is ageing and there is a high reliance on overseas trained health professionals (see Figure 1). Recruiting and retaining skilled and qualified staff is a challenge for many services. The workforce needs to be capable of delivering new services, responding to emerging issues and risks, and supporting people to better manage their own care. A planned, rather than crisis driven, approach is required to respond to current and future challenges.

The way health services are delivered in the future will also change. The population is growing and becoming more ethnically diverse. A greater number of people than ever before are accessing services, yet health inequalities remain for some groups. Funding has also increased by 18 per cent over the last seven years, but has not kept pace with the growth in the number of people accessing services. Continuing to increase health funding is unsustainable and current resources need to be used more effectively to improve service delivery, the experiences of people accessing services, and outcomes (see Figure 1).[13]

This guide presents a strategic approach to workforce development that is driven by population health needs and health priorities to achieve better outcomes for all New Zealanders. It is one of the *Getting it right* series of workforce planning and development resources produced by Te Pou o te Whakaaro Nui. The documents in this collection are available from the Te Pou website. The focus of this guide goes beyond individual workers, and includes organisational and system level factors that impact on the ability of the workforce to respond effectively and efficiently to mental health and addiction issues. A broad and comprehensive approach to workforce development is taken based on the Ministry of Health's five domains.[10-12] This includes a focus on learning and development; recruitment and retention; organisational development; information, research and evaluation; and workforce development infrastructure. Workforce development is presented as the output of workforce planning, which supports identification of workforce priorities, risks and gaps. Guidance is included to support organisations in getting the most out of their investments in their people. As a result organisations will be better placed to strategically plan and develop their workforce for the future.

Population growth between 2015 and 2030

Total population	18%
Māori	32%
Pasifika	28%
Asian	68%

2013 Census
1 in 4 residents were born overseas

Source: Statistics NZ

Growth in people accessing MHA services

154,523 — 2013
158,233 — 2014
162,222 — 2015

2015 MHA funding $1.3b

Source: *Office of the Director of Mental Health Annual Report*, 2015; National Service Framework Library (2015)

Current service delivery

63% of consumers are seen by DHBs only

17% of consumers are seen by NGOs only

20% of consumers are seen by both

Source: National Service Framework Library (2015); *NZ health strategy*, 2016

Service delivery transformation

Closer to home	Better integration	Prevention	Young people and families

Health inequalities for mental health disorders

1 in 3 Māori people

1 in 4 Pasifika people

1 in 5 other people

Māori and Pasifika people are less likely to access health services

Source: *Te Rau Hinengaro*, 2016

Workforce concerns

60% of the DHB mental health and addiction workforce is aged over 50 years

Among OECD countries, New Zealand has the highest proportion of overseas-trained staff

■ OECD average
■ New Zealand

	Doctors		Nurses	
	17%	44%	6%	24%

Source: *Health at a Glance 2015*; DHB MHA employees: 2016 profile

Māori DHB MHA employees under-represent consumers

Māori	9%
Pasifika	6%
Asian	13%

0% 5% 10% 15% 20% 25%

□ Consumers
■ MHA employees

Source: *PRIMHD (2015)*; DHB MHA employees: 2016 profile

Vacancy rates

Clinical psychologists	9%
Psychiatric registrars	8%
Occupational therapists	8%
Nurses	6%

2014 adult MHA vacancy rates averaged 5% (DHB) and 4% (NGO)
Source: *More than numbers*, 2014

Knowledge and skill development needs

HIGH

Working with new technologies and IT
Co-existing problems capability
Psychological interventions
Supporting self-managed care
Risk assessment

Source: *More than numbers*, 2014

Note. DHB = District health board, MHA = mental health and addiction, NGO = Non-government organisation.

Figure 1. Key drivers for workforce planning and development within New Zealand's mental health and addiction services (sources [9, 7-13]).

Developing your workforce

Approach to workforce development

Workforce development is more effective when guided by a strategic workforce planning process. This section describes the framework for workforce planning and development illustrated in Figure 2.

Workforce planning and development

Workforce development is a key enabler to achieving population health gains. To be effective, workforce development must have people at its centre. Addressing population health needs and achieving better health outcomes for people is a key driver and outcome.

Workforce development is the output of workforce planning. Workforce planning supports the identification of key workforce needs, gaps and priorities. Aligning workforce development activities directly with gaps and priority areas identified through workforce planning leads to the most efficient use of resources.

There are five domains of workforce development, which include:

» learning and development

» recruitment and retention

» organisational development

» information, research and evaluation

» workforce development infrastructure.[11, 12]

The intended outcome of workforce development is to have the "right number of people, with the right skills, in the right place, at the right time, with the right work attitude, doing the right work, at the right costs, with the right work output" (p. 1).[33]

Workforce planning

Workforce planning is the systematic identification, analysis and planning of future workforce needs based on population health needs and priorities. The workforce planning process aims to describe the services needed in the future and identify their workforce requirements. The process then compares these findings with information about the current workforce to determine the gaps. The output of workforce planning is a workforce action plan that describes the workforce development activities needed to address those gaps.[7]

w shows the workforce planning and development framework, situating it in relation to the drivers shown in *Figure 1*, and its contribution to key workforce and population outcomes.

Workforce development

Workforce development is driven by, and is the output of, workforce planning. Workforce development is the set of activities developed to address specific gaps or risks identified through workforce planning to ensure the workforce is best able to deliver future services.[7] The Ministry of Health has taken a broad and comprehensive approach to workforce development. This approach considers the range of factors which impact on the ability of the workforce to respond efficiently and effectively to mental health and addiction problems.[22, 20] This includes a focus on individuals, as well as the organisations and systems in which they operate.

FUTURE DIRECTIONS

- Population health needs
- Health inequalities
- Demand for services
- Efficient use of resources
- Workforce demographics
- New technology, models of care

POPULATION OUTCOMES

"All New Zealanders live well, stay well, get well"

WORKFORCE PLANNING

What services are needed in the future?

What does the workforce need to look like?

What does the current workforce look like?

Gaps

WORKFORCE OUTCOMES

Right number of **people**
with the right **skills**
in the right **place**
at the right **time**
with the right **attitude**
doing the right **work**
at the right **cost**
with the right work **output**

OUTPUT: WORKFORCE DEVELOPMENT

- Recruitment and retention
- Information, research and evaluation
- Workforce development domains
- Organisational development
- Workforce development infrastructure
- Learning and development

Guiding principles

- People-centred
- Equitable
- Strategic
- Stakeholders
- Evidence-informed
- Whole-of-system
- Multi-level
- Sustainable
- Evaluated

Workforce action plan covering the five domains of workforce development

Figure 2. Workforce planning and development framework.[28]

Developing
your workforce

The five domains of workforce development include:

1. recruitment and retention: coordination and planning to increase workforce capacity and capability

2. learning and development: coordination and alignment with the needs of services and people accessing services

3. organisational development: building cultures and systems that will attract and grow workforce to better meet the needs of people accessing services

4. information, research and evaluation: building evidence to support workforce planning and development

5. workforce development infrastructure: including sector relationships, co-ordination, collaboration and funding.[10-12]

Capacity and capability

Two of the primary aims of workforce development is building the capacity and capability of the workforce.

Capacity is about finding out whether we have the people needed and whether we have enough to deliver services.[30]

Capability is about finding out whether the workforce has the right knowledge and skills and can apply these to achieve desired outcomes or whether these need to be developed or new people hired.[32]

The steps outlined in this guide provide a systematic and evidence-informed approach to building the capacity and capability of the workforce.

Workforce development activities

Workforce development activities are the actions, programmes or projects undertaken to address workforce development needs (see page 13).

Approach to workforce development

Guiding principles

Guiding principles for workforce planning and development are summarised in Table 1. These principles should be considered within the workforce planning process. They should also inform the development and design of workforce development policies, activities, programmes, and initiatives.
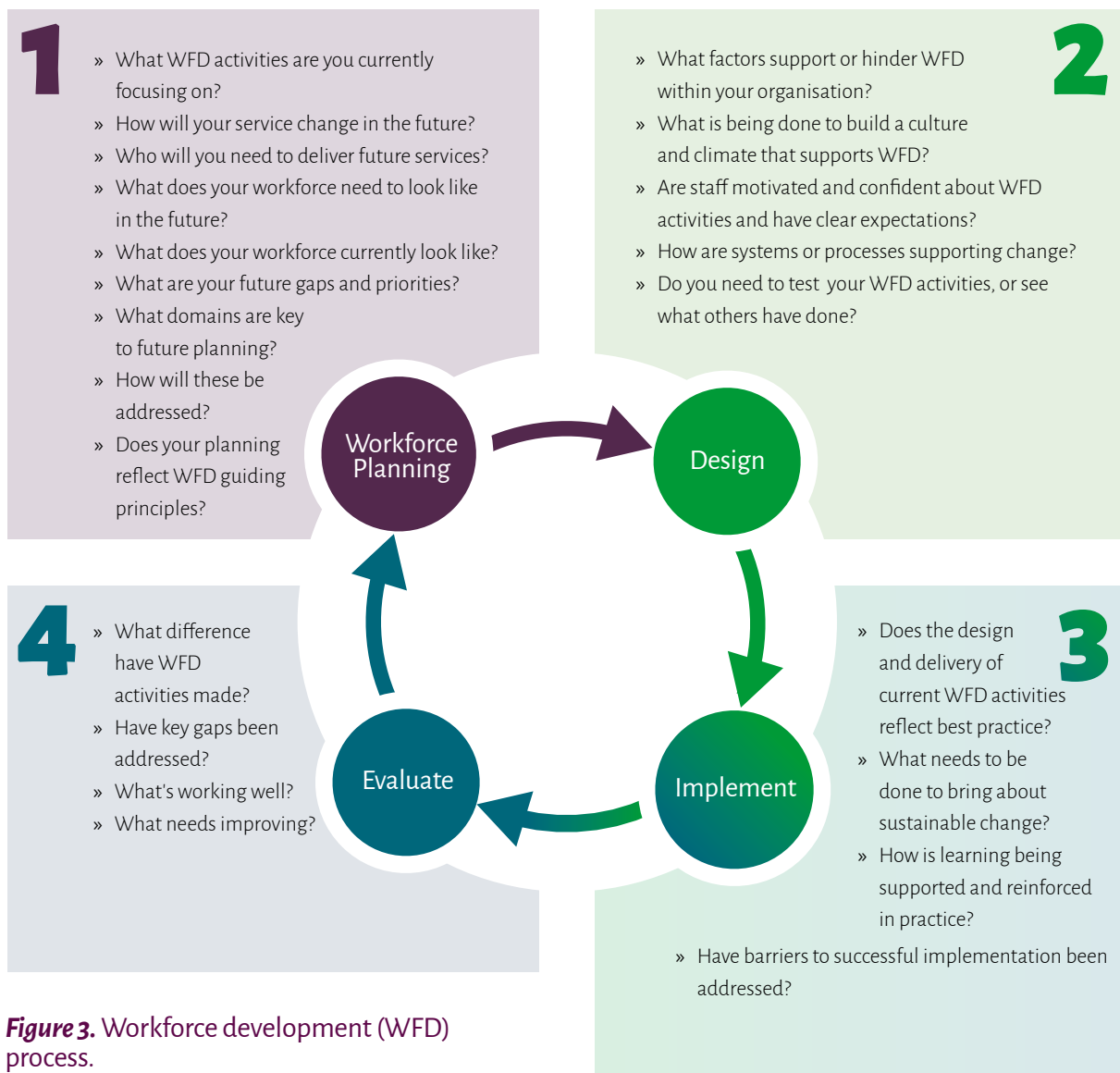
Table 1. *Workforce planning and development guiding principles*

Principle	Rationale
People-centred	Health providers need to have a greater focus on people, understand people's needs and preferences, and partner with people to design services to meet these.
Equitable and appropriate	All communities must be able to expect equitable outcomes from services, and have equitable access to services that are provided in the manner most appropriate to their needs.
Strategic	Workforce planning and development must be strategic in nature, align with the future vision and direction of an organisation and local, regional and national bodies, and, reflect identified priorities, and population issues.
Stakeholders	Providing opportunities for key stakeholders in the workforce planning and development process, including consumers, frontline workers, managers/supervisors, funders and policy makers, helps ensure greater buy-in and that activities meet the needs of various stakeholders.
Evidence-informed	Activities and programmes informed by the best available evidence, including research evidence, clinical expertise, and consumer and family perspectives, are more likely to be effective.
Multi-level	A range of factors are likely to impact on a particular workforce development issue. A comprehensive workforce development programme recognises the complexity of real life work practice and includes interventions at more than one level (eg individual *and* organisational).
Whole-of-system	Workforce planning and development that is better integrated across the workforce (clinical and non-clinical), across organisations (finance and services) and across services.
Sustainable	Workforce development activities often involve a change to policies, procedures or work practices. Sustainable change that is continued in the longer term requires ongoing support and resources. Strategies to ensure sustainability are an important issue to be addressed at the planning stage of any workforce development activity.
Ongoing evaluation	Regular evaluation of the process and outcomes of workforce development activity can provide: » valuable feedback to participants and stakeholders » opportunities for continuous quality improvement » useful information regarding the most effective strategies (and also what doesn't work!).

Note: Adapted from Roche & Skinner (2005) and Health Workforce Advisory Committee (2005).[23, 6]
Additional sources Salas et al., (2012),[25] Fritzen (2007); Minister of Health (2016).[4, 9]

Developing your workforce

Workforce development process

A four step process is presented in *Figure 3* to support successful workforce development (WFD).[a]

1
- » What WFD activities are you currently focusing on?
- » How will your service change in the future?
- » Who will you need to deliver future services?
- » What does your workforce need to look like in the future?
- » What does your workforce currently look like?
- » What are your future gaps and priorities?
- » What domains are key to future planning?
- » How will these be addressed?
- » Does your planning reflect WFD guiding principles?

2
- » What factors support or hinder WFD within your organisation?
- » What is being done to build a culture and climate that supports WFD?
- » Are staff motivated and confident about WFD activities and have clear expectations?
- » How are systems or processes supporting change?
- » Do you need to test your WFD activities, or see what others have done?

4
- » What difference have WFD activities made?
- » Have key gaps been addressed?
- » What's working well?
- » What needs improving?

3
- » Does the design and delivery of current WFD activities reflect best practice?
- » What needs to be done to bring about sustainable change?
- » How is learning being supported and reinforced in practice?
- » Have barriers to successful implementation been addressed?

Workforce Planning → Design → Implement → Evaluate

Figure 3. Workforce development (WFD) process.

1. **Workforce planning:** needs assessment, identify gaps between future workforce required and current workforce, determine priority risks and gaps (for example, *Getting it right* workforce planning approach).

2. **Design:** design workforce development activities with supporting engagement strategies (for example, activities needed to support implementation).

3. **Implement:** deliver or carry out the activity (for example, implementation and post-implementation activities).

4. **Evaluate:** monitoring and evaluation (for example, have the original objectives been met, if not, why not?).

a – Across the literature on models of change, programme implementation, and workforce development. See Damschroder et al., (2009).

Step 1: Workforce planning

The first step in the workforce development process is workforce planning. Workforce planning or assessment involves the collation of key information to identify priority workforce issues and gaps that need addressing through workforce development activities. Workforce planning provides an understanding of key strategic goals and objectives that form the basis for determining workforce needs.

It is important to establish the level of organisational commitment to and confidence in addressing workforce issues. What stage is the organisation at in terms of workforce planning (see Table 2)? Is your organisation in the early stages, developing systems, or have they already established workforce planning practices? Is your organisation ready to consider adopting evidence-informed programmes? Is it already preparing to do this, in the initial stages, or been doing this for a while? Organisations who are ready for change, prepared to put in effort, persevere and provide support are most likely to have success in developing their workforce.[31]

Table 2. *Levels of workforce planning maturity*

Planning maturity	Key features or activities
Early stages	» Aware of need for workforce planning. » Have some systems and processes in place, or are establishing these to support workforce planning. » Focused on improving workforce data to support comprehensive, co-ordinated workforce planning.
Developing	» Embedding workforce planning processes in regular planning cycles. » Collecting and analysing data to identify needs, and inform and improve workforce development strategies. » Carrying out some monitoring and measuring of workforce planning and development strategies and progress.
Established	» Have comprehensive workforce planning processes in place that are integrated with other aspects of business planning. » Are collecting and analysing data from a range of sources to identify needs, and inform and improve workforce development strategies. » Monitoring and measuring progress to improve and refine workforce development as needs change.

Adapted from: Office of Auditor General, 2009 (p. 12).[18]

The workforce planning process provides an evidence base to determine what the most significant areas for change are and key workforce changes required. This includes those workforce groups that have the greatest impact on service delivery. This will help to maximise the use of limited resources.

Key questions when interpreting needs and risks:

» What are the existing or potential skill gaps?

» What is the potential for loss of critical skills and knowledge?

» What are the existing or potential risks arising from skill supply and demand?

» Are there any risks to recruitment and retention?

» Does something need to be done?

» What are the consequences of doing nothing?

Once key risks and gaps have been identified, different options for achieving the organisation's strategic vision and goals will need to be appraised. Organisations need to decide which options are best suited to their situation. Table 3 includes potential workforce development actions in relation to each of the five domains of workforce development. For complex issues, multiple activities addressing different levels (for example, individual, organisational, and systems) may be required. Workforce development plans and goals can then be clearly identified.

Key questions when considering different options:

» What needs to be done?

» What will be needed to establish the activities?

» Which activities are best suited to my organisation's situation?

Table 3. *Workforce development activities (adapted from Roche & Skinner, 2005)* [21]

Domain	Activities
Recruitment and retention	» Advertising, selection and recruitment. » Induction. » Incentives and allowances. » Performance management. » Rewards and benefits, remuneration. » Work patterns, for example full-time, part-time, temporary and casual. » Workload. » Job design. » Variety, complexity and autonomy.

Domain	Activities
Organisational development	» Organisational culture and climate. » Team building. » Communication and feedback. » Change management. » Operating structures. » Staff deployment. » Clarification of staff roles. » Policies and processes.
Learning and development	» Mentoring. » Clinical supervision. » Online discussion groups, communities of practice, study groups. » Professional association membership. » Job rotations, secondments. » Attendance at conferences and seminars. » Education and training — open and flexible, external, internal, e-learning. » Working alongside experienced colleagues, cross-organisational exchanges. » Project work. » Site visits. » Staff retreats.
Information, research and evaluation	» Clinical guidelines. » Workshops. » Education outreach. » Reports. » Journal clubs. » Access to information and research.
Workforce development infrastructure	» Human resource policies and practices. » Policies, for example equality and diversity. » Networks. » Bonding scheme. » Regulation, for example Health Practitioners Competence Assurance Act.

Developing
your workforce

Tools and resources

Several tools and resources are available to support workforce planning.

» *Getting it right: Workforce planning guide* has been specifically designed to support workforce planning for New Zealand mental health and addiction services and is available at www.tepou.co.nz

» The *Workforce planning and intelligence framework* has been developed to inform workforce planning for the health sector by district health board general managers human resources and Health Workforce New Zealand and can be accessed at http://centraltas.co.nz/strategic-workforce-services/workforce/workforce-intelligence-and-planning-framework/

Step 2: Design

Step one – workforce planning should have identified the workforce development activities which are a priority for the organisation, based on the five domains (learning and development; recruitment and retention; organisational development; information, research and evaluation; workforce development infrastructure). These activities most frequently aim to build the capacity or capability of the workforce to deliver quality services and achieve better outcomes for people accessing services.

Once the key activities have been identified, Step 2 – Design involves identifying factors that can help support or hinder their success and sustainability of the workforce programme, then looking at ways of addressing these. Consideration should be given to factors before, during, and after the workforce development activity. Summarised in step 3 are some ways of enhancing changes in practice following the programme delivery.

The outcome of any workforce development activity will also be influenced by multiple factors on different levels which interact with each other.[2] Key factors important to consider are summarised in Figure 4 and include:

- » features of the activity (for example, characteristics of the workforce development activity to be implemented, such as its source, perceived usefulness, potential for adaptability to meet local needs, and implementation costs)

- » individuals (for example, people involved in the activity or programme or the process of implementation)

- » organisation (for example, the organisational context within which implementation will occur)

- » community (for example, the social, political and economic context within which the organisation resides).[2]

Workforce development activity or programme

One of the critical success factors is having an effective workforce development activity or programme. This involves the use of the best available information or evidence to inform the design and content of the activity. When designing or developing new activities, features which are more likely to support adoption and use in practice include:

- » having a credible source (for example, internally or externally developed)

- » perceiving the activity as useful, timely, compatible with current practice, simple and able to be tested or trialled (for example, level of expertise required, manualised programme, easy to learn, able to test on a small scale)

- » adapting, tailoring, or refining activities/ resources to meet local needs

- » examining the cost and other resource requirements (for example, activity and implementation costs)

- » perceiving benefits as outweighing risks and costs over current practice (including time, competing priorities, and opportunity cost).[2]
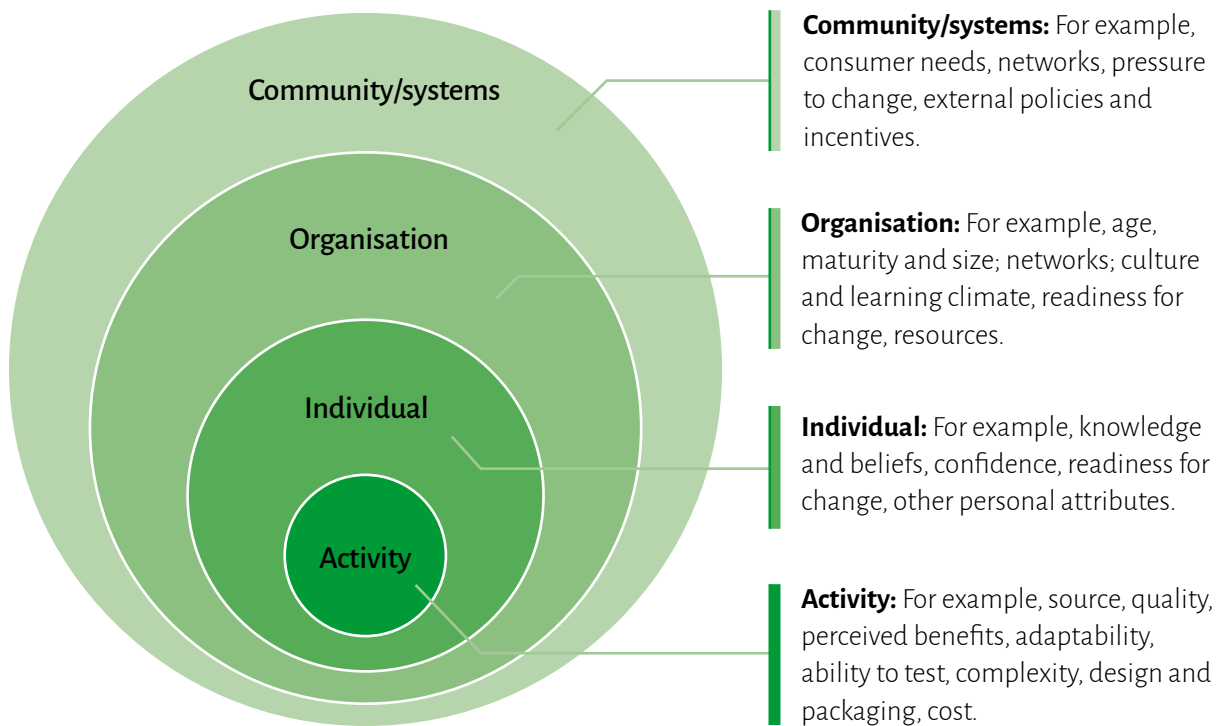
Figure 4. Factors supporting the success of activities within health services (adapted from Damschroder et al., 2009).[2]

The diagram shows nested circles with the following labels and descriptions:

Community/systems: For example, consumer needs, networks, pressure to change, external policies and incentives.

Organisation: For example, age, maturity and size; networks; culture and learning climate, readiness for change, resources.

Individual: For example, knowledge and beliefs, confidence, readiness for change, other personal attributes.

Activity: For example, source, quality, perceived benefits, adaptability, ability to test, complexity, design and packaging, cost.

Organisation support

Organisations can do a number of things in the design stage to support the success of workforce development activities within their organisation, including:

» effectively communicating and gaining buy-in from stakeholders for the desired changes

» signalling the value of the activity to the organisation (for example, by mandating the activity)[b]

» establishing a clear need for change

» ensuring supervisors have sufficient information to prepare their staff

» ensuring activities are easy to implement within existing processes

» assessing whether the organisation has sufficient resources to make changes (for example, high workforce turnover is a barrier to implementation).[2]

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b – While this may increase motivation, it will not necessarily increase capacity. It may also divert attention away from other innovative programmes.

Step 2: Design

Organisations can also help build staff motivation and confidence, by:

» involving intended participants in planning activities

» providing a realistic preview of the activity or programme

» communicating the benefits, usefulness and relevance to their work

» involving people to support the implementation (for example, champions, leaders, co-ordinators).

Community or systems factors

Broader community and systems factors can also influence the outcomes of workforce development activities, for example:

» by gaining a better understanding of the views and needs of people accessing services, including cultural beliefs about support

» implementing and testing the activity in one organisation may encourage others to follow

» collaboratives, guidelines or external mandates, policies or incentives that support the activity. [c]

Tools and resources

» *Guide on the implementation of evidence-based programs* includes a checklist to support programme implementation (see page 27), available at https://www.publicsafety.gc.ca/cnt/rsrcs/pblctns/gd-mplmnttn-vdnc-prgrms/index-eng.aspx

» Laura Damschroder and colleagues describe a framework for advancing implementation science about what works, where and why across multiple contexts, available at https://implementationscience.biomedcentral.com/articles/10.1186/1748-5908-4-50. Included is further description of the factors summarised in Figure 4 (see additional file 3).

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c – This includes regulations, performance payments, public reporting and funding cycles.

Developing
your workforce

Step 3: Implement

This step involves delivering or implementing the workforce development activity according to the project plan. In step 2 – factors likely to help support or hinder the delivery or implementation of the workforce development programme should have been identified as well as strategies for addressing these.[19]

Following the delivery of a workforce development programme, some of the ways changes in practice may be supported are outlined below. These should be considered and incorporated in step 2, and include:

» follow-up assistance (for example, coaching or mentoring)

» debriefing (for example, reflecting on the relevance of the experience for practice, what went well and opportunities for improvement)

» learning aids (for example, manuals or course material that can help recall course content)

» cues/prompts (for example, reminders or posters encouraging the use of new knowledge and skills in practice)

» technological tools (for example, e-coaching, skype or electronic reminders)

» communities of practice (for example, people sharing interests or similar experiences via online forums)

» refresher training (for example, scheduling refresher training where the loss of knowledge and skills is inevitable).[1, 8, 24, 25]

An organisation can also influence whether an activity or programme is successfully implemented in practice. Leadership support is critical to the success of any programme. Individuals need opportunities to practice new tasks and attitudes, incentives and rewards, feedback, supervision, and barriers to be removed.

Tools and resources

» *How well do you develop your people?* A tool for managers to reflect on workforce development within their organisation, available at https://www.mindtools.com/pages/article/team-development.htm

» *Training your workforce: Getting the most out of training and development.* One of the tools and resources available in this series focused specifically on training and development, available at www.tepou.co.nz

Step 4: Evaluate

In the final step the workforce development activity or programme is monitored and/or evaluated.

Monitoring workforce action plans

Workforce action plans should be monitored to assess whether implementation is occurring as planned and if there are any emerging issues. Monitoring also helps assess whether the plan is working or not, whether it needs adjusting, or updating to address new workforce issues.

Evaluation

Evidence suggests workforce development activities that are evaluated are more likely to be effective.[3]

Prior to implementation it is important to clearly define and establish what the programme is trying to achieve. This requires considering what long-term success will look like. Completion of a programme logic in step 2 the design stage is useful. This will help clarify what the intended outcomes are, how these will be measured, what information is required to monitor progress, and how often this should be reviewed.[18]

The evaluation method should consider:

» what data currently exists which can be used to monitor success (for example, Programme for the Integration of Mental Health Data [PRIMHD], Key Performance Indicator [KPI] data, workforce stocktakes (such as *More than numbers*), and Health Workforce Information Programme [HWIP] data)

» the costs of applying methods and analysing data.

An evaluation can support:

» making decisions about the programme

» providing feedback to participants, those delivering and developing the programme

» helping managers understand future budget and resource allocations

» identifying areas for potential improvement

» determining whether another approach is required.

Tools and resources

» *Workforce planning toolkit: A guide for workforce planning in small to medium sized Victorian public sector organisations.* Includes questions to consider when establishing success criteria for reviewing a strategy or plan, available at http://vpsc.vic.gov.au/resources/workforce-planning-toolkit/

» *Evaluation toolkit*, provides a basic approach and some tools for evaluating workforce development. Although developed for an industrial workforce it could be adapted for the health workforce, see http://www.cewd.org/workforce/evaltoolkit.pdf

» *Kirkpatrick partners' website* provides an overview of the Kirkpatrick model of training evaluation and links to useful resources, see http://www.kirkpatrickpartners.com/

Next steps

Most organisations are already undertaking some form of workforce development. Figure 3 on page 11 includes questions to assist you in assessing where you are now and what you can do next. It also aids reflection on whether your current workforce development activities reflect the critical success factors – workforce planning, the five domains of workforce development, and guiding principles for workforce planning and development.

Workforce planning

» Workforce development should be the output of workforce planning.

» The process of workforce planning will assist you in clarifying priority areas and gaps, and selecting the most appropriate workforce development activities.

» Workforce planning will lead to the development of a workforce action plan outlining workforce development activities.

Domains

» The workforce planning and development process should consider the five domains of workforce development when selecting strategies to address identified gaps.

» The five domains include: learning and development; recruitment and retention; organisational development; information, research and evaluation; workforce development infrastructure.

» For complex issues, multiple activities focused on different levels may be required.

Guiding principles

» The process of workforce planning and development should also be based on the guiding principles: people-centred, equitable, strategic, stakeholder engagement, evidence-informed, multi-level, whole of system, sustainable, and involve ongoing evaluation.

Summary

The workforce is the most important resource within mental health and addiction services and is critical to achieving population health gains. Workforce development supports the delivery of quality services that are responsive to people accessing them. A strategic approach to workforce development that is informed by workforce planning will help ensure investments in people support the achievement of key strategic goals and are undertaken in priority areas. The success of any workforce development action depends on how well designed the activity is, and organisational support for this before, during and after implementation. This guide enables organisations to reflect on their current practice and what is required to build the workforce necessary to deliver future services. Sustainable change will take time but is imperative in responding to increasing demand, population growth, and more effective use of current resources. The workforce is key to people living well, staying well, and getting well.

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