#### **Executive Leadership Team**

#### Ngātahitanga Pulse Survey 1 – results and next steps

Ngātahitanga Pulse Survey 1 – results and next steps					
Date:	3 February 2023	Author:	Jeremy Caird OD Lead, Megan Scott OD Lead & Joanie Sims, Interim National Organisational Development & Capability Lead		
For your:	Approval	Approved by:	Jim Green, Interim Chief People Officer		
Seeking funding:	No	Funding implications:	No		
То:	ELT				

#### Purpose

This paper shares the first nationwide Ngātahitanga pulse survey results with the Executive 1. Leadership Team (ELT) and outlines, for discussion, proposed next steps. We will bring a further paper to you on 14 February for decisions on next steps.

#### **Recommendations**

- 2. The ELT is asked to:
  - a) note the results of the first Ngātahitanga Pulse Survey provided by AskYourTeam, our survey provider
  - b) **discuss** the overall response and communications approach
  - note that you will receive further advice on 14 February on specific proposed next steps, c) including communications activity
  - agree that initial results will be shared with union partners at the Strategy Health d) Engagement Forum (SHEF) meeting on Thursday 9 February, in line with previously established expectations.

#### **Contribution to strategic outcomes**

The pulse survey contributes to building a health system that gives effect to te Tiriti o Waitangi, and to ensuring that health and care workers are valued and well-trained for the future health system in line with our Te Pae Tata commitments, by:

- Strengthening our understanding of our staff's experiences so that we can improve them a)
- b) Identifying instances of racism or behaviour inconsistent with our expectations for giving effect to te Tiriti o Waitangi

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c) Helping us understand and so strengthen our organisation's culture

#### Background

- 4. In October 2022, the ELT approved the running of a staff survey to establish a baseline measure of key engagement and culture by running a pulse survey 3 times over an initial six-month period. The goal was to find out what's working well and not so well at the front line of each of the former districts, enabling functions, and other former entities.
- 5. The first pulse survey was run in November-December 2022. National results have now been analysed, with the national results analysed by 30 January 2023.

#### Discussion

- 29% of Te Whatu Ora staff (27,764 people) responded to the pulse survey, answering a series of 16 questions, as well as being offered a free text field. 74.9% (25,756) of those who completed the survey also responded to the free text questions.
- 7. Free text comments include many constructive and genuine suggestions. For some employees it understandably provided a confidential platform to discuss relevant concerns to their role and their environment. A small number of employees raised specific personal concerns – which are being followed up appropriately utilising current employment processes.
  - a) In the process of sharing the survey themes, we will include a small number of local free text comments. Also, all local free text comments will be available to local P&C staff via their respective survey dashboards.
  - b) There is a reasonable likelihood that some of the free text comments will appear in the media after they are communicated to employees. We recommend responding with our approach of owning the results and of being transparent.
- The pulse survey identified five themes, each with specific sub-themes emerging from the responses and free text.

Resources	Leadership & Transition	People Experience
<ol> <li>Resources         <ol> <li>More people</li> <li>Better pay</li> <li>Lower workload</li> <li>Facilities, Equipment</li> <li>Money, funding</li> </ol> </li> </ol>	<ol> <li>Leadership &amp; Transition         <ul> <li>Communication, transparency</li> <li>Regional vs national, coalface vs manager</li> <li>Change</li> <li>Leadership, management</li> </ul> </li> </ol>	<ol> <li>People Experience         <ul> <li>a) Respect, appreciation, care, support</li> <li>b) Training and development</li> <li>c) Diversity, inclusion, cultural needs</li> <li>d) Stress, fatigue</li> </ul> </li> </ol>
Working Together	Care & Equity	
<ul> <li>Working Together         <ul> <li>a) Unity, togetherness, co- operation</li> </ul> </li> </ul>	<ul> <li>5. Care and Equity <ul> <li>a) People to support care</li> <li>b) Timely, quality care</li> </ul> </li> </ul>	

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b)	Systems and processes	c)	Resources to support	
c)	Information technology		care	
	and data	d)	Communities, allied	
d)	Strategy, structure,		health, primary care	
	operating model	e)	Equity of care	
e)	Efficiency and	f)	Impact on wellbeing	
	effectiveness	g)	Culturally appropriate	
f)	Administration		care	
		h)	Care for mental health	
			and addiction	· · · · · · · · · · · · · · · · · · ·

#### **Actions and Solutions**

9. In response to these results, we have launched two streams of work to identify actions and solutions. First, National Priorities, which look at actions led from the National Office which are common across the motu and which have national solutions. The second stream is Local Opportunities and Quick Wins. These may overlap with national solutions but will have a distinct local flavour and a focus on remedial actions

#### **National Priorities**

10. Based on the pulse survey results and what our people are telling us, we recommend that ELT target the following two priority actions: Workforce and Health System Changes. These topics were identified by employees as the areas of most concern via the survey questions and their scores, and/or via free-text feedback.

Priority	Workforce (Resourcing)	Health System Changes (New Operating Models)	
EvidenceResourcing is the lowest score (33%) in the survey. It is about employees having the resources (e.g. time, people, budget, facilities, equipment) to do their job. This was strongly reinforced in the free-text comments where the most frequently identified concern was resourcing (62%).		The survey question around changes in the health system scored (56%). However, it was the second most frequently identified concern in the free-text comments.	
Actions and Solutions 3. Share the intended timeframes and milestones.		<ol> <li>Communicate the reasons and rationale behind the changes – the why?</li> <li>Share the intended timeframes and milestones.</li> </ol>	

#### Local Opportunities and Quick Wins

11. We also want to empower local teams to design actions that can be taken in the short term to reflect their local context. Local teams will be supported by Ask Your Teams and our People & Culture teams with these actions.

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12. Potential local opportunities and quick wins have been summarised in advance by combing through the free-text response. These will be shared with local teams at the same time we share their local results.

#### **Implementation and Communications Approach**

- 13. Our communication aims to:
  - a) Share results and actions from the survey in a timely and transparent way to demonstrate follow through and build trust.
  - b) Tell our engagement story on our terms shine a light on highly engaged teams, be honest about low engagement where it exists, and clearly communicate what change/improvements will and are being made.
  - c) Lift the visibility of senior leaders (national/regional/local) as champions of engagement, improvement and change.
  - d) Ensure people leaders are informed and well equipped to share results.
  - e) Share progress against actions over time.
  - f) Engage with our unions to share results.

#### **Union Engagement**

- 14. We will share a summary of results with unions nationally at SHEF on 9 February 2023.
- 15. We will share local results with unions locally from mid-late February, as we roll out the results across the motu.

#### **Financial implications**

16. Depending on the agreed national and local actions there may be financial implications in responding to matters raised. As a starting point, local leaders will be expected to manage interventions in response within local budgets; but we will provide ELT with further advice if we identify significant national, regional or local opportunities to address the survey results which require new funding.

#### Te Aka Whai Ora contribution

Engagement has occurred with Te Aka Whai Ora on this initiative. These results will be shared with Te Aka Whai Ora as well as an opportunity to deep dive into the ethnicity data and partner on key actions. Further korero is to occur with Te Aka Whai Ora on Pulse 2.

#### **Next steps**

18. We will bring you a further paper on 14 February, reflecting our discussion of these results, with specific next steps including a detailed plan to communicate results with our staff and union

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partners. In the interim, we propose to share initial results with union leaders at the Strategic Health Engagement Forum (SHEF) on 9 February. ation Act 1982

- 19. Implementation milestones from here are:
  - 7 February first results discussion with ELT. a)
  - b) 9 February – overview discussion with unions at SHEF and 1:1.
  - c) 14 February – further ELT discussion, refine actions and next steps.
  - d) 22-24 February – all staff communications, i.e. National Pānui, Leaders Hui.
  - 20 February onwards communicate results to local ELTs e)
  - f) 20 February onwards – engagement with unions locally
  - 27 February onwards communicate local results locally g)
  - March onwards benefit tracking and monthly reporting to ELT h)
- 20. You can also expect further advice on our next proposed Pulse survey soon.

#### **Attachments**

- Appendix 1: Te Whatu Ora Aggregated Pulse Survey 1
- Appendix 2: Summary national quick wins at local level

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iannation Act 982 Released under the Aggregated Results

# Acknowledgement

It has been a privilege to support Te Whatu Ora with the important task of seeking feedback from your people. We value the trust you have placed in us to partner with you at this most crucial and formative time, embarking on the biggest single journey in New Zealand public health for Te Whatu Ora to transform the health system to achieve better health outcomes for all New Zealanders.

As a New Zealand born and bred business, our AskYourTeam whānau are invested in supporting Te Whatu Ora in terms of transforming the healthcare system in Aotearoa.

We truly appreciate the time taken by nearly 28,000 people to have their say. Reading many of the comments has been a humbling experience and reminds us of the passion and commitment of those dedicated people wanting to make a difference in their communities.

It has been a pleasure working with your project team to implement this first pulse survey. We look forward to the opportunity of strengthening our working partnership with Te Whatu Ora as you navigate exciting changes ahead.

AskYourTeam

## Survey Purpose

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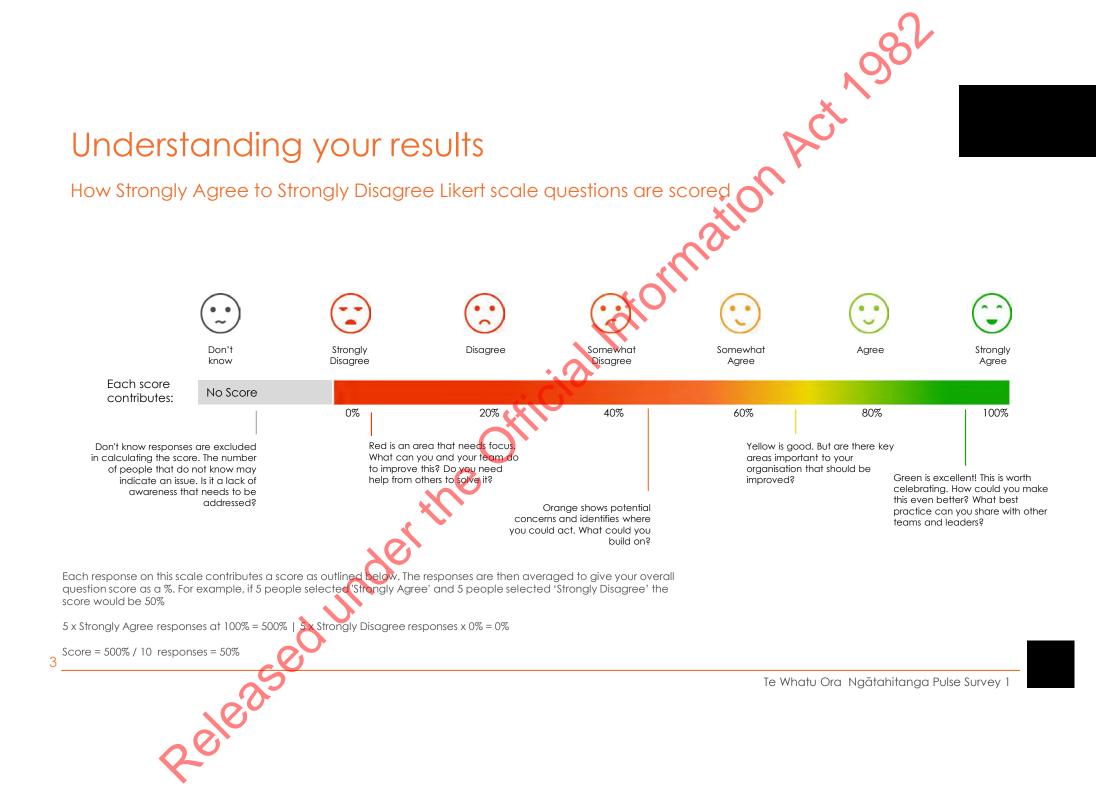
The Te Whatu Ora Ngātahitanga – Pulse Survey 1 was set up to ask Te Whatu Ora staff what is working well and what is not working well across the New Zealand health system and ask what is going well/not well with the change and transformation process thus identifying short term and longer-term improvement actions.

The survey's goal of listening to the voices of our people helps shape meaningful improvements for our kaimahi, communities, patients and whānau.

It is not about validating what we already know but is about listening and taking action.

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Responses will build on what we're already hearing and will help created full and accurate picture of where we are and what we need to do.





# Data Grouping Explanations (as defined by Jewhatu Ora)

#### Ethnicities

Asian European Middle Eastern Pacific Peoples Other Ethnicity includes Asian, Southeast Asian, Chinese, Indian, Other Asian includes European and New Zealand European includes Middle Eastern, Latin American, African Includes Samoan, Cook Islands, Tongan, Niuean, Fijian, Other Pacific Peoples Includes others not included in the above

Note from Te Whatu Ora: Please note we inadvertently used incorrect question methodology when collecting this ethnicity data. The data is therefore less accurate than it otherwise would be. We will ensure we use the appropriate Stats NZ ethnicity standard in future surveys.

#### Profession

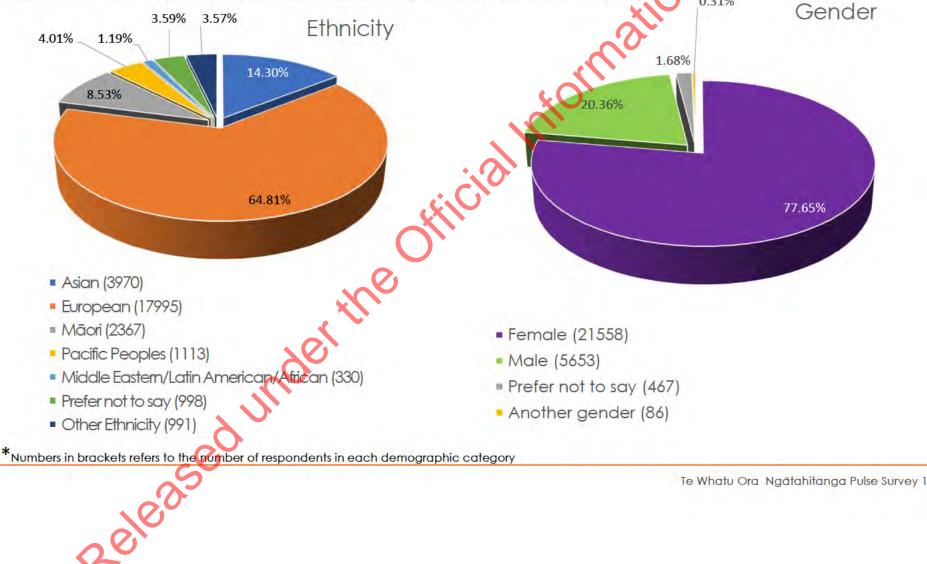
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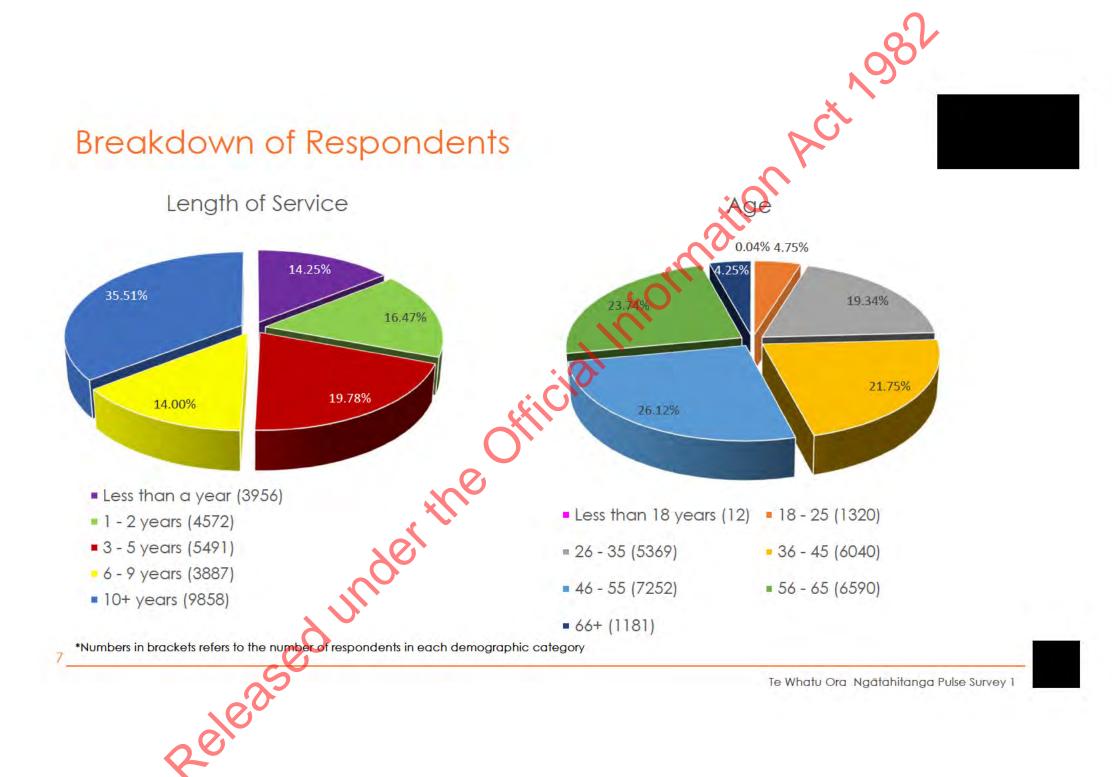
Care and Support includ Corporate and other includ Nursing exclu

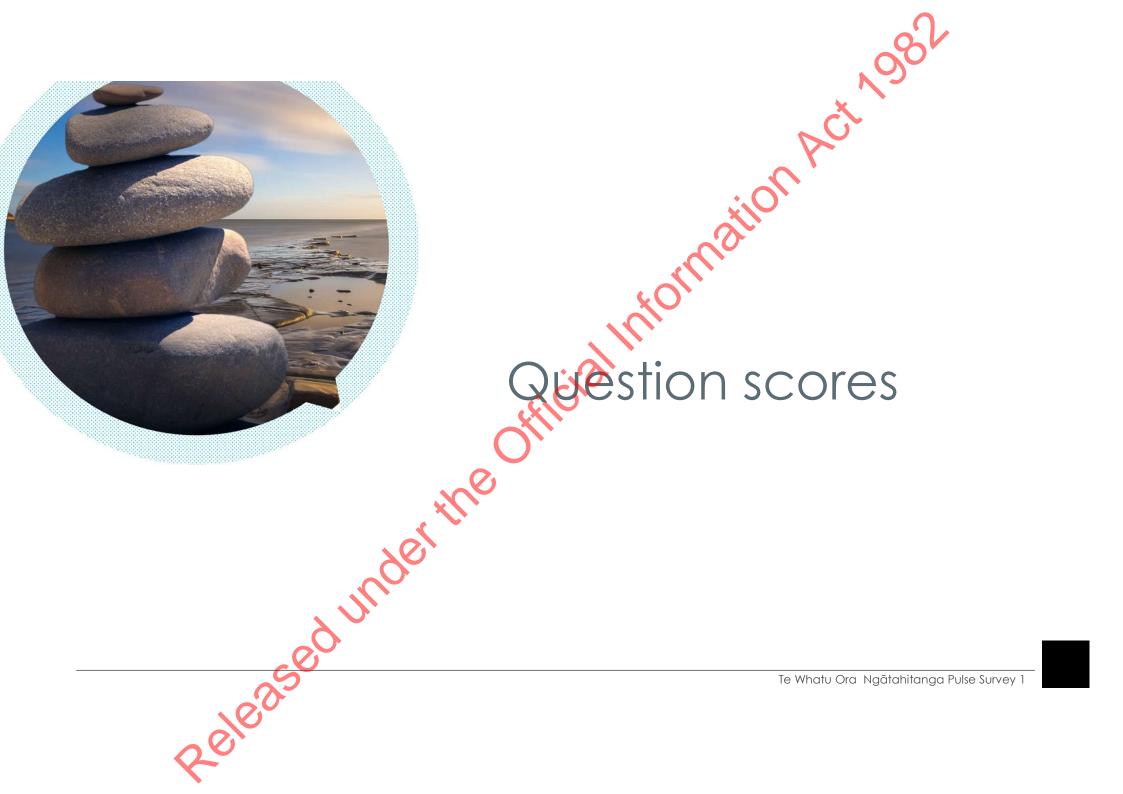
includes cleaners, HCA, orderlies, security includes management excluding HCAs

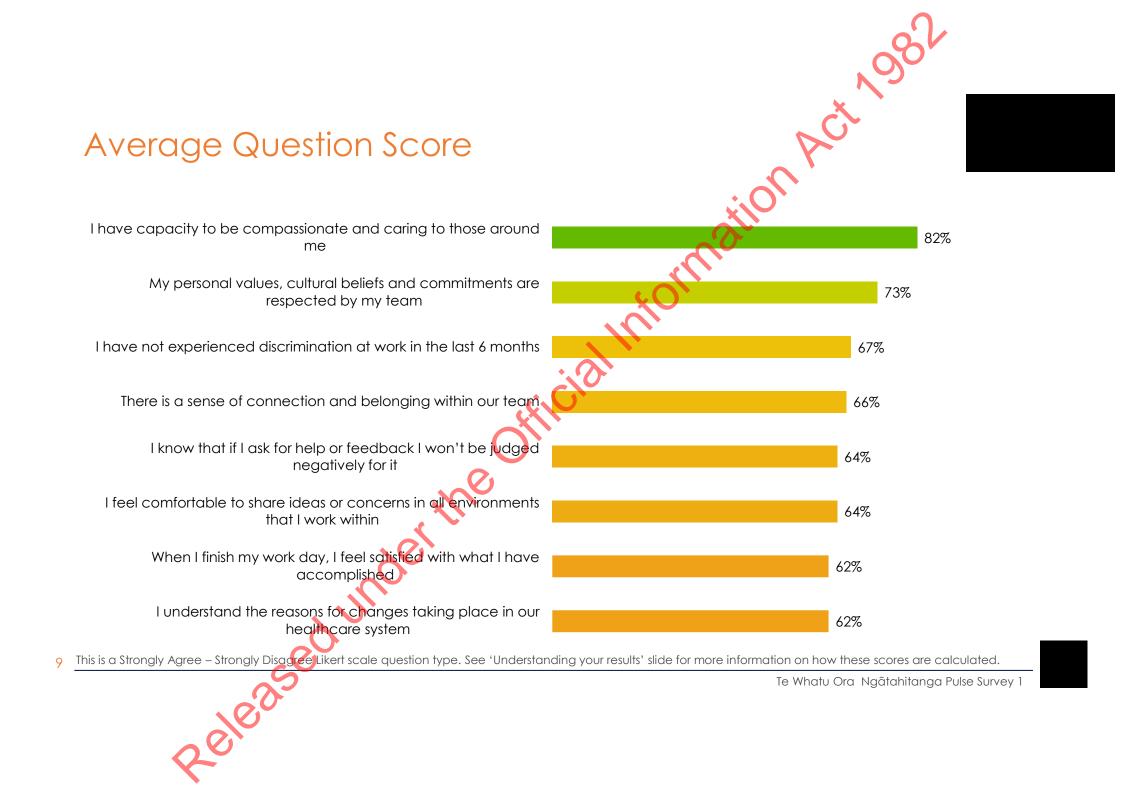
## Breakdown of Respondents

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Pleasingly nearly 28,000 or 29% of Te Whatu Ora employees took the time to have their say in this Ngatahitanga Pulse Survey 1. The survey was conducted from late 30 November 2022 to 16 December 2022. The participation rate achieved was in line with the target and gives a wealth of both qualitative and quantitative data about the views of your people with a good spread in participation across the country.

The Te Whatu Ora nationwide average score of 60% across the 16 questions clearly indicates that there are substantial opportunities for improvement. A feature of these results is that they are remarkably consistent across the country and good consensus of views in terms of where the issues and opportunities lie. The results from the 20 Districts (ex DHBs) are very aligned and the average score for this group is 59.3% (N =25,969). The six shared services entities together with the Te Whatu Ora National Office are more positive with an average score of 68.7% (N =1,795)

#### What's going well?

People working in the health sector are confident they have the capacity to be compassionate to those around them and this is the highest scoring question in the survey by some margin. This is a credit to the committed and dedicated individuals working to serve their communities. A strength is that at a team level there is a good degree of confidence that culture, beliefs and values are respected. Aligned to this there is a good score in terms of connection and belonging within teams. A note of caution though that this sense of belonging is not necessarily translated to views of Te Whatu Ora as a whole, where there is a perception that there is much work to do to become a unified organisation.

Analysis of the free text responses reveals there is a thirst to see changes and improvements in delivery of care in the health system and reasonably broad based understanding and support for the changes Te Whatu Ora envisages. People really "get" the case for change which confirms the desire of people to see the aspiration and vision of Te Whatu Ora brought to life. However, there are widespread questions, concerns and frustrations in terms of the "how" and "when" the changes will be implemented. 13% of respondents answered 'don't know' to the question "The changes we are making will enable us to better meet the needs of our communities" This uncertainly coupled with the day to day stress and frustrations that people are facing suggests driving change will be challenging.

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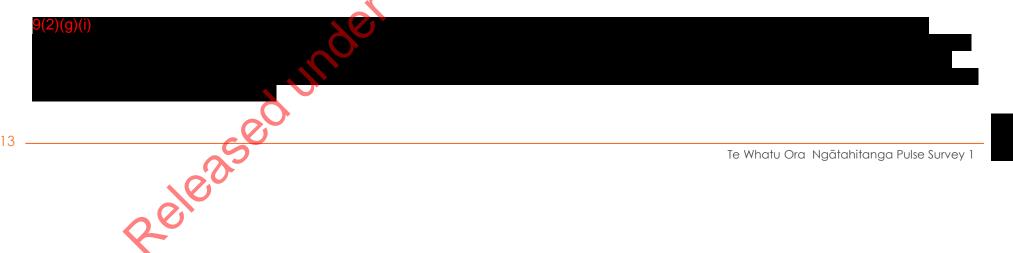
#### What are the opportunities?

#### **Resources and Respect**

Te Whatu Ora kaimahi are feeling the strain in a variety of ways. The biggest frustration as evidenced by the lowest score in the survey and the largest theme in the free text responses both by some margin is resourcing. Lack of staff and resources to provide the standard and timeliness of care that people would like is the number one issue across your workforce. The strength of feeling on this point should not be underestimated, particularly from frontline staff. This is not a situation of unrealistic wishful thinking but serious concern impacting on the wellbeing of your people to a significant degree and at times causing risk or indeed harm to patients.

There are a number of elements to the resourcing issue. Employees want to see more of a focus on retention as well as recruiting more people. They want to be paid fairly for their efforts. They lack resources and fit for purpose facilities to do their jobs and they see the critical need for greater funding for healthcare. Near the very end of the survey period on the 14<sup>th</sup> of December the announcement of the ERA interim order regarding pay equity rates for Nurses was made. It will be interesting to see if this partially alleviates some of the concerns regarding pay and something to watch in subsequent pulse surveys.

Although the score to the question about people feeling respected in their own team is a relative strength in these results, it is clear from the free text responses that at an organisation level people don't feel universally listened to, valued or respected. Many of the free text responses are quite confronting to read where people variously describe themselves as undervalued, disrespected, overworked, stressed, fatigued and fed up.



#### What are the opportunities?

#### Change

Change of the scale Te Whatu Ora envisages is never easy and in the current environment where the day-to-day stresses on your people are so keenly felt, successful delivery of change is inevitably going to be challenging. In this context of a highly stretched workforce the low score of 56% to the question about whether changes being made will better meet the needs of the community is not a particular surprise, but it is a cause for concern. Not counted in this low score is the 13% of your people who responded "don't know" to this question. This result suggests there is much work to do to build confidence that Te Whatu Ora is on the right track.

Related to this is a lack of confidence that there is a shared vision, purpose and long-term focus with a score of 57%. Anxiety about the future coupled with the day-to-day stress makes for a difficult working environment for your people. They urgently want to understand how the proposed changes will work in practice, what that means for them and how it will improve healthcare outcomes.

#### 9(2)(g)(i)

#### Leadership

Leadership comes up as a key theme in the free text responses in a variety of ways. System leadership, organisation leadership and people leadership all rate regular mentions in the free text comments. 9(2)(g)(i)

They believe that decision making at Te Whatu Ora is top-down and consultation and input from clinical and frontline staff is inadequate. There is a degree of cynicism that key decision makers may lack the skills to deliver on the system transformation aspiration. Aligned to this many frontline staff believe that the wrong people are in decision making roles without the requisite clinical skills and experience. Many people leaders are equally frustrated that they are disempowered from making decisions and effectively supporting their teams.

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#### 9(2)(g)(i)

Bullying is perceived as a persistent issue in some areas. There are numerous comments indicating that people leaders who engage in repeated bullying behaviour are not dealt with, or worse promoted. There is also a view that there is a culture of turning a blind eye to bullying as it is simply entrenched and institutionalised. This is not the view of everyone but understandably is a topic which engenders strong views. This issue speaks to a need for greater consistency of leadership practice, particularly given the stress the workforce has been experiencing for a prolonged period and in the context of an extensive change agenda.

#### 9(2)(g)(i)

#### **Culture and Equity**

Your workforce is quite divided in terms of what the appropriate approach needs to be to provide equity of care. Views are equally strong amongst those who feel that for example Māori people have been disadvantaged for too long and therefore need to be prioritised for care and resources, and those that view this as a negative and unfair approach. We note that the majority of staff report not having experienced discrimination in the past six months. However, 25% of your people say this is not true for them indicating much work to do to create a more positive, inclusive culture.

Concern about equity has a number of elements, there is uncertainly about how those patients in rural locations will be better off under the new system. In addition, there is a perception within your workforce that communication is not always effective as the Te Reo first approach can mean that some people feel excluded. Ignoring these divisions will likely result in views becoming more entrenched rather than unifying your people around a common purpose.



#### RMO and SMO results

The RMO and SMO cohorts are the lowest scoring groups by profession. In common with their colleagues in other professions within Te Whatu Ora they feel very strongly that they don't have the resources they need to perform their roles well with 58% of RMOs and SMOs strongly disagreeing that this is the case. By contrast, only 0.7% RMO and SMOs strongly agree that they do have enough resources. Given their critical role within the sector their scores to the questions about understanding why changes are taking place in the healthcare system of 50% and only 38% to the question "The changes we are making will enable us to better meet the needs of our communities" is a concern. In a similar vein, this group don't feel empowered. This sentiment is quite a strong theme in the free text responses where many of the comments from clinical staff indicate they don't feel consulted with, don't think the organisation is headed in the right direction and don't have trust and confidence in the leadership.

#### In closing

The overwhelming feedback from your people is that they need more resources, in terms of people, equipment, facilities and funding. This is their number one priority. Successful delivery of transformational change is going to be very difficult until you address some of these concerns or at least lay out a plan to tackle the resourcing issue.

The other key takeaways from these results is that people want strong consultative leadership, they want to know what the longer-term plan is to improve healthcare outcomes for all of the community, and they want to feel included and heard in terms of bringing the aspiration of Te Whatu Ora to life. They want to see the detail, to understand what the changes will mean in practical terms for them and for their communities. Finally, they would like to see a more positive culture in the workplace where they feel valued, respected and heard. This pulse survey provides an excellent baseline view of the sentiment of the Te Whatu Ora workforce. Subsequent pulse checks will provide ongoing insights into the success of the transformation journey.



# Recommendations

#### **Short Term**

#### 1. Resource Plan

Given the anxiety and stress around resourcing, it makes sense to acknowledge the pressure people are under. Providing a comprehensive workforce resourcing action plan should be an urgent priority. If this is not possible in the near term, communicating when your people can expect to hear the plan is important. In the absence of such a communication, people will draw their own conclusions and potentially continue to vote with their feet.

#### 2. Review communication style and approach

There is a perception in some quarters that communication is not always inclusive. If this perception is valid, consider reviewing whether this approach is serving its intended purpose. If the perception is not valid then it seems that there is a need to do some "myth busting" or to point people in the direction of where they can obtain information in a form that they are comfortable with and can understand.

#### 3. Work programme plans and alignment

The pulse survey results identified key areas of opportunity and areas where your people want to know what the plan is. These are:

1. Resourcing

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- 2. Leadership and Transition
- 3. People Experience
- 4. Working Together
- 5. Care and Equity

These are all big-ticket items which will be included in your planned programme of work. Mapping these themes to your health system transformation plans may assist with prioritisation decisions and with identification of gaps.

# Recommendations

#### **Longer Term**

Having undertaken a mapping exercise to ensure the key themes from this survey have been adequately captured in your plans and programmes of work the focus will inevitably turn to quality of implementation. People just want Te Whatu Ora to get on with implementing the changes. Keeping the views of what your people think is most important will be a crucial component of future success for Te Whatu Ora. Based on the survey results the key priorities for your people are:

#### 1.Resources, resources, resources

- ➤ People
- $\succ$  Facilities
- ➤ Equipment

#### 2. Enablers

- ➤ Single patient electronic record
- > Standardised IT and systems and processes
- > Better resourced primary and community care to take pressure off secondary care
- > Clear inclusive communication for staff, patients and the community

#### 3. People Experience

- ➤ Training and development
- ➤ Quality leadership
- $\succ$  Rewards and recognition
- > Positive workplace culture

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Te Whatu Ora Ngātahitanga Pulse Survey 1

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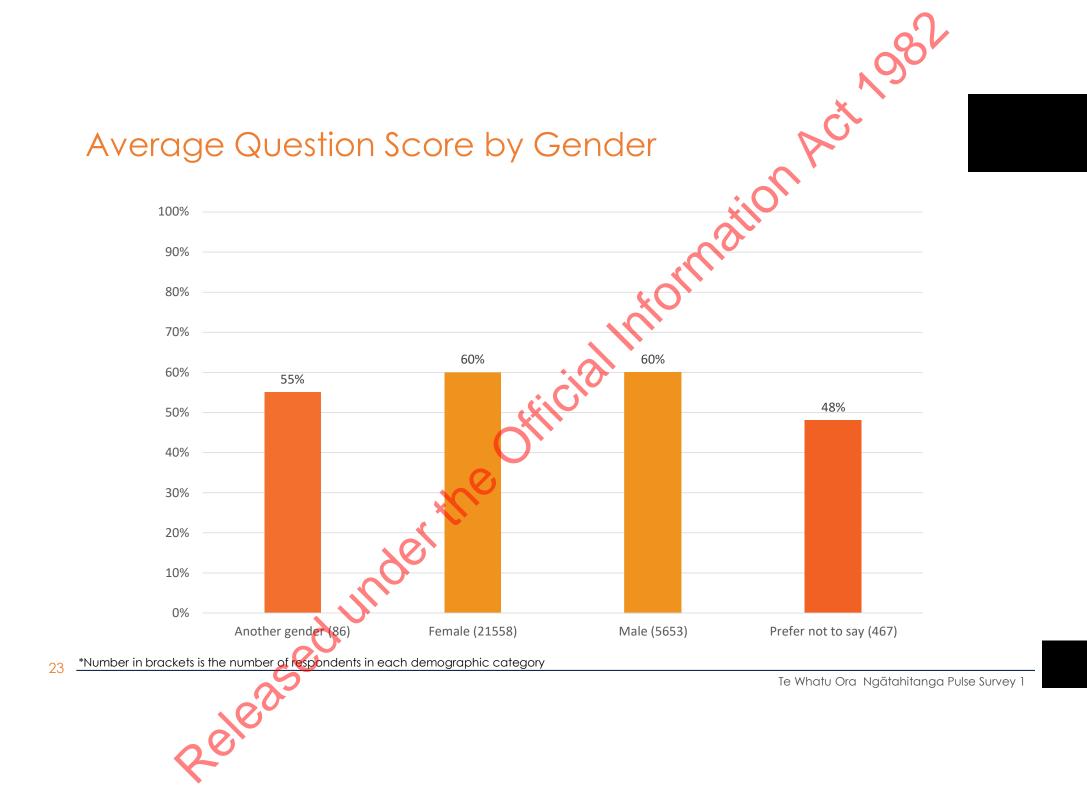
# Results in more

## Average Score by Entity





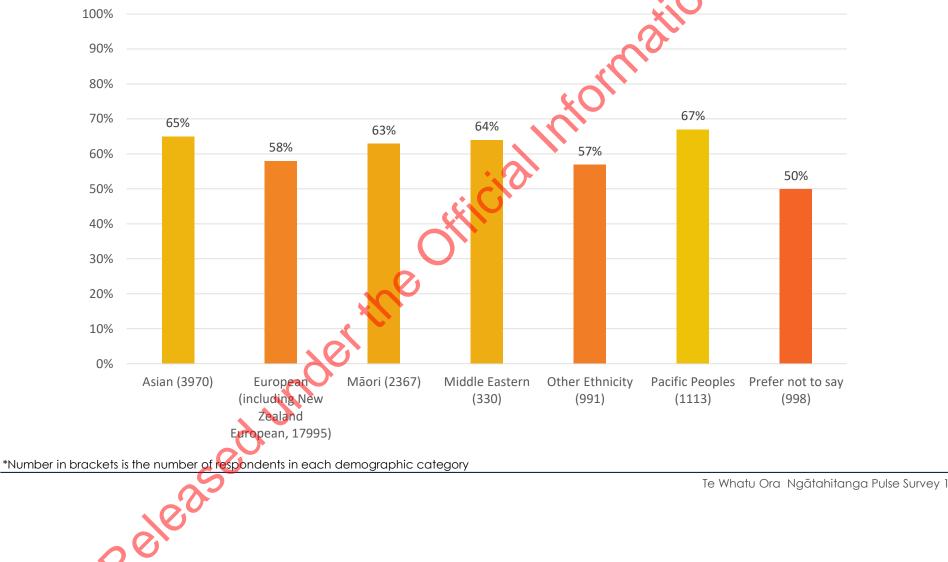


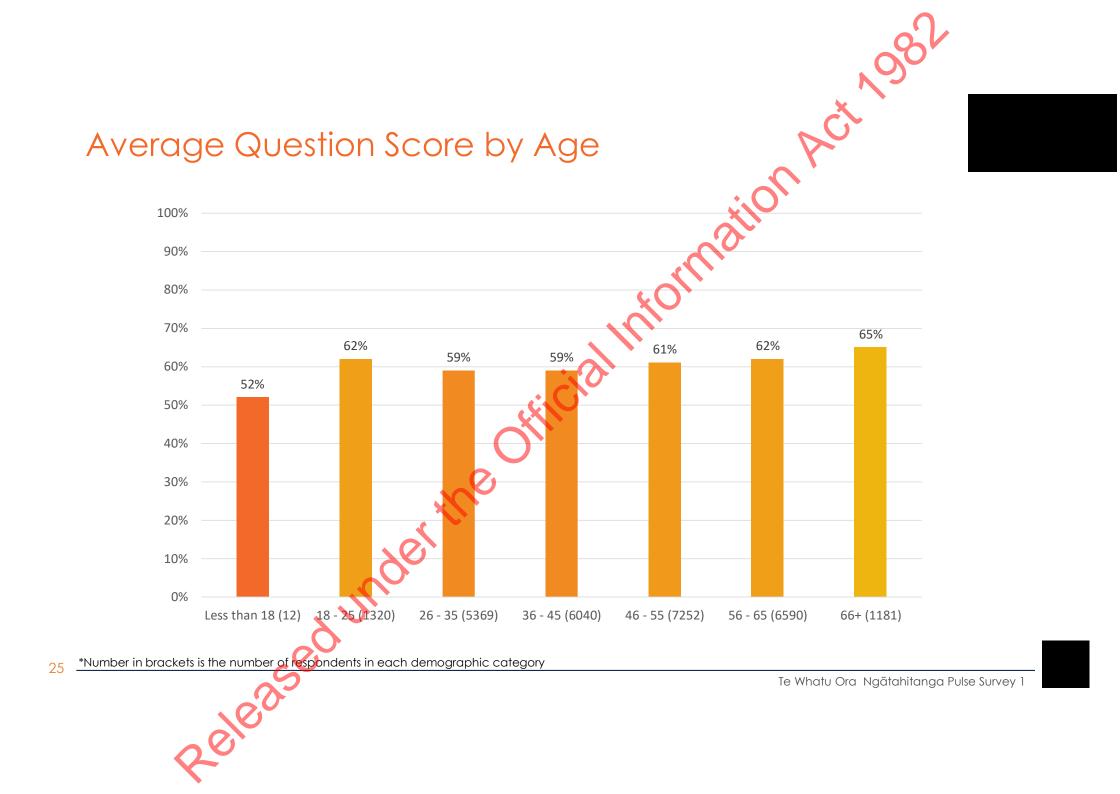


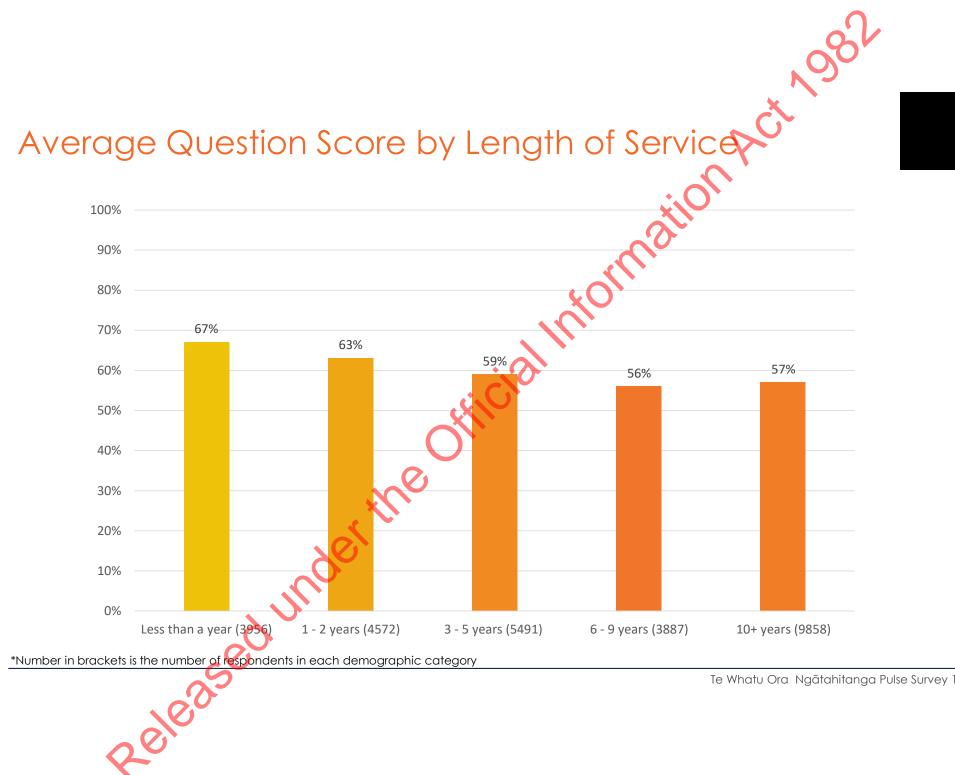
# Average Question Score by Ethnicity

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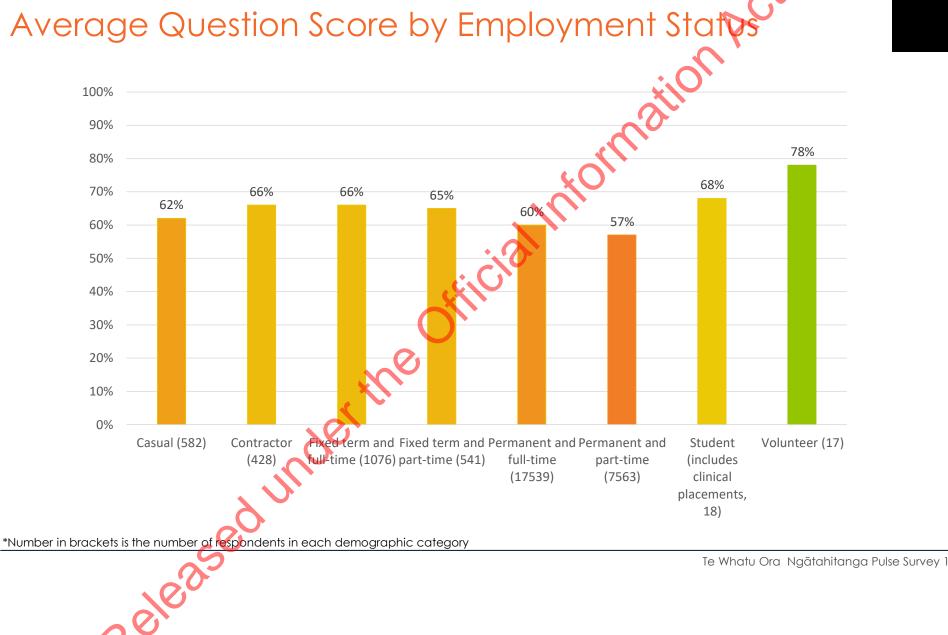
Note from Te Whatu Ora: Please note we inadvertently used incorrect question methodology when collecting this ethnicity data. The data is therefore less accurate than it otherwise would be. We will ensure we use the appropriate Stats NZ ethnicity standard in future surveys.



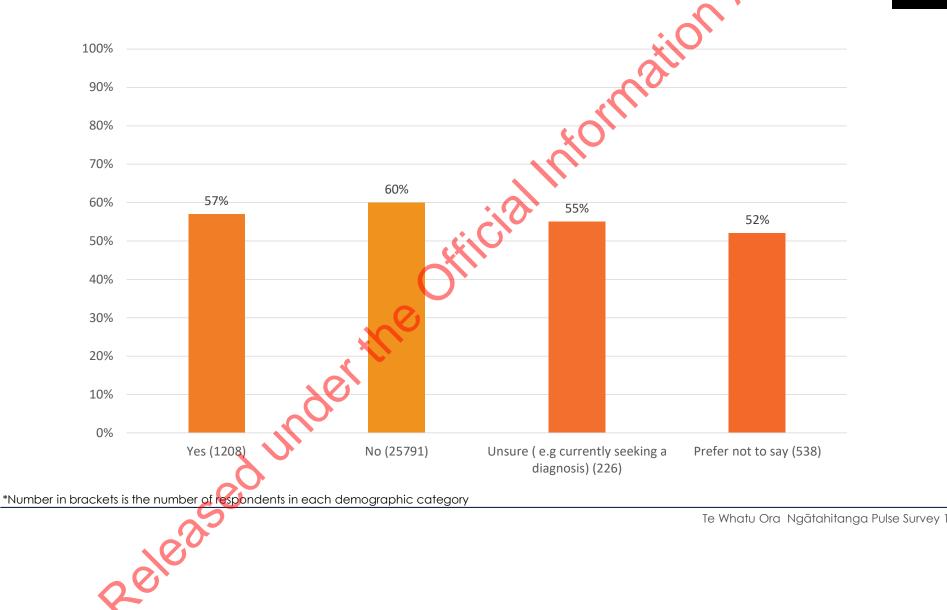




# Average Question Score by Employment States



# Average Question Score by Disability Status



# Range of Scores by Profession

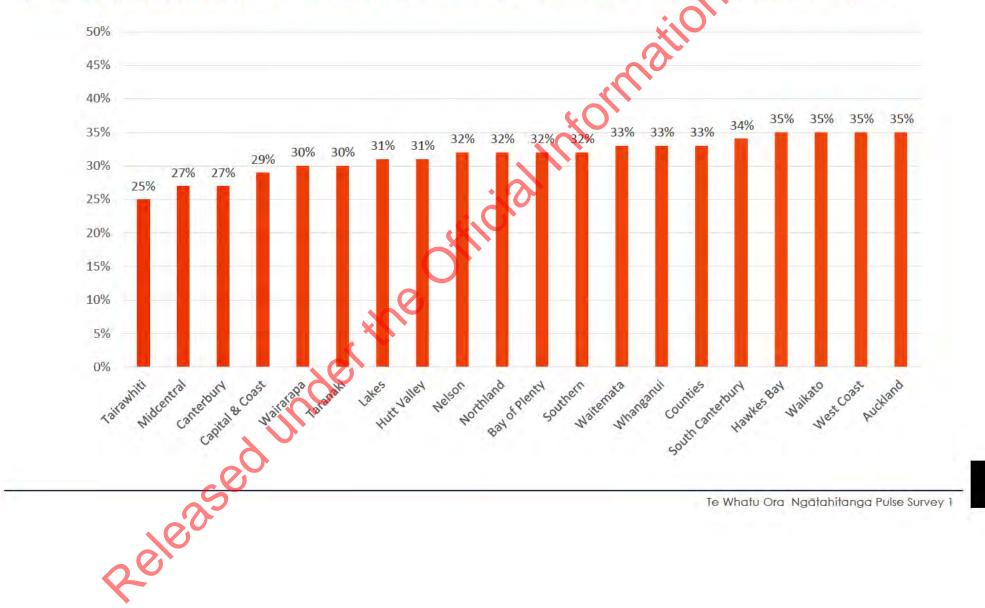
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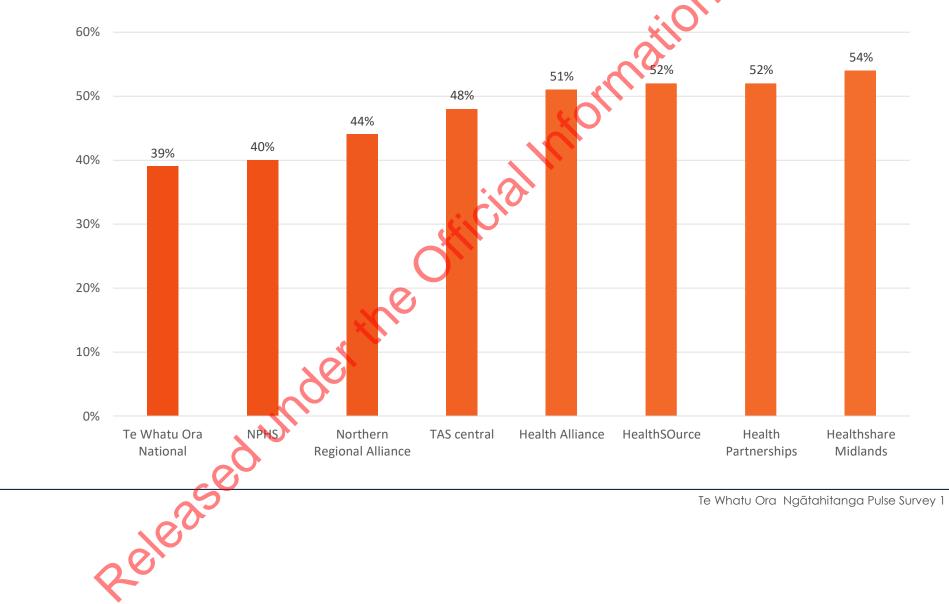
**Insight:** The survey results are remarkably consistent across the majority of demographic categories that were included. However, in the profession category there is quite a range of views and divergence of scores. The RMO and SMO cohorts are the lowest scoring cohorts and there are some very low scores for some questions indicating much work to do to lift confidence in these groups. The lowest scoring questions for <u>all</u> professions was to the question about having the resources needed.

Profession	Average Score	LowestScore	Highest Score
RMO	49%	17%	68%
SMO	51%	16%	74%
Midwifery	57%	21%	84%
Nursing	57%	29%	81%
Allied & Scientific	59%	30%	83%
Corporate & Other	65%	41%	85%
Care & Support	66%	47%	88%

Question Score - My team has the resources (e.g. time, people, budget, facilities, equipment) we need to perform our roles well – Districts (ex DHBs)



Question Score - My team has the resources (e.g. time, people, budget, facilities, equipment) we need to perform our roles well – Shared Services



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## Don't Know Responses

## Insight:

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The likert scale includes the option to provide a 'don't know' response. This in itself can provide a useful data point. For the following questions there is a 'don't know'' response rate of 4% of respondents or more. Unsurprisingly, these questions relate to aspects of the transition to Te Whatu Ora. Bearing in mind the response rate for this pulse survey is just under 30%, if we extrapolate this level of 'don't know' responses across the entire Te Whatu Ora workforce it suggests that further work to embed changes and to reap the benefit of those changes is required. At this stage in the transition, this is to be expected. It will be interesting to monitor the trend of 'don't know' responses over subsequent pulse checks.

Question	Don't Know Response %	Don't Know Response Count
I understand the reasons for changes taking place in our healthcare system	4%	1212
Our team is starting to build relationships with teams across Aotearoa	9%	2563
The changes we are making will enable us to better meet the needs of our communities	13%	3488

Te Whatu Ora Ngātahitanga Pulse Survey

Actions

## Free text comments

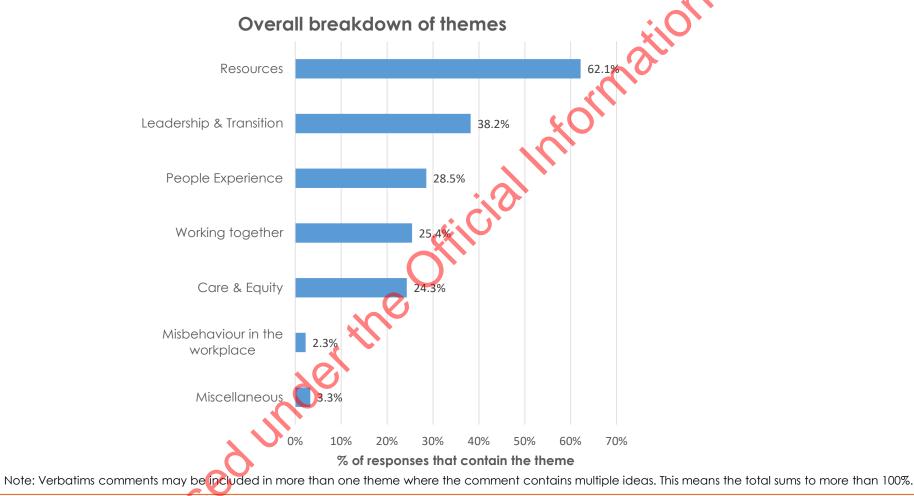
Comments have been reviewed, quantified and categorised by major themes. Major themes have also been sub-themed to provide additional insights.

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Te Whatu Ora Ngātahitanga Pulse Survey 1

What would you like to see change (or happen) across Te Whatu Ora over the next three to twelve months?

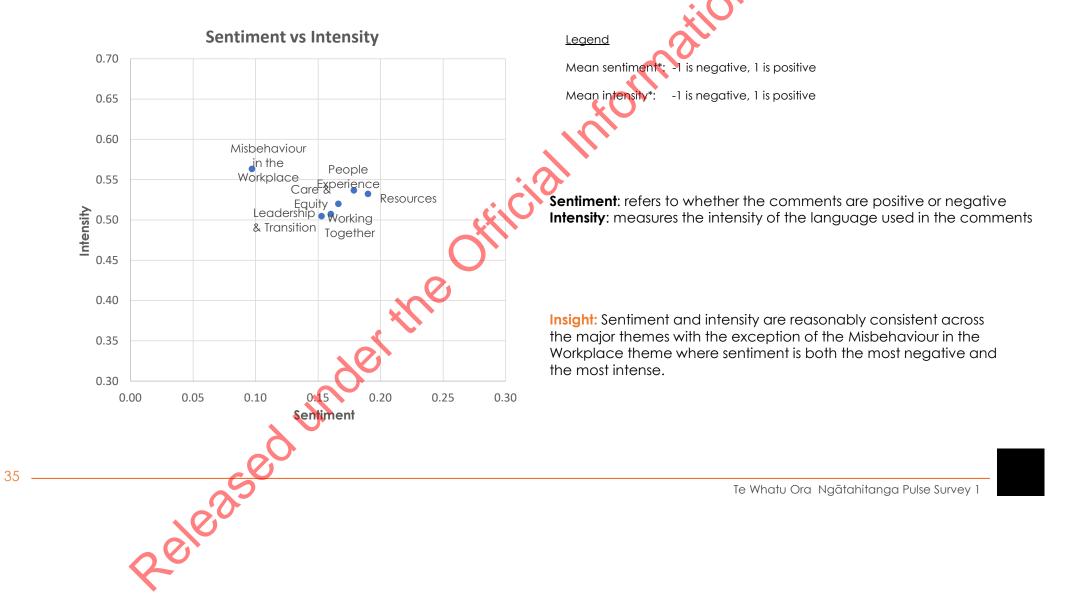
75% of respondents or 20,756 people left a comment

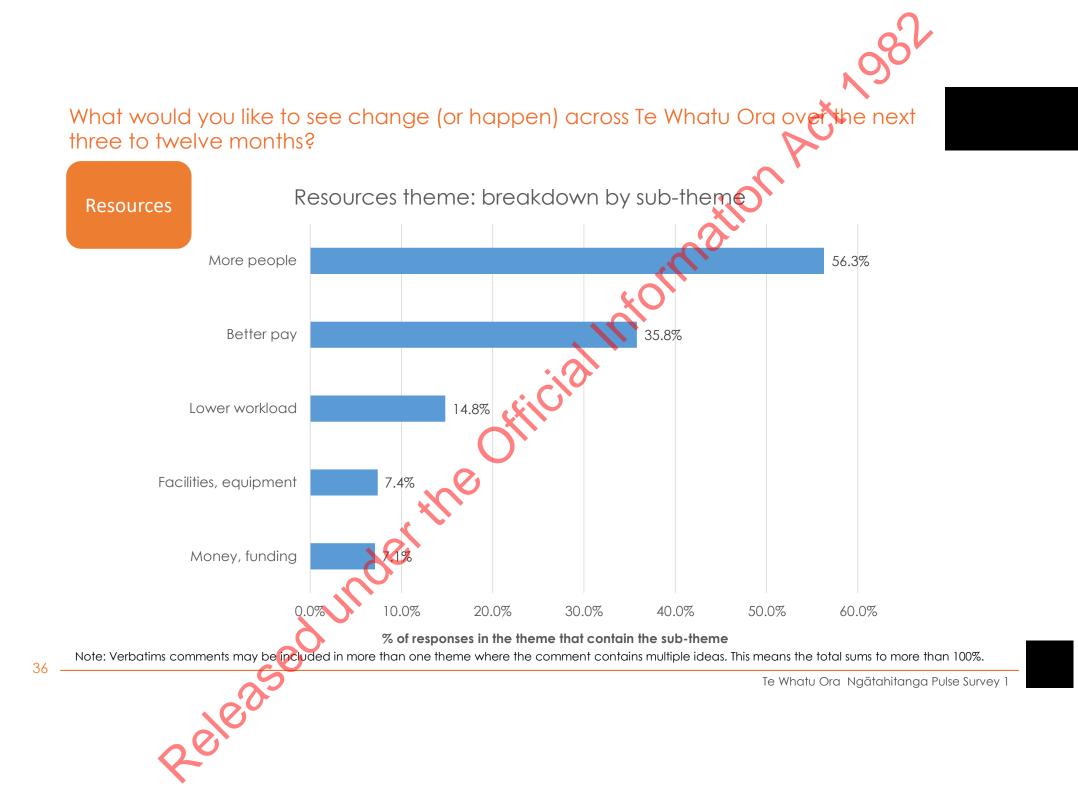


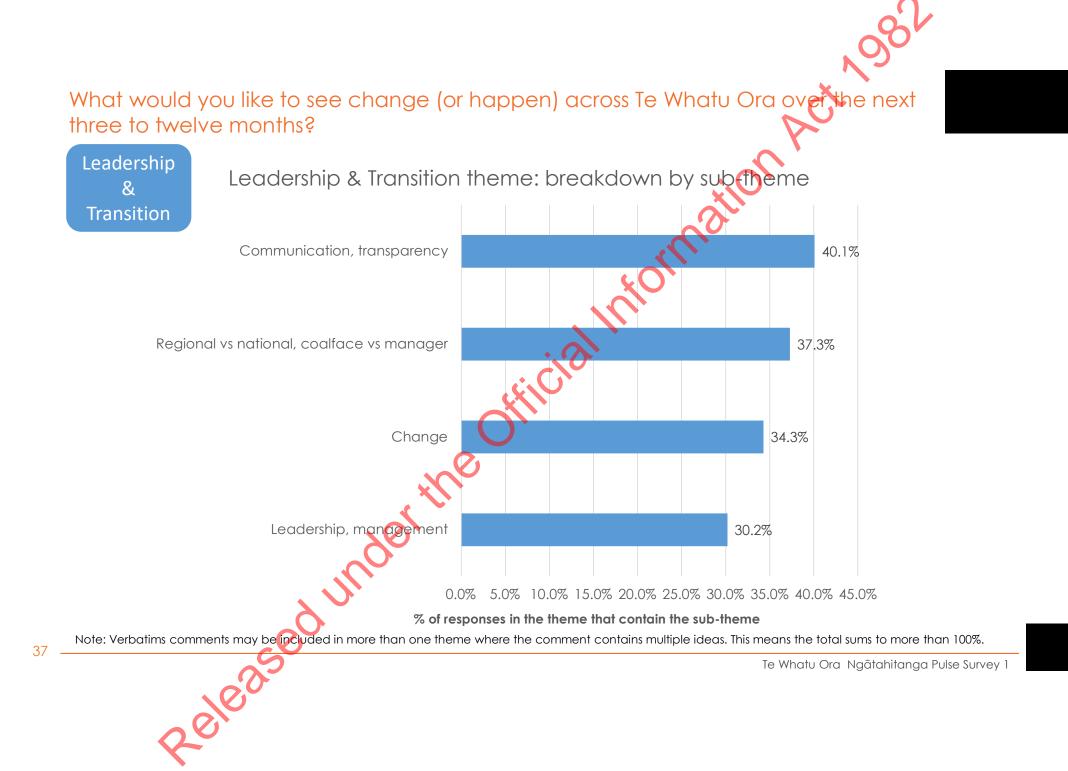
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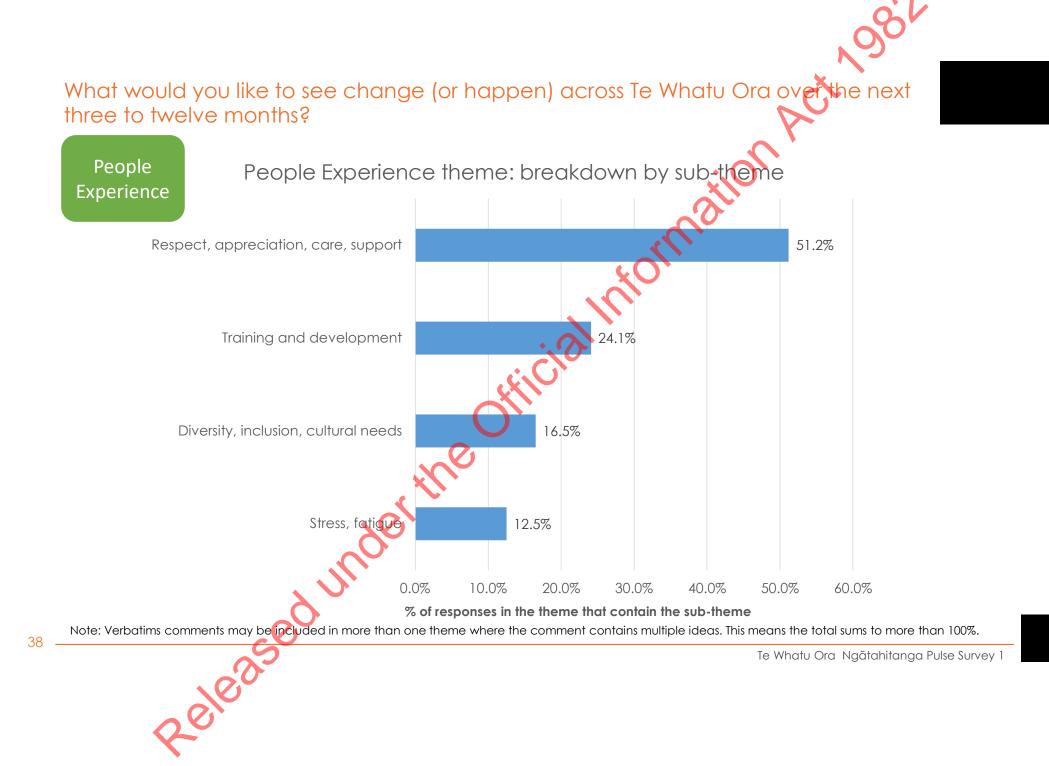
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What would you like to see change (or happen) across Te Whatu Ora over the next three to twelve months?

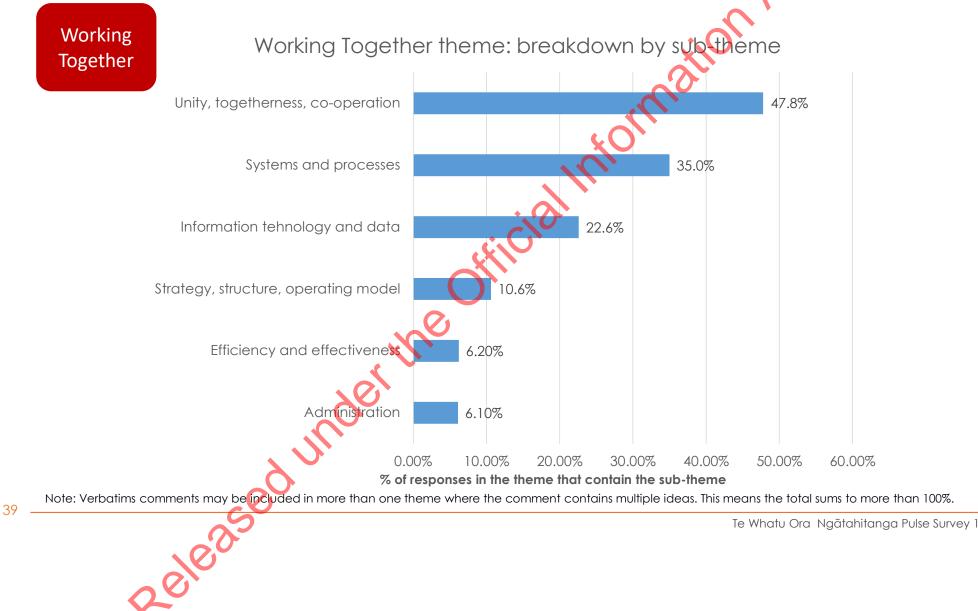




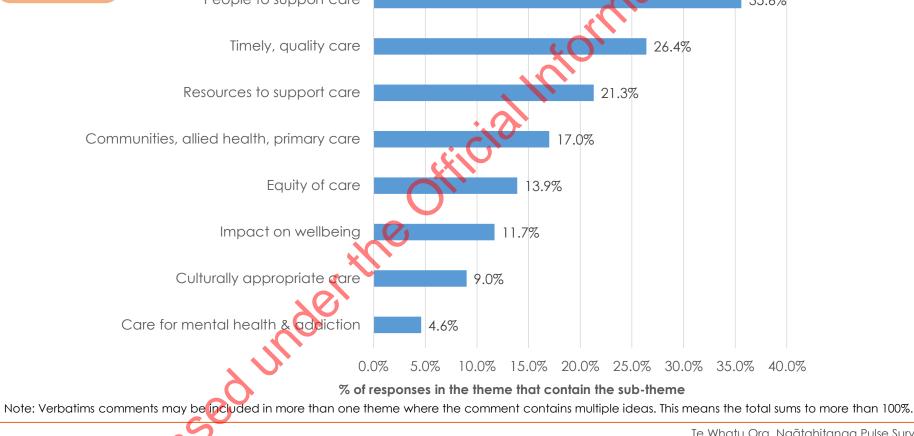




What would you like to see change (or happen) across Te Whatu Ora over the next three to twelve months?

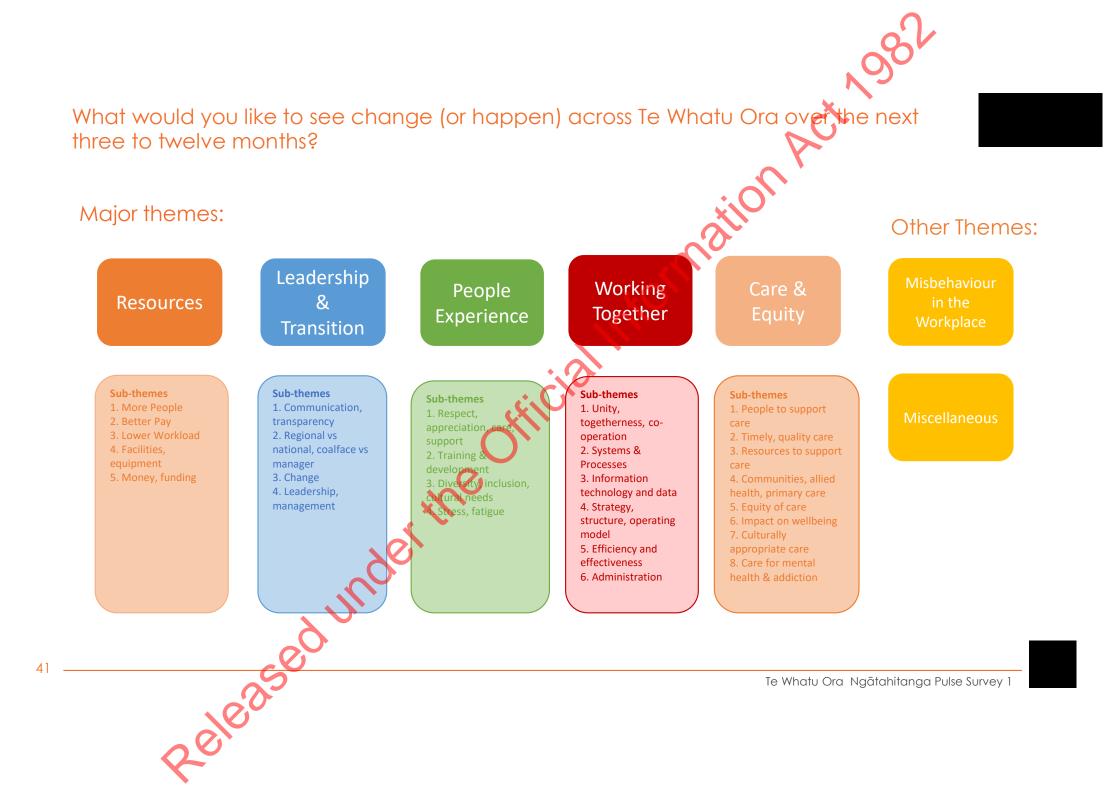






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Te Whatu Ora Naātahitanga Pulse Survey 1



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### **Executive Leadership Team**

### Ngātahitanga Pulse Survey 1 – actions and next steps

Ngātah	itanga Pulse Survo	ey 1 – actio	ons and next steps
Date:	10 February 2023	Author:	Jeremy Caird OD Lead, Megan Scott OD Lead & Joanie Sims, Interim National Organisational Development & Capability Lead
For your:	Approval	Approved by:	Jim Green, Interim Chief People Officer
Seeking funding:	No	Funding implications:	No
То:	ELT		

### **Purpose**

This paper recommends actions and next steps following the Ngātahitanga Pulse Survey and the 1. results presented to ELT on 7 February.

### Recommendations

- 2. The ELT is asked to:
  - approve the two National Priority actions around Workforce and Health System Changes a)
  - b) **approve** the all-staff communications approach, including major communications on 22 24 February
  - c) **note** that we will progress deep dives on specific functions or aspects of results as required to derive insight and target areas of poor performance
  - approve the next steps detailed in this paper. d)

### Contribution to strategic outcomes

3. The pulse survey contributes to building a health system that gives effect to te Tiriti o Waitangi, Cand to ensuring that health and care workers are valued and well-trained for the future health system in line with our Te Pae Tata commitments.

### Background

On 7 February 2023 the ELT was presented with the first Ngātahitanga Pulse Survey results. It was agreed there would be further discussion on 14 February regarding actions and next steps.

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Ngātahitanga Pulse Survey 1 – actions and next steps

5. Engagement with union partners began on 9 February with a briefing at the Strategic Health Engagement Forum (SHEF) on the embargoed results. It continued that day with the same briefing for Deborah Powell (representative for the Resident Doctors' Association (RDA) and APEX).

### **Discussion and actions**

082 6. As outlined in previous advice, we propose two streams of work to identify actions and solutions. First, National Priorities and Deep Dives, which looks at actions led from the National Office which are common across the motu and which have national solutions. Second Local Opportunities and Quick Wins, which may overlap with national solutions but will have a distinct local flavour and a focus on remedial actions

### **National Priorities and Deep Dives**

- 7. Based on the pulse survey results and what our people are telling us, we recommend that ELT target the following two priority actions for initial response: Workforce and Health System Changes. These topics were identified by employees as the areas of most concern via the survey questions and their scores, and/or via free-text feedback.
- 8. We also recommend that deep dives are conducted relating to the specific results from discrimination questions and the comments relating to misbehaviour in the workplace. Potential actions proposed from these deep dives will be presented back to ELT. Further actions are expected to result from the deep dives into ELT's service areas and professions. We ask that you discuss deep dives you are interested in progressing at this time.

Priority	Workforce (Resourcing)	Health System Changes (New Operating Models)	
Evidence	Resourcing is the lowest score (33%) in the survey. It is about employees having the resources (e.g., time, people, budget, facilities, equipment) to do their job. This was strongly reinforced in the free-text comments where the most frequently identified concern was resourcing (62%).	The survey question around changes in the health system scored (56%). However, it was the second most frequently identified concern in the free-text comments.	
Actions and Solutions	<ol> <li>Articulate/communicate current workforce initiatives.</li> <li>Explain what is happening now and what is planned in medium and longer term.</li> <li>Share intended timeframes and milestones.</li> <li>Seek staff solutions and discussions at locality level.</li> <li>Communicate D&amp;D plan and timeframed actions</li> <li>Specific "quick wins" actions by locality that are resource orientated are prioritised for action.</li> </ol>	<ol> <li>Communicate the reasons and rationale behind the changes – the why?</li> <li>Share the intended timeframes and milestones for operating model change</li> <li>Provide deep dive information to operating model leads to support communication of each model</li> </ol>	
Responsible for Action	The Workforce team (led by Ailsa Claire), the National Communications Team – contact to be identified and a national recruitment team	The Communications Team (including Justine Banfield) and the Change Management Team and Operating Model change leads	

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Ngātahitanga Pulse Survey 1 – actions and next steps

	Supported by the regional integration teams, D&D team and Locality Teams	
Measures	<ol> <li>Provide updates and actions via the pulse survey dashboard</li> <li>Provide regular communications via engaging channels on actions</li> <li>See a positive shift in the resource question and a reduction in comments relating to resourcing issues in subsequent pulse surveys</li> </ol>	<ol> <li>Provide updates and actions via the pulse survey dashboard</li> <li>See a positive shift in the pulse survey questions related to change and communication and a reduction in the comments relating to issues understanding change</li> </ol>

### Local Opportunities and Quick Wins

- 9. We also want to empower local teams to design actions that can be taken in the short term to reflect their local context. Local teams will be supported by Ask Your Teams and our Reople & Culture teams with these actions.
- 10. Potential local opportunities and quick wins have been summarised in advance by combing through the free-text response. These will be shared with local teams at the same time we share their local results.
- 11. These local opportunities will be reported on by local and regional teams (where suitable) via the pulse survey results dashboard. This will be collated manually over the coming weeks and are intended to be utilised in both local and national communications channels. These will link clear actions to the survey i.e., complete the "You Said", "We Did" promise of the survey rationale to act and value staff voice.

### Implementation and Communications Approach

12. Communication of these results and actions are critical to building trust with our people. This requires honesty about where we need to improve, while encouraging a constructive and solutions-focused narrative. We outline the proposed communications and engagement approach for the release of these results at Appendix 1 for your approval – and ask you note the planned major communications for 22 – 24 February.

### **Union Engagement**

13. We shared a summary of results with unions nationally at SHEF on 9 February 2023 and with APEX/RDA also that day. This was in presentation form, without soft or hard copies. We will share local results with unions locally from late February, as we roll out the results across the mote and will continue to work with unions on how best to share and engage with local results.

### **Enancial implications**

14. Depending on the agreed national and local actions there may be financial implications in responding to matters raised. As a starting point, local leaders will be expected to manage interventions in response within local budgets; but we will provide ELT with further advice if we identify significant national, regional or local opportunities to address the survey results which require new funding.

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### Te Aka Whai Ora contribution

15. Engagement has occurred with Te Aka Whai Ora on this initiative. These results will be shared with Te Aka Whai Ora as well as an opportunity to deep dive into the ethnicity data and partner 196 on key actions. Further korero is to occur with Te Aka Whai Ora on Pulse 2.

### **Next steps**

- 16. Implementation milestones:
  - 20 February onwards communicate results to local ELTs via their respective GMsHR (with a) support from AskYourTeams)
  - b) 20 February onwards – engagement with unions locally
  - 22-24 February all staff communications from the CEO, i.e. National Panui, Leaders Hui. c)
  - 27 February onwards communicate local results locally d)
  - 27 February onwards local leaders address pre-identified local opportunities and quick e) wins
  - f) 27 February onwards – local leaders consider other local actions and solutions
  - March onwards local benefit tracking to be collated and shared with ELT by National OD g) team. National Priority tracking to be shared by responsible managers (see point 9 above).
- 17. The objectives of the second pulse survey will be presented to ELT before we commence design. Before recommending a date, we will consider the work and timeline of the organisational changes including implementation of the new operating models.

### **Attachments**

Appendix 1: Draft Communications and Engagement Plan for results and actions eleasedun

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### **Our Environment (context)**

The first pulse survey was undertaken in December 2022. Results are currently being collated to be shared with ELT, unions and staff.

There is a need to carefully plan the release of results and initiate action planning at a national, local and team level to ensure Te Whatu Ora is seen to follow through on its commitment to transparency and finding solutions to the challenges facing our workforce. There is also a need to support senior and people leaders to share their results and to support overall action planning at a micro level.

Due to the nature of some of the feedback and themes, an approach for managing partner, public and media interest in the survey will form part of this phase 2 communications and engagement plan.

Decisions are yet to be made on the exact questions and timing for the second pulse survey, with more detailed communications planning to follow.

### Our communications aims

- Share results and actions from the survey in a timely and transparent way to demonstrate follow through and build trust.
- Tell our engagement story on our terms shine a light on highly engaged teams, be honest about low engagement where it exists, and clearly communicate what change/improvements will and are being made.
- Lift the visibility of senior leaders (national/regional/local) as champions of engagement, improvement and change.
- Ensure people leaders are informed and well equipped to share results and action plan at a micro (team) level.
- Link to key initiatives (solutions) coming from our culture work programme, and key messages from our wider change programme.
- Share timing and expectations around Survey 2.
- Share progress against actions over time.

### Our channels

- Email
- Video
- Virtual & in-person
- Local intranets and newsletters
- People and
- Culture Business Partners/reps
  - Senior Leaders
- People Leaders

### Our audience/s

- ELT
- (national/regional/local)
- Comms and Engagement teams (internal comms)
- People and Culture Leaders and teams.
- People Leaders
- All Te Whatu Ora staff
- Unions
- Partners/Public/media

Roles and responsibilities		
TEAM / INDIVIDUAL	RESPONSIBILITIES	
Ask Your Team	<ul> <li>Survey analysis, briefing on results, holding data</li> </ul>	
Project Team	<ul> <li>Strategic OD advice</li> <li>Project advice and support (including project communication)</li> <li>Support for action planning</li> <li>Assisting P&amp;C colleagues with leaders/people leaders support</li> </ul>	
Margie + ELT	<ul> <li>Accountability/ownership of the results and action planning</li> <li>Communicating results and action planning to kaimahi</li> <li>'Visible leadership' – meeting with Kaimahi to understand results further</li> </ul>	
Local and Senior National Leaders	<ul> <li>Accountability/ownership of local/entity results and action planning</li> <li>Communicating local/entity results and action planning to kaimal</li> <li>'Visible leadership' meeting with Kaimahi locally to understand</li> </ul>	

## Approach, style and tone Our communications will:

### Be leader led:

ELT, regional and local leaders will be key communicators of the results and accountable for action planning. They will be supported more broadly by people leaders, to ensure results are shared and understood and action planning undertaken at a micro (team) level. Comms will provide the information managers need to feel confident and motivated to lead their people through the survey process, actions and beyond.

### Build trust and confidence

Our communication will send a clear message that we've listened, we're acting, we're tracking this action, and that we are sharing all information transparently and in good faith.

### Spotlight high engagement and what's working well

We will clearly define the kinds of behaviours, actions and initiatives we want to encourage as a Te Whatu Ora 'team of teams', and will build a narrative from the survey results around it.

### Be easy to understand and use

Our communications will be clear and conversational,

## oles and responsibilities

sults further

Supporting Margie, ELT and local leadership teams to demonstrate visible leadership.

bout the results and micro level action planning

results and understand how the team is feeling.

Maintain momentum/awareness in the lead up to the second survey.

countability/ownership of having team level conversations

'Visible leadership' meeting with team members to discuss

and general information sharing locally, and nationally – as

Disseminating results, supporting and tracking action planning

Comms and People and Culture advice as required.

### **Our measures**

People Leaders

Comms reps + nationa

comms teams + survey

+ P&C

- Engagement/readership of CE email National Pānui and via local entity comms channels
- Feedback and questions coming into the designated survey inbox
- Anecdotal feedback from local comms and P&C teams and feedback from local leaders
- Pulse survey 2

with useful and straightforward information so our audiences know what and when things are happening and any actions they need to take.

#### Focus on our kaimahi

Our communications will be grounded in the needs, preferences and overall wellbeing of our people and will continue to reinforce the value of their input and ideas. We will actively encourage ongoing involvement and feedback, including them being able to ask questions and seek clarification.

#### Manage reputational risk and public interest

We will carefully mitigate identified risks associated with results release and share our engagement story with key interested external partners.

### Our timeline:

Event/Action	Audience	Channel/s	Person responsible for finalizing comms	Person responsible for sending comms	Date completed + supporting material.
Phase 2 comms plan drafted	Various	Comms plan	Sarah	Sarah	Ongoing
Follow up with comms reps – where survey results are at + roll out of morning teas.	All staff (entity and national level)	Local comms reps, national Pānui and hui	Sarah & Jeremy	Sarah, local comms reps and national internal comms team	Thursday 26 January
Survey insights reporting finalized	Various	Report	Ask You Team	Ask Your Team	Tuesday 31 <sup>st</sup> January
Media plan and reactive lines drafted	Various	Comms plan	Sarah Moffat + strategic comms team	Sarah + strategic comms team	Wednesday 1 February (to be refined over time)
Project team meet + discuss next steps + review results	Project team	Meeting	Ask Your Team	Ask Your Team	Thursday 2 February
ELT Report and cover paper finalised	ELT	Report	Ask Your Team/Project Team	Ask your Team/Project Team	Thursday 2 February
ELT review survey paper, including findings, themes, proposed actions, next steps and roll out	ELT	Report	Ask Your Team/Project Team	Ask Your Team/Project Team	Tuesday 7 February
Share Te Whatu Ora wide results and draft ST and MT priorities and actions with Unions (nationally).	Unions	Report/Presentation	Ask Your Team/Project Team/Margie	Ask Your Team/Project Team/Margie	Thursday 16 February
People and Culture Committee review	PCDC	Facilitated discussion	Ask Your Team/Project Team	Ask Your Team/Project Team	Friday 17 February
Communicate out and engage on results	s and action planning	ng process			the second second second second
Brief all staff on Te Whatu Ora wide results, priorities and actions.	All Staff	Margie video + local leaders + comms reps + national Pānui + hui	Project Team + Jeremy/Joanie + Helen Mexted + Deidre Hill +Margie	Margie with national office internal comms team.	Wednesday 22 February – National Pānui Thursday 23 February – Leaders Hui Friday February 24 – Margie's Pānui to all staff
Brief local comms and P&C survey leads/reps	Local comms and P&C teams	Email + collateral	Sarah + Jeremy	Sarah + Jeremy + Joanie	Monday 27 February
28 entity ELT reports shared/undertaken (provided with full list of verbatim comments separately) to determine ST and MT priorities and draft actions, next steps (including union and staff engagement approach) comms plans and leaders quick guide.	Local leaders, P&C and comms teams	Reports/presentations	Joanie + Jeremy + Ask Your Team	Ask your Team + Margie + Regional Leads?	Monday 27 February
Districts to roll out comms and action planning with Services/Directorates	Districts/Entities	Local comms channels and leaders	Local comms teams	Local comms teams	March 2023
Local engagement with unions	Local Union	Meeting/discussion	Local P&C lead	Local P&C lead	March 2023
Senior Leader Roadshow – meet and greet with selected teams (as part of wider operating model change comms)	Teams	Face-to-face meeting/morning tea/Yammer	Project team + Margie + ELT	Margie + ELT + Local leadership	March 2023
Source, draft and schedule "highly engaged teams" case studies.	All staff with potential for external use.	Social media + regular internal channels/Pānui/Yammer	Sarah + project team	Sarah Moffat	March 2023
Run second pulse survey	All staff	As per first survey with refinement, as needed.	Project Team	Margie + project team	April 2023?

### Our risks and mitigations

Risk

### People leaders don't feel equipped/supported to lead

### Mitigation

Provide targeted information and resources to People Leaders including messaging to use with their

their people through the results and action planning process.	<ul> <li>people and stakeholders.</li> <li>Remind them often of the important role they play in leading their people, and the org., through change.</li> </ul>		
Kaimahi and stakeholders don't know what is happening with the results and when.	<ul> <li>Take a leader led approach to communication</li> <li>Make information easy to access, engage with and understand.</li> <li>Share what we know transparently and in a timely way</li> </ul>		
Staff don't have confidence the survey will make a difference/will be acted upon.	<ul> <li>Communicate action planning clearly and often to reinforce accountability.</li> <li>Take a leader led approach to communication – (national/district as appropriate).</li> <li>Make information easy to access, engage with and understand.</li> <li>Share what we know transparently and in a timely way.</li> <li>Provide strategic context as appropriate.</li> <li>Place the survey in the broader Te Whatu Ora change as much as we can.</li> <li>Refer back to what 'grounds us' – Te Pae Tata, the Health Charter and the Five System shifts.</li> </ul>		
Senior leaders aren't visible or knowledgeable on what is happening.	<ul> <li>Provide leaders with the support they need to lead.</li> <li>Ensure effective message cascade is happening.</li> <li>Include regular messaging in national pānui as required.</li> </ul>		

	<ul> <li>Provide key messaging to senior leaders to support them in their communications.</li> <li>Keep messaging timely, to the point, clear and easy to engage with.</li> <li>Identify and clearly communicate any actions we need people to take.</li> <li>Repeat messages often to achieve cut through.</li> </ul>			
People are preoccupied with BAU and/or other change going on.				
Negative results/comments from the survey make their way into the public domain.	<ul> <li>Have reactive lines prepped and ready to use.</li> <li>Tell our engagement story on our terms – highlight where we are highly engaged and focus on the positives, while also taking ownership of the results and being clear on what actions we are taking.</li> </ul>			
People have survey fatigue and are reluctant to do it all over again.	<ul> <li>Reiterate how easy the survey is to do.</li> <li>Clearly communicate the reasons and benefits for undertaking a second survey.</li> <li>Focus on how regular surveys help us track our progress over time.</li> </ul>			

### **Our Key Messages**

# Positioning Statement: The results of our first Ngātahitanga Pulse Survey are in now the work begins

Core Message One: Our results send a very clear message about what's important to you and the challenges our kaimahi are facing.

### Supporting messages:

- Our kaimahi are feeling the strain in a variety of ways.
- I wholeheartedly acknowledge that some of you are feeling undervalued, overworked, stressed, fatigued and fed up.
- · Our survey results present us with substantial opportunities for improvement, and we're up for the challenge.
- There is consistency in our results across the motu and a good consensus of views telling us where the issues and opportunities lie.
- There is a real thirst to see changes and improvements in the delivery of care in the health system, which is exciting to see.
- While people broadly "get" and are supportive of the case for change, there are questions, concerns and frustrations around "how" and "when" change will be implemented.

Our kaimahi told us that what's most important to them right now is:

- Your biggest concern is having the resources you need to do your job well sentiment on this was strong and we are acutely aware of the impact this has on your ability to provide quality care, and minimise risk and harm to your patients.
- Knowing what is happening around organisational change and health sector transformation change of this scale is never easy, but we commit to doing better to keep you informed and involved as we go through transformation.
- Leadership is another theme that regularly came up in our verbatim comments, which encompasses system, organisational and people leadership. It is clear that work is needed to ensure our leaders are equipped to lead, and that decision making is inclusive and transparent at all levels.
- Culture and equity also came up as an area that requires some attention. Varying views came through in the survey about how the health sector should approach equity to ensure the best outcome for all this shows more work is needed for us to come together around a common understanding of equity as it relates to healthcare. In addition, a number of kaimahi felt more could be done to encourage cultural competency, awareness and safety in the workplace.
- You also told us that your experience of being an employee of Te Whatu Ora could be better, through things like more training
  opportunities, recognising the hard work of staff, feeling more connected to your colleagues across the motu, and in general having a
  positive workplace culture.
- · For some, additional immediate wellbeing support is clearly needed, so we're going to provide it.
- There were a very small number of specific instances of bullying and/or inappropriate behaviour that came through in the survey.
- Te Whatu Ora takes any allegations of bullying and inappropriate behavior incredibly seriously and these instances are being individually and anonymously followed up and carefully managed through the appropriate internal processes.
- I want to reiterate that behavior like this will not be tolerated by myself or my leadership team.
- If you see any examples of this type of behavior in the workplace please continue to speak up [include channels for doing so].

Core Message Two: Our results highlight how hard you work, your love for your mahi, how much you value your colleagues, and your capacity to provide compassionate care.

### Supporting messages:

- I am incredibly proud of the work that you do and the way that you do it.
- The highest scoring question for our kaimahi was 'I have capacity to be compassionate and caring to those around me', showing that your relationships with your colleagues remain strong as you work together to serve your patients and communities.
- A strength at a team level is that there is a good degree of confidence that culture, beliefs and values are respected.
- There were also high scores across the board in terms of people feeling a sense of connection and belonging within their team.
- I was also blown away by just how many of you nominated your peers for morning teas to acknowledge their mahi. Your ability to see the efforts of others and taking the time to spotlight it, speaks to the camaraderie and cohesion within our health workforce, particularly at a local level.

### Core Message Three: We've listened to what you've said, now it's time to act

### Supporting messages:

- 27,000 of you had your say, meaning our results are robust and representative of Te Whatu Ora and that meaningful changes can be made.
- We are committed to action planning as an outcome of the survey, at both a national and local level, with several opportunities for quick wins identified as well.

Core Message Four [if confirmed]: Our second Ngātahitanga Pulse Survey will open [add date] and will give us the opportunity to further focus our engagement work in the areas that need it the most.

### **Reactive Media Lines**

### How many people took part in the survey?

27,743 of our kaimahi took the time to have their say, roughly 29% of our overall workforce.

### Why was participation so low?

We are satisfied with our overall participation rate of 29%, which provides a solid and robust survey benchmark and gives us information that is representative of our workforce as a whole.

### How did you break down demographics in your survey results?

Ethnicity definitions	Gender	Length of service	Age
<ul> <li>Asian - Includes Asian, Southeast Asian, Chinese, Indian, Other Asian</li> <li>European - Includes European and New Zealand European</li> <li>Middle Eastern - Includes Middle Eastern, Latin American, African</li> <li>Pacific Peoples - Includes Samoan, Cook Islands, Tongan, Niuean, Fijian, Other Pacific Peoples</li> <li>Other Ethnicity - Includes others not included in the above.</li> </ul>	<ul> <li>Female</li> <li>Male</li> <li>Prefer not to say</li> <li>Another gender</li> </ul>	<ul> <li>Less than a year</li> <li>1 - 2 years</li> <li>3 - 5 years</li> <li>6 - 9 years</li> <li>10+ years</li> </ul>	<ul> <li>Less than 18 years</li> <li>8 - 25</li> <li>26 - 35</li> <li>36 - 45</li> <li>46 - 55</li> <li>56 - 65</li> <li>66+</li> </ul>

### How do you know you've accurately captured ethnicity in the survey?

While every attempt was made to ensure ethnicity data was captured accurately from the outset, we acknowledge that in hindsight we did not use the correct question methodology (Statistics NZ's ethnicity standard) when formulating our survey question on ethnicity. Therefore, this aspect of our data is less accurate than we would have liked it to be. We will ensure the appropriate standards for our methodology is used in all future surveys.

### How did you break down geographic locations in your survey?

They survey was conducted across 28 entities that from 1 July 2022 came together to form Te Whatu Ora. This means that districts and shared service agencies across the motu will be able to make change at a local level from local results. This information is also aggregated up to form an overarching Te Whatu Ora wide view to inform organisation wide action planning.

### How did you break down professions in your survey results?

Professions were categorised as follows:

- Allied & Scientific
- Care and support (includes cleaners, Health Care Assistances (HCAs), orderlies, security)
- Corporate & other (includes management)
- Midwifery

RMO SMO

How did the survey measure the views of Te Whatu Ora Staff?

Nursing (excludes Health Care Assistants (HCAs))

The survey was made up of 17 closed ended questions that used a six point Likert Scale to measure sentiment amongst Kaimahi from strongly disagree (0%), through to strongly agree (100%). Responses were averaged out across the scale to determine an overall percentage position on the scale for each question. An additional open ended question was also included in the survey, with verbatim comments from this being analysed and segmented into a number of themes.

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#### What did the survey results tell you?

- · We acknowledge that our survey results present us with substantial opportunities for improvement, and we're up for the challenge.
- There is consistency in our results across the motu and a good consensus of views telling us where the issues and opportunities lie.

There is a real thirst to see changes and improvements in delivery of care in the health system.

Our kaimahi told us that what's most important to them right now is:

- Having the resources they need to do their jobs well
- Knowing what is happening around organisational change and health sector transformation. 0
- Having leaders are equipped to lead, and that decision making is inclusive and transparent at all levels.
- Working to a common understanding of what equity looks like in healthcare, while also doing more to enable and encourage cultural competency, awareness and safety in the workplace.
- Improving the individual experience as a Te Whatu Ora employee, through things like training opportunities, recognition, connection with 0 Ct. VST colleagues across the motu, and an overall positive workplace culture.

### In what areas did you score the highest?

The questions our people scored the highest were:

- "I have the capacity to be compassionate and caring to those around me" 82%
- "My personal values, cultural beliefs and commitments are respected by my team" 73% .
- "I have not experienced discrimination at work in the last six months" 67%. •

### In what areas did you score the lowest?

The questions our people scored the lowest were:

- "My team has the resources we need to perform our roles" 33% ٠
- "Our team is starting to build relationships across Aotearoa" 50%
- "Information relevant to me is shared with me in a useful timeframe" 54%.

How did you make sure your staff's anonymity was protected when providing their feedback, and how will you continue to ensure their anonymity is protected?

### To be added – use Ask Your Team wording

### What change/improvements are you going to make?

The survey's goal of listening to the voices of our people helps shape meaningful improvements for our kaimahi, communities, patients and whanau. It is not about validating what we already know but is about listening and taking action. Responses will build on what we're already hearing and will help create a full and accurate picture of where we are and what we need to do.

We are still coming together as a new entity and there is a lot more change to come

### Add detail around agreed action planning subject to

### Can I see the verbatim comments from the survey?

One of our top priorities is to maintain the privacy and anonymity of our people, and the integrity of our survey process for the future. To ensure this, verbatim comments are being carefully managed and used for action planning and improvement purposes, rather than being shared in their entirety, without the context needed to draw meaningful conclusions. Where possible, we've included a few representative verbatim comments with our results, to support the themes identified and to provide kaimahi with an idea of the sentiment behind each.

What is Te Whatu Ora doing to address burnout, staff shortages and resourcing?

- Resourcing is not a new issue for the health sector, but this doesn't mean it doesn't continue to be front of mind for us all. •
- . The single biggest concern for our people to come out of the survey is having the resources they need to do their job well - sentiment on this was very strong, and we acutely aware of the impact this has on their ability to provide quality care, and minimise risk and harm to patients.
- There are a number of different elements to the resourcing challenge including retention, recruitment, training and succession planning, fair pay and . safe and fit-for-purpose facilities.
- There are things already underway to alleviate some of these pressures, including the ERA interim order on equity pay rates that was announced in December last year, as well as [build from existing work programme].
- In addition, we take the wellbeing of our kaimahi incredibly seriously. This survey has highlighted that for some, additional immediate wellbeing support is clearly needed, so we're going to provide it.

What is Te Whatu Ora doing to address bullying and inappropriate behaviour in the workplace?

- There were a very small number of specific instances of bullying and/or inappropriate behaviour that came through in the survey.
- While are incredibly concerned and disappointed to hear about these cases, we are pleased that our completely anonymous and confidential survey process has provided our people with a safe space bring these examples to the surface.
- Te Whatu Ora takes any allegations of bullying and inappropriate behaviour incredibly seriously and the small number of cases identified through the survey process are being individually and anonymously followed up and carefully managed through the appropriate internal processes.
- [Outline key P&C initiatives/programmes that address bullying and inappropriate behaviour in the workplace]

#### Are you going to conduct another survey?

From the outset, we committed to taking a Pulse approach, which means having a series of short, sharp surveys over a period of months. This remains our approach, with a second survey scheduled to take place in April 2023.