

Retention Initiatives



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Health Workforce New Zealand (HWNZ) aims to ensure that New Zealand has the best possible health and disability workforce, with high-quality training programmes and excellent career development opportunities.

New Zealand's health sector has been heavily reliant on overseas-trained staff for many years. The emphasis now is on creating attractive career pathways that will help recruitment and keep our skilled professionals in the domestic workforce.

The **Voluntary Bonding Scheme** rewards recent graduates working in hard-to-staff communities and specialties with payments against their student loans. It has been an important and popular initiative in attracting and keeping doctors, nurses and midwives in hard-to-staff areas. Since it was introduced in 2009 more than 1350 graduates have been confirmed on the scheme.

The **Advanced Trainee Fellowship for medical registrars** was introduced in 2010. It offers a scholarship to cover the costs of training or study in New Zealand or overseas, in return for which the trainee makes a contractual commitment to work in a shortage specialty area in New Zealand

after completing their training. The aim of the fellowship is to give trainees with excellent potential the opportunity to benefit from overseas experience, and then enable the New Zealand health sector to benefit from that experience.

These targeted initiatives go hand in hand with national and local efforts to provide individuals with the support and advice they need throughout their careers. From 2011 all HWNZ-funded trainees will have a career plan, agreed with their employer, which will help them map their future and realise their full potential. Four new regional postgraduate training hubs overseen by HWNZ will co-ordinate workforce planning and development, ensuring it meets the needs of local communities as well as trainees.

HWNZ's career support initiatives are being scoped and implemented in collaboration with professional bodies, education providers and employers. We invite ideas and feedback at info@healthworkforce.govt.nz



Voluntary Bonding Scheme

Jen Schroder – midwife



Midwife Jen Schroder, who has been part of the Voluntary Bonding Scheme since 2009, can't speak highly enough of the initiative and what it is doing to support New Zealand's health workforce.

'I am really pleased that this was done to support health professionals rather than leaving us to struggle. It's a genuine effort to make a difference,' she says.

Jen has been working in Counties Manukau District Health Board at Middlemore Hospital since 2009. Middlemore specialises in caring for women with complicated pregnancies and births. It has a very busy birthing unit, with more babies born at Middlemore than any other hospital in New Zealand.

Jen's first experience of Middlemore was on a clinical placement, while she was completing her midwifery training at Auckland University of Technology. She enjoyed the experience so much she applied for the new graduate training programme and started in February 2007.

'I am really pleased that this was done to support health professionals rather than leaving us to struggle. It's a genuine effort to make a difference.'

While Jen's work is entirely hospital-based, she is involved in antenatal and postnatal care as well as working in the birthing unit. Ultimately she says she would like to teach midwifery, but hopes that she would be able to do this while retaining some clinical work at Middlemore.



'There have been problems attracting midwives to Middlemore as it has a reputation for being very busy,' Jen says. Even though there is a lot to do, she says she finds the work stimulating and has no plans to leave the hospital, even when her time on the Voluntary Bonding Scheme has ended.

She says voluntary bonding has helped to retain staff in her area and the number of midwives working at Middlemore has increased. 'It's so important knowing that there are enough midwives around, especially at busy times. When we're really busy you think, "How am I going to make this experience good for these women?" They really just want to know people are caring for them, supporting them and their babies.'

Jen says she makes a point of telling each new intake of midwives to Middlemore about the Voluntary Bonding Scheme. 'Most of them are quite impressed by the extra help you receive to pay off your student loan. I really think it's important that people know about it early in their training, so that they can think about working in hard-to-staff areas, help out their colleagues and work somewhere that really needs their skills.'

Voluntary Bonding Scheme

Melissa Gilbert – theatre nurse



Making the decision to become a theatre nurse is paying off for Wellingtonian Melissa Gilbert.

Melissa says being a theatre nurse wasn't something that was promoted when she was doing her training, but she found she loved it during a clinical placement. 'The best thing about it is the range of operations that you can be part of. I can't say why I was initially attracted to it, but I do love anatomy and science in general,' she says.

Melissa signed up to the Voluntary Bonding Scheme two-and-a-half years ago, soon after completing her nursing training. She hadn't thought about the scheme until an email was circulated at Wellington Hospital, offering it as an option for her and others working there in the hard-to-staff nursing specialties.

She believes the Voluntary Bonding Scheme has a role to play in encouraging New Zealand health professionals to work in hard-to-staff positions and places. Melissa says she works with a lot of nurses from overseas because of the shortage of Kiwis training to work as theatre nurses. 'Part of the problem is that it is hard to employ people who haven't had any experience in theatre. I am very grateful for the eight-week placement I had as a trainee nurse that gave me enough experience to apply for a permanent position.'

'We don't have to do a lot of afternoon or night shifts and for people with families, there is quite a bit of flexibility in the hours they can work.'



Under the Voluntary Bonding Scheme, by working in theatre nursing roles Melissa will qualify for payments against her student loan totalling nearly \$15,000 if she remains on the scheme for five years. That arrangement fits well with her preference for theatre nursing and particularly the scrub nurse role. 'Helping people through their journey to and from surgery is also rewarding. People need to know that there is someone there for them if they are feeling worried or nervous.'

Melissa has worked in orthopaedic and general surgery and will soon be rostered to be part of a neurosurgery team. She describes theatre nursing as a good lifestyle choice as most elective surgery is done between 8 am and 4 pm. 'We don't have to do a lot of afternoon or night shifts and for people with families, there is quite a bit of flexibility in the hours they can work.'

At the moment Melissa, who has recently married, is managing to fit in study for a Master of Nursing Science and continuing to participate in Capital and Coast DHB's Professional Development and Recognition Programme for nurses. Her long-term plans are to continue working as a theatre nurse in Wellington.

Voluntary Bonding Scheme

Neelam Dalman – house surgeon



Dr Neelam Dalman says her enjoyment of her work and lifestyle in Taranaki prompted her to join the Voluntary Bonding Scheme and stay in the region – one of the hard-to-staff communities under the scheme.

At the moment, she is a house surgeon in the Emergency Department at Taranaki Base Hospital and next year plans to join the general practitioner training programme.

Neelam and her GP husband Dr Matthew Dalman moved to Taranaki from Dunedin in 2009 following recommendations from colleagues about the supportive environment Taranaki DHB provided for junior doctors.

‘I have a really good group of colleagues here and it’s a nice working environment,’ she says. Like her, some of her colleagues stayed in Taranaki due to the Voluntary Bonding Scheme and the assistance it provides in paying off student loans. ‘It also feels good to receive some recognition for coming to practise in a rural location,’ Neelam says.

Her decision to become a GP was also influenced by the lifestyle that she and her husband could enjoy. ‘It doesn’t involve shift work, or a lot of evenings. As a GP, even in a rural location, you are not the final person at the end of the line and yet you get to see and treat a wide range of conditions,’ she says.



‘I have a really good group of colleagues here and it’s a nice working environment,’

Similarly at Taranaki Base Hospital, she says she has been given the opportunity to see and do a lot more than she might have done in larger centres.

To be eligible for the Voluntary Bonding Scheme, you need to work in a hard-to-staff area for up to two years at the beginning, with the remainder of your bonding period made up of vocational training in a hard-to-staff specialty. This specialty training can be done anywhere. Neelam says it gives you ‘the flexibility to develop all the skills you need to work in your specialty’.

Advanced Trainee Fellowship

Vernon Reynolds – completing advanced training in general, child and adolescent psychiatry



Young people in Northland with mental health issues will benefit from the experience that trainee psychiatrist Dr Vernon Reynolds is gaining a world away in Canada.

Vernon, who was last year selected to be part of the Advanced Trainee Fellowship, is working and studying at Lionsgate Hospital in Vancouver, taking a particular interest in treatment for adolescents with mental illness. He says being in such a large city means he is able to see a much higher volume of patients and wider variety of illnesses than he would in his hometown of Whangarei or even in Auckland.

‘There is ample opportunity to follow your interests here,’ he says. Vernon is studying cognitive behaviour therapy for psychotic conditions and working in a mixed psychiatric inpatient ward and large outpatient department at Lionsgate. He has also had the opportunity to work as part of a youth crisis team.

When he returns to Whangarei, he hopes to be able to contribute new ideas to mental health care for young people in Northland. ‘Psychiatry, especially child and youth psychiatry, is unfortunately not a popular specialty in New Zealand,’ he says.

‘Adolescence is the time when most serious psychiatric disorders emerge and there are enormous benefits for people if they have a healthy relationship with mental health services, starting from their first episode.’

Before Vernon was accepted on to the Advanced Trainee Fellowship, he and his wife Sandi had taken their family to Sandi’s hometown of Vancouver where they had hoped to gain further training for him and give their two children, aged six and nine, the experience of living in Canada.



When there were no psychiatry training vacancies available, Vernon worked as a landscape gardener with Sandi briefly before returning to take up a short-term locum position in New Zealand. ‘While I was back in New Zealand, the training scheme was announced and it was just perfect for what I was wanting to do,’ he says.

‘Being able to work in Canada has also given me the chance to see how a different health system works. It’s good to absorb it all and see that things can be done differently.’

Drawing on this different perspective, he observes, ‘Through my whole training in New Zealand, it was always the “poor old New Zealand system”, but it really is a bloody good health system. Canada is up there but I think ours compares well. Some things we do much better. Some things they do better here. It’s inspiring. We’re doing all right.’

Vernon, Sandi and their children are intending to return to New Zealand in two or three years when Vernon has completed his psychiatry training and gained further specialist child and adolescent psychiatry experience.

‘Through my whole training in New Zealand, it was always the “poor old New Zealand system.’

Advanced Trainee Fellowship

Ryan Paul – completing advanced training in endocrinology and diabetes



The financial support that the Advanced Trainee Fellowship offers will allow trainee endocrinology and diabetes specialist Dr Ryan Paul to complete his studies without putting his young family under financial stress.

He and his wife Dr Amy Gaskell, a trainee anaesthetist, have a two-year-old and another baby on the way. 'For someone in my position, the fellowship is great as it will allow me to do my research work while being paid at a similar rate to what I would be receiving if I was still doing full-time clinical work,' Ryan says.

In the middle of this year Ryan will start his three-year study towards a PhD on growth hormone replacement and how it interacts with muscle factors. In his fourth year he will use the fellowship funding to travel overseas to do postdoctoral work in the United Kingdom or United States. As part of his commitment to the Advanced Trainee Fellowship, he will then return to Waikato Hospital in 2015 to take up a position, specialising in endocrinology and diabetes.

'For someone in my position, the fellowship is great as it will allow me to do my research work while being paid at a similar rate to what I would be receiving if I was still doing full-time clinical work.'



He says there is a chronic shortage of people working in the area of diabetes and obesity, despite the increasing demand for these services. 'It surprises me as it is such an interesting specialty and very often you can make significant improvements to people's health. The workforce is also ageing and we need young people entering the field.'

Prior to taking up his trainee position at Waikato Hospital, Ryan worked in the United Kingdom between 2003 and 2005. He says, however, that he had always wanted to make his career here. 'I prefer New Zealand, our lifestyle and everything that goes with it.'

Coming back to Waikato Hospital will be a positive move for the family. 'I'm from the Waikato. I grew up here. I'll be bonded for three years but I was interested in returning to the Waikato if the opportunity arose.'

Advanced Trainee Fellowship

Magdalena Biggar – completing advanced training in breast and endocrine surgery



General surgeon Dr Magdalena Biggar is using the Advanced Trainee Fellowship to develop her skills in breast and endocrine surgery in Northern England, before she takes them back to Middlemore Hospital, South Auckland.

Magdalena, who is gaining her higher specialty experience in Newcastle upon Tyne, says in the last two years of her surgical training in New Zealand she was lucky enough to have been placed in Counties Manukau DHB's Surgical Department. 'I think it is the best surgical training unit in the country for advanced trainees, as well as one of the busiest, and I very much enjoyed and thrived in my time there,' she says.

'By the last year of my training I had decided I wanted to work there as a surgical consultant. However, I felt I needed more specialty experience to deliver a high standard of care to patients at such a large tertiary-level facility.'

She says she is very thankful for the Advanced Trainee Fellowship as overseas fellowships can be prohibitively expensive. 'There are just so many expenses that can be difficult to meet – relocation costs; loss of income for the person undertaking the fellowship and their partner; professional fees that cannot be reimbursed overseas; mortgage commitments at home; conference costs . . .'

As well as sidestepping those difficulties, the Advanced Trainee Fellowship offers obvious advantages for the New Zealand health sector. 'Providing funding and then bonding people to New Zealand for a couple of years is an excellent way to encourage New Zealand-trained doctors to gain specialist training overseas and return. Without the Advanced Trainee Fellowship, the cost of specialty training can be enough to make young surgeons look at living permanently overseas, where long-term earnings might be higher. It is such a sad waste of money and teaching resources – and can disadvantage



New Zealand people, particularly when shortages develop in different specialties.'

When Magdalena returns to Counties Manukau DHB she will be helping to reduce New Zealand's shortage of breast and endocrine surgeons – specialists in breast, thyroid, adrenal and other gland surgery. The DHB manages about 9 percent of New Zealand's breast cancers and has a higher rate of thyroid and parathyroid surgery than other parts of New Zealand. This type of surgery is required more by Pacific peoples, who make up a relatively large proportion of Counties Manukau's population.

Reaching Magdalena's level of expertise is not for the faint hearted. She is now in her 16th year of training but says gaining higher specialty experience overseas was important to her. 'Overseas specialist training means that surgeons can develop skills and methods that are really world class. We would otherwise be very slow to adopt advances in our approaches and techniques. Additional fellowship time also allows an opportunity to develop our skills and consolidate our experience before starting more independent consultant-level practice in New Zealand,' she says.

'Providing funding and then bonding people to New Zealand for a couple of years is an excellent way to encourage New Zealand-trained doctors to gain specialist training overseas and return.'