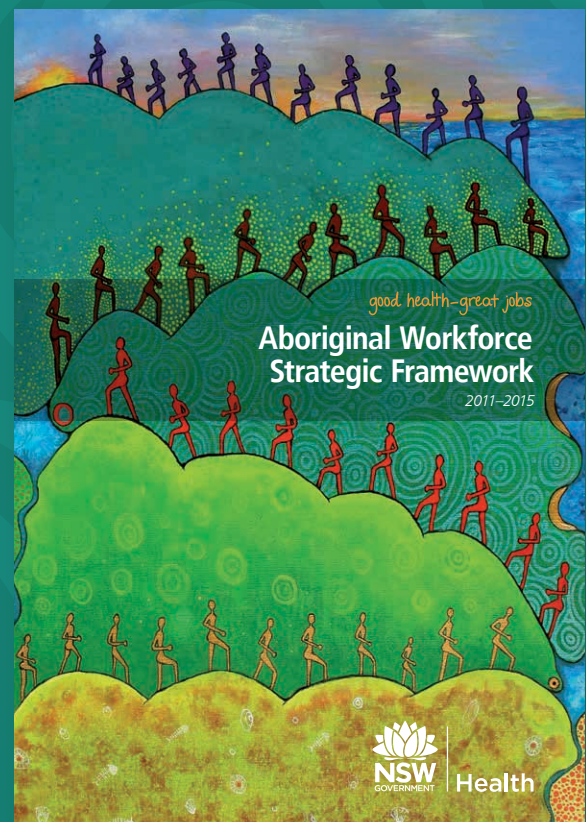


Good Health–Great Jobs

NSW Health Aboriginal Workforce Strategic Framework 2011-2015

Key Performance Indicator Report January-June 2012



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January 2014

Foreword

I am pleased to present the second report on the progress towards the goals of the *Good Health – Great Jobs Aboriginal Workforce Strategic Framework 2011-2015 (the Framework)*.

Since the launch of *the Framework* in November 2011, we are starting to see positive results from the efforts of many Local Health Districts and other Health organisations through targeted activities that work towards reaching our aspiration of 2.6% employment of Aboriginal people in NSW Health. It is important we maintain these gains and now extend our efforts to accelerate these positive results.

There has been a significant commitment made by a number of LHD's and Networks to achieve, and in some cases exceed, this target locally. An example of this is the commitment to develop and implement local Aboriginal Workforce Strategic Implementation Action Plans with coordinated efforts to focus initiatives on improving the way we recruit, retain and support Aboriginal staff.

I am also pleased to see the increased number of new traineeships and apprenticeships for this reporting period. This is a positive start and lays the foundation for career pathways into the varying professions that are much needed across the NSW Health System.

However much more can be done and this will require strong and consistent leadership from all staff at all levels. To support this progress, the positive engagement and consultation of the Aboriginal workforce will be critical to assist with our commitment to closing the health gap in health and employment outcomes.

The challenges and recommendations outlined in this report provide a guide for further action and engagement into the future as we carry out our day to day activities.

I look forward to hearing about more strategic and innovative activities being created and implemented by the local Aboriginal Workforce Steering Committees aimed at improving these outcomes as we draw closer to 2015.



Dr Mary Foley
Director-General
NSW Ministry of Health

Introduction

Good Health – Great Jobs, the NSW Health Aboriginal Workforce Strategic Framework 2011 – 2015 was launched by the Hon. Jillian Skinner MP, Minister for Health on 2nd September 2011 at the Centre for Education and Workforce Development, Rozelle.

As part of the implementation of *Good Health – Great Jobs*, the NSW Health Aboriginal Workforce Strategic Framework 2011 – 2015, Local Health Districts, other public health organisations and the Ministry of Health are required to provide half-yearly reports on the KPIs set out in the Framework.

This is the second *Good Health – Great Jobs* Key Performance Indicator Report, for the period 1 January 2012 to 30 June 2012. The report will provide feedback on progress towards significant workforce benchmarks.

This collated report is to provide advice to the NSW Ministry of Health Director General, Chairs of Local Health District Boards and Chief Executives of Local Health Districts (LHD) / Networks and the four pillars, and other public health organisations to measure progress of the implementation of *the Framework*.

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Executive Summary

NSW Ministry of Health has identified key priorities and actions to increase the number of Aboriginal people in the health workforce. Implementation of these actions will lead to a number of key outcomes being achieved over the duration of the *Framework*:

- Meet the target of 2.6%¹ Aboriginal health workforce by 2015.
- Employ and retain Aboriginal health workforce employees through the implementation of specifically designed Aboriginal identified and/or targeted recruitment and retention processes.
- Ensure the Aboriginal workforce has access to ongoing professional development, education and training opportunities, and clear career pathways.
- Provide strong leadership and innovation to ensure the continuing growth and development of the NSW Health Aboriginal workforce.
- Map the NSW Health Aboriginal workforce by occupation, salary level, location and classification to ensure workforce distribution matches community needs.
- Provide employment to Aboriginal university graduates in health professions. Maximise the number of NSW Health staff who have completed Aboriginal Cultural Training.

This Framework provides a mechanism to assist in planning, prioritisation, target setting, monitoring, and reporting of progress in Aboriginal health workforce capacity building.

The Framework is underpinned by action plans within each Local Health District and other public health organisations. The localised strategies will have Aboriginal workforce targets reflective of the Aboriginal populations within those Districts. Therefore local targets may vary from the State target of 2.6%.

The reports received indicate a significant need for review of the data collection tool which will enable greater interpretation of the data and standardised responses to data collection. Not all organisations responded to the data reporting request which will impact on the reliability of the data presented throughout the report.

Significant outcomes from the reported data:

- 24% of the Aboriginal workforce is male;
- 65% of the Aboriginal workforce is permanently employed;
- 9% of Aboriginal identified positions are vacant;
- 13.8% of positions in Aboriginal health programs are estimated to be vacant;
- 53% of the respondent organisations had an Aboriginal Workforce Strategy Implementation Plan in place;
- 35% of the respondent organisations had an Aboriginal Employment Coordinator.

¹ National Partnership Agreement on Indigenous Economic Participation, Council of Australian Governments, 2009.

Key Performance Indicators

Respondents

There were 20 KPI reports received from Local Health Districts (LHDs), the NSW Ministry of Health and other public health organisations. No reports were received from 3 LHDs and 2 Pillar organisations.² This was the first round of inquiry to include the original four pillars. Respondent and non-respondent agencies have been listed in Appendix 1. Responses were sought from 25 public health organisations in NSW achieving an 80% response rate. This was greatly improved by comparison to the first reporting round wherein responses were sought from 20 public health organisations and a 65% response rate was achieved.

Results

The NSW Ministry of Health collects and reports half yearly on 18 KPIs (refer to Appendix 2 for the full list in brief).

The results against KPI's 1, 2, and 4 to 8 are provided as reported by the NSW Ministry of Health.

The results for KPI's 3 and 9 to 18 are provided for each Local Health District, Network and other public health organisation that provided reports. Included under KPI's 9 to 18 below is a summation of the results and outline of any issues raised by LHDs, Networks and other public health organisations against the KPI report.

² A number of reports were received well after the closing date of 15 August 2012. Reasons provided for late reports included the impact of the recent NSW Health restructure and difficulties in obtaining requested data.

KPI 1

Progress towards the target of 2.6% of Aboriginal health workforce in NSW reported by Local Health District and other public health organisations.

According to the Premier's Workforce Profile (PWP) Equal Employment Opportunity (EEO) data estimates, the Aboriginal workforce has reached 1.8%. The NSW Health, Health Information Exchange (HIE) data reports 1.3%.

KPI 2

Percentage Aboriginal workforce by occupation³

Treasury Group	Aboriginal	Non-Aboriginal	%
Medical	30	13,915	0.22%
Nursing	498	60,473	0.82%
Hospital Support and Corporate	383	23,265	1.65%
Allied Health	80	12,546	0.64%
Other Professionals, Para-professionals and clinical support staff	397	4,519	8.79%
Scientific and Technical support staff	53	8,870	0.60%
Hotel Services	240	9,985	2.40%
Maintenance and Trades	17	1,112	1.53%
Ambulance Staff	69	3,983	1.73%
Oral Health Practitioners and Support Workers	21	1,542	1.36%
Other	24	599	4.01%
TOTAL	1,812	140,809	1.29%

Professional Group	Aboriginal	Non-Aboriginal	%
Managers	70	2,122	3.30%
Professionals	446	82,460	0.54%
Technicians and Trades Workers	40	6,109	0.65%
Community and Administration Workers	835	25,567	3.27%
Clerical and Administrative Workers	206	14,816	1.39%
Sales Workers	2	43	4.65%
Machinery Operators and Drivers	32	1,786	1.79%
Labourers	181	7,906	2.29%
TOTAL	1,812	140,809	1.29%

³ Source: NSW Ministry of Health, Health Information Exchange.

KPI 3

Percentage Aboriginal workforce by salary level (male/female)⁴ (Note: this item is recorded and reported by LHDs rather than centrally by the Ministry).

Percentage Aboriginal workforce by salary level (male/female)	Male	Male %	Female	Female %
>\$0 - < \$39,670	8	15%	45	85%
\$39,670 - < \$52,104	45	25%	134	75%
\$52,104 - < \$58,249	20	21%	75	79%
\$58,249 - < \$73,709	8	21%	31	79%
\$73,709 - < \$95,319	3	20%	12	80%
\$95,319 - < =\$119,149	4	80%	1	20%
>\$119,149	20		1.52%	
Casual	143		1.68%	

Total Aboriginal Workforce (as reported by respondent organisations)	Male	Female
361	88	273
	24%	76%

KPI 4

Percentage Aboriginal workforce by classification.

The January to June 2012⁵ data demonstrates 65.0% of the Aboriginal workforce is permanently employed (57% F/T); 13% temporarily employed; 11% casually employed.

KPI 5

Number of Aboriginal Cadetships = 24.

KPI 6

Number of Aboriginal university graduates employed by classification and location = 39 (17 in NSW Health).

Number of Aboriginal university graduates employed by classification and location	# Total reported
NSW Ambulance	2
Health Education and Training Institute (HETI)	2
Justice & Forensic Mental Health Network	13
Murrumbidgee LHD	15
Western NSW LHD	7
TOTAL	39

⁴ Note this is substantial salary and not actual earnings i.e. excludes overtime and casuals, as casuals do not have a substantial salary.

⁵ The data was not comprehensively reported by all services.

KPI 7

Aboriginal recruitment entries and exits to NSW Health.

96 Aboriginal position entries and exits were reported. 38 entries and 19 exits were specifically reported into and out of the NSW Health system.

KPI 8

Study leave per Aboriginal staff member by Local Health District and other public health organisations.

There was a ratio of 1.42 (Aboriginal):1.45 (non-Aboriginal) occasions of study leave by staff members.

Local Health Districts and other public health organisations collect and report on the following KPIs:

KPI 9

Number of staff who have completed Aboriginal Cultural Training.

Occasions of staff training against Aboriginal Cultural Awareness: 1,462 (1.2%) - Respecting the Difference eLearning⁶ training; 114 (0.1%) - Respecting the Difference Face to Face⁷ training; 1,871 (1.5%) - older forms of Aboriginal Cultural Awareness training.

KPI 10

Number of Aboriginal Traineeships.

18 existing trainees and 35 new trainees.

KPI 11

Number of Aboriginal Apprenticeships.

6 existing apprenticeships and 30 new apprenticeships were reported.

KPI 12

Percentage vacant Aboriginal identified positions.

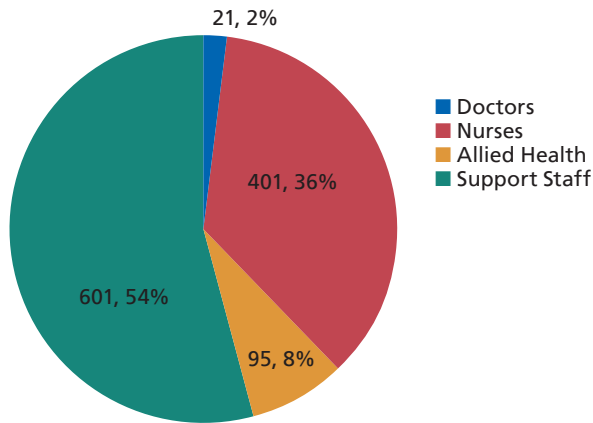
% vacant Aboriginal identified positions by reporting service	%
NSW Ambulance	n/a
Central Coast LHD	19
Health Education and Training Institute	0
HealthShare	0
Illawarra Shoalhaven LHD	0
Justice & Forensic Mental Health Network	26
Murrumbidgee LHD	2.1
Nepean Blue Mountains LHD	20
Northern Sydney LHD	12.5
South East Sydney LHD	8.7
Sydney LHD	13
Western NSW LHD	0

⁶ eLearning is the first phase of Respecting the Difference.

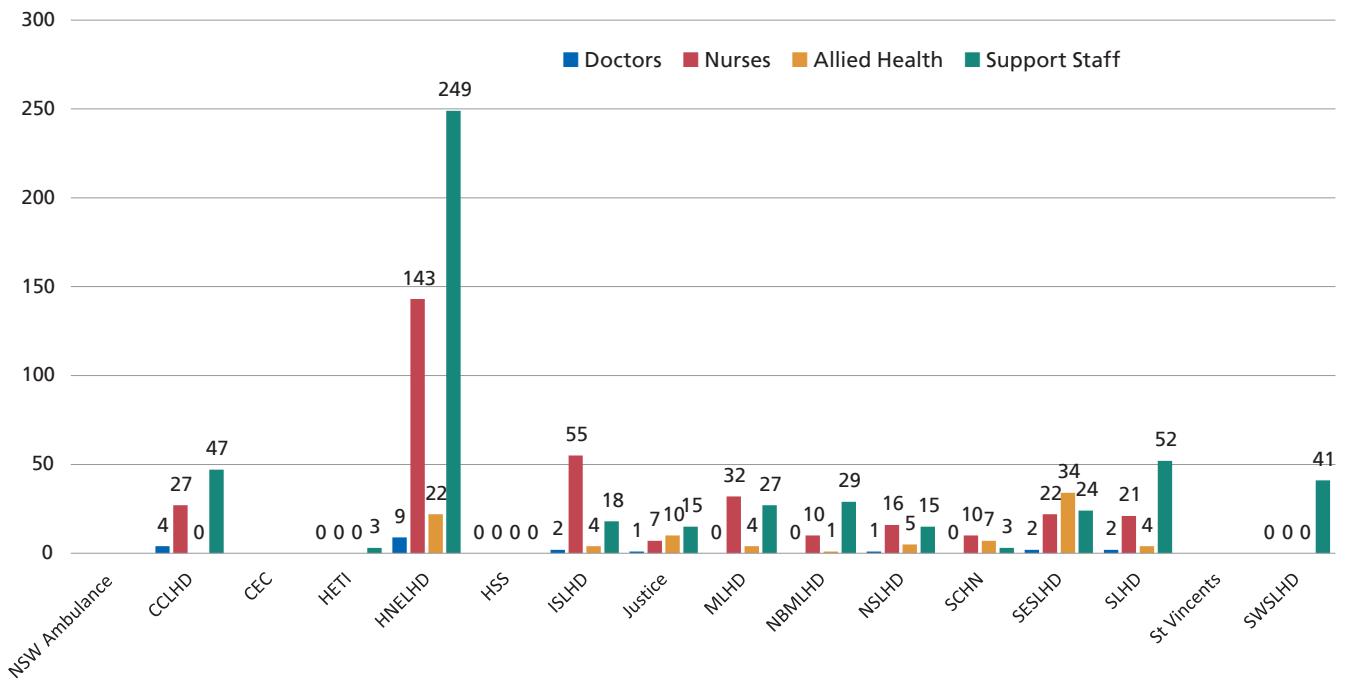
⁷ Face to Face is the second phase of Respecting the Difference training, comprised of generic and local content.

KPI 13

Total number of Aboriginal staff by main clinical groups.



Number of Aboriginal Staff by main clinical groups.⁸



⁸ NSW Ambulance N/A

KPI 14

Percentage vacant positions in Aboriginal health programs

% vacant positions in Aboriginal health programs (reporting organisations)	Percentage of vacant positions in Aboriginal health programs
NSW Ambulance	n/a ⁹
Central Coast LHD	0
Health Education and Training Institute	60
HealthShare	0
Illawarra Shoalhaven LHD	0
Justice & Forensic Mental Health Network	36
Murrumbidgee LHD	0
Nepean Blue Mountains LHD	0
Northern Sydney LHD	12.5
South East Sydney LHD	9.1

KPI 15

Percentage Aboriginal staff working in Aboriginal health programs by profession and location

Organisations which did not report information have not been included in this table. Of the reporting agencies, Justice & Forensic Mental Health Network reports 37.5%, Nepean Blue Mountains LHD reports 38%. The remaining data reported does not provide the level of detail and context to enable interpretation. The data mining methodology requires review.

% Aboriginal staff working in Aboriginal health programs by profession and location	#	%
Murrumbidgee LHD	63	
Health Education and Training Institute	20.8	40%
Justice & Forensic Mental Health Network	200	37.5%
South East Sydney LHD	90	
Northern Sydney LHD		12.5%
Central Coast LHD		83%
Nepean Blue Mountains LHD	55	38%
Western NSW LHD		1.9%
Western Sydney LHD	55	

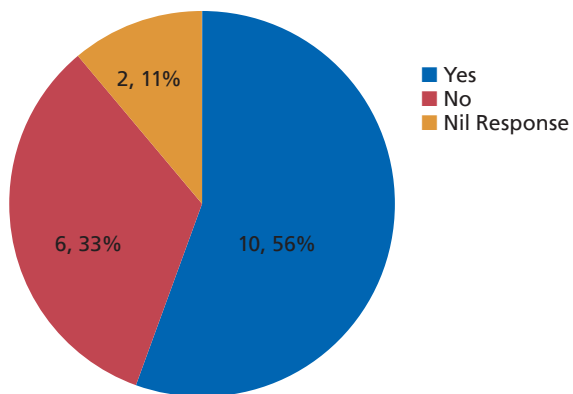
Key

Data not reported

⁹ Organisation does not run specific Aboriginal health programs.

KPI 16

Services with an Aboriginal Workforce Strategy Implementation Plan.

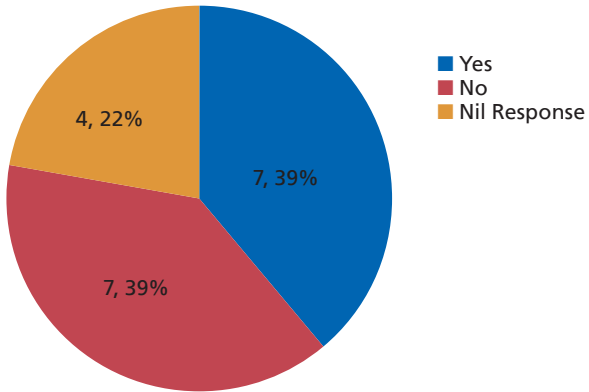


Ten (10) implementation plans are reported to be in place.

Aboriginal Workforce Strategy Implementation Plan	Yes	No	Nil Response
NSW Ambulance			1
Central Coast LHD	1		
Clinical Excellence Commission	1		
Health Education and Training Institute		1	
Hunter New England LHD	1		
HealthShare	1		
Illawarra Shoalhaven LHD	1		
Justice & Forensic Mental Health Network	1		
Murrumbidgee LHD		1	
Nepean Blue Mountains LHD	1		
Northern Sydney LHD	1		
Sydney Children's Hospital Network	1		
South East Sydney LHD		1	
Sydney LHD	1		
St Vincent's Health Network			1
South Western Sydney LHD		1	
Western NSW LHD		1	
Western Sydney LHD		1	

KPI 17

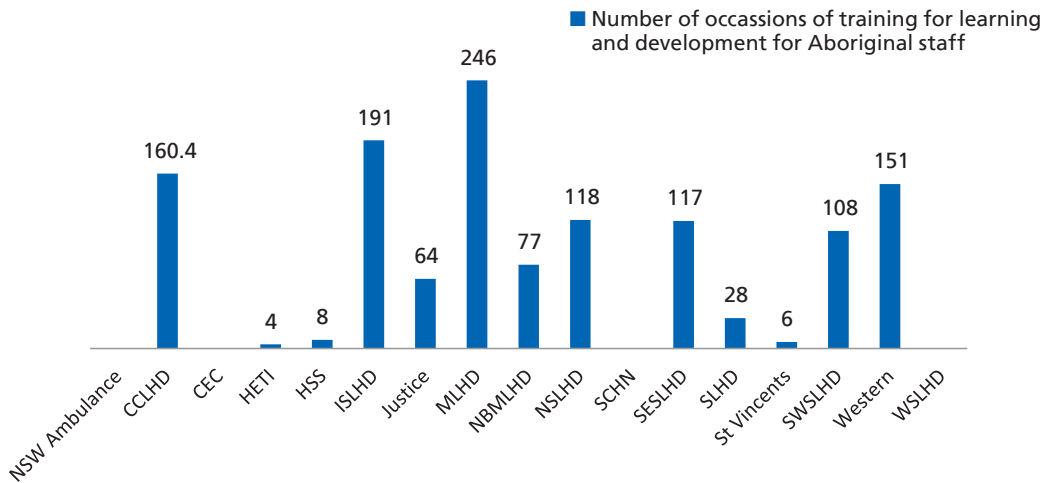
Aboriginal Employment Coordinator (AEC) at Local Health District and other public health organisation level.



A total of seven (7) Aboriginal Employment Coordinators were employed during this period.

KPI 18

Number of occasions of training for learning and development for Aboriginal staff (6 months) to June 2012.



Seven (7) health services reported occasions of training over 100.

Progress

It was identified in the July to December 2011 *Good Health – Great Jobs* report that in order to reach the target of 2.6% Aboriginal workforce by 2015 there would need to be approximately 360 new Aboriginal staff employed each year (total of 1440). Entry and exit data currently highlights that we are not reaching the necessary growth per annum to achieve this target. There were 185 new Aboriginal starters (entries) and 138 terminations (exits) between July and December 2011. The actual staffing increase in July to December 2011 was therefore only 47 people. In January to June 2012 the reported data showed there were 38 Aboriginal starters (entries) and 19 terminations (exits). This represented an actual rise of 19 Aboriginal people across the state.

This slow progress has raised the state-wide annual recruitment target from 360 to approximately 458 people annually to achieve the overall minimum target of 1440 new Aboriginal employees across the state by 2015.

Achieving the desired result will require significant recruitment drives across all parts of NSW Health and strong leadership. Since the launch of *Good Health – Great Jobs* there has been a significant commitment made by a number of Local Health Districts to achieve this result with the establishment of a number of Local Health District Aboriginal Workforce Steering Committees to develop and implement strategies to recruit and retain Aboriginal staff.

There is a demonstrable need to support entry points via Cadetships, Traineeships and Scholarships as:

- they provide entry opportunities for Aboriginal people into NSW Health; and,
- in the long term provide a source of sustainable employment for the health system as we approach the overall current ageing workforce's retirement age.

NSW Health services are not fully engaged in the process of developing service based Aboriginal Workforce Strategy Implementation Plans. The role of the Aboriginal Employment Coordinator (or similarly titled role) has not been significantly recruited across the state. This can have the effect of preventing the development of local strategic plans and limit the ability of health services to attract and retain Aboriginal employees across the breadth and depth of health service roles.

Challenges

In reporting on the period January to June 2012, health service feedback included:

- An inability to provide a complete report on the ratio of Aboriginal staff members. This is due in part to hosting two reporting methodologies: EEO data and Aboriginal Position data. The reporting of EEO data is an elective process and some organisations were unable to report Aboriginality, stating:
 - “on employees commencing in mainstream positions”;
 - “The systems that are used in the Local Health District also do not actively track Aboriginality with positions.”

Consistent themes raised in the KPI report responses from LHDs were:

- Difficulties in obtaining the requested KPI data due to NSW Health restructure issues, systems not collecting the specified data, in some cases percentages were included where requested while a number of reports included numbers instead of percentages.
- Inaccurate or incomplete EEO data held by LHDs and the Health Information Exchange used by the NSW Ministry of Health.
- Difficulty in collecting data around study leave (KPI 8) and occasions of training (KPI 18).
- Questions were confusing and not seeking data in a useful manner.

As a result of this feedback, the Good Health – Great Jobs Steering Committee has reviewed the data collection template to improve questions and reduce required data. Also issues relating to data coding and the data systems have been referred to the Workforce Planning and Development Branch for consideration

Glossary

EEO Equal Employment Opportunity
HIE Health Information Exchange

LHD Local Health District
PWP Premiers Workforce Profile

Definitions (as they relate to the NSW Public Health System)

Cadetship

Earn while you learn program, under a contract with a Local Health District or specialty health service, often with a job at the end which is based on student completion of their program of study and/or appropriate registration in their field of learning. Access to cadetships is based on eligibility criteria including that the individual is undertaking their first undergraduate course.

Good Health - Great Jobs

Good Health – Great Jobs, NSW Health Aboriginal Workforce Strategic Framework 2011-2015 is the strategic Framework established by the NSW Ministry of Health to facilitate the NSW Public Health System, Chief Executives, Chairs of the Local Health District Boards and Workforce Managers to achieve the Recruitment and Retention goals of the NSW Public Service. This is in direct relationship to the Council of Australian Governments establishment of a new target employment rate of 2.6% for the Australian States and Territories.

The Chief Executive Service Agreements includes implementing the Framework to achieve the targets for 2015. This is itemised as Good Health – Great Jobs under the section titled People and Culture.

“Progress towards achieving the key outcomes of the Framework will be collected half-yearly and reported by the NSW Department of Health for the NSW Health system.”
Aboriginal Workforce Strategic Framework 2011-2015 (p.9).

Local Health District (LHD)

Local Health Districts manage the various clinical and non-clinical activities within established regions in NSW.
<http://www.health.nsw.gov.au/services/index.asp>

Pillar

One of the Four (4) Pillars as identified in Recommendation 1.34 of the *Final Report into the Special Commission of Inquiry into Acute Care Services*. The Pillar organisations were established to provide the specialty commitment to respond to the core components of Quality and Safe Patient Care in the NSW Health System. While some of the organisations names have changed since the time of the Report, their core purpose remains the same.

Scholarship

A funding opportunity to assist students to achieve their day to day activities to ensure successful outcomes as they progress to completion of their program of study, for example, this might include book allowances and study leave.

Traineeship

Earn while you learn program, under contract usually with a Local Health District. Trainees are engaged at the beginning of their program of work and study. A set of competencies are usually applied to ensure completion to the appropriate professional standard and achievement of a nationally recognised qualification.

Appendix 1

Monitoring organisational responses to KPI report requests

Service Type	Organisation	J-D 2011	J-J 2012
		Total Possible =20	Total Possible = 25
LHDs	Central Coast LHD	1	1
	Far West LHD	0	0
	Southern NSW LHD	1	0
	South West Sydney LHD	0	1
	Western Sydney LHD	1	0
	Northern NSW LHD	0	1
	Sydney LHD	0	1
	Northern Sydney LHD	1	1
	Nepean Blue Mountains LHD	0	1
	Mid North Coast LHD	1	1
	Hunter New England LHD	1	1
	Illawarra Shoalhaven LHD	1	1
	Western NSW LHD	0	1
	Murrumbidgee LHD	1	1
	South East Sydney LHD	1	1
Specialty Health Networks	Sydney Children's Hospital Network	1	1
	Justice & Forensic Mental Health Network	1	1
	St Vincent's Health Network	1	1
	NSW Ministry of Health	1	1
Shared Services	NSW Ambulance	0	1
	NSW Health Pathology	0	0
	Health Protection NSW	0	0
	HealthShare	0	1
	Health Infrastructure	0	0
Pillars	Agency for Clinical Innovation	0	0
	Bureau of Health Information	0	0
	Clinical Excellence Commission	0	1
	Health Education and Training Institute	0	1
	NSW Kids and Families	0	0
Total No: Reports Rec'd		13	20
Percentage of total possible reports received		65%	80%

0 = Nil reports required in reporting period

Appendix 2

Good Health–Great Jobs Key Performance Indicators

KPI	Description
1	Progress towards the target of 2.6% of Aboriginal health workforce in NSW reported by Local Health District and other public health entities
2	Percentage (%) Aboriginal workforce by occupation (Treasury Code)
3	Percentage (%) Aboriginal workforce by salary level (male / female)
4	Percentage (%) Aboriginal workforce by classification (permanent, temporary, casual / full time / part time)
5	Number of Aboriginal Cadetships by course and % of Cadetships
6	Number of Aboriginal university graduates employed by classification and location
7	Aboriginal recruitment entries and exits to NSW Health
8	Study leave per Aboriginal staff member by Local Health District and other public health organisations
9	Number of staff who have completed Aboriginal Cultural Training per year
10	Number of Aboriginal Traineeships
11	Number of Aboriginal Apprenticeships
12	Percentage (%) vacant Aboriginal identified positions
13	Number of Aboriginal staff by main clinical groups
14	Percentage (%) vacant positions in Aboriginal health programs
15	Percentage (%) Aboriginal staff working in Aboriginal health programs by profession and location
16	Aboriginal Workforce Strategy Implementation Plan
17	Aboriginal Employment Coordinator at Local Health District and other public health organisation level
18	Occasions of training for learning and development for Aboriginal staff

Appendix 2 July to December 2011 KPI Reporting Template

Good Health - Great Jobs NSW Health Aboriginal Workforce Strategic Framework 2011 – 2015 Draft Key Performance Indicator Reporting Template

Ministry of Health KPIs:

Progress towards achieving the key outcomes of the Framework will be collected half yearly and reported by the NSW Ministry of Health for the NSW Health system.

KPI										
1	Progress towards the target of 2.6% of Aboriginal health workforce in NSW reported by Local Health District and other public health entities									
2	% Aboriginal workforce by occupation (Treasury Code)									
3	% Aboriginal workforce by salary level (male/female)									
4	% Aboriginal workforce by classification (permanent, temporary, casual / Full-time/Part-time)									
5	Number of Aboriginal Cadetships by course and % of Cadetships									
6	Number of Aboriginal university graduates employed by classification and location									
7	Aboriginal recruitment entries and exits to NSW Health									
8	Study leave per Aboriginal staff member by Local Health District and other public health organisations compared to study leave per staff member									

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Male %	Female %	% Temporary	% Permanent
% Casual			
# of Cadetships			
# in NSW Health			
			# Positions funded by NSW Health but working in other orgs
			F/T

Local Health Districts and Other Public Health Entities

Local Health Districts and other public health organisations will be required to collect and report half yearly on the following

KPI										
9	Number of staff who have completed Aboriginal Cultural Training per year									
10	Number of Aboriginal Traineeships									
11	Number of Aboriginal Apprenticeships									
12	% vacant Aboriginal identified positions									
13	Number of Aboriginal staff by main clinical groups									
14	% vacant positions in Aboriginal health programs									
15	% Aboriginal staff working in Aboriginal health programs by profession and location									
16	Aboriginal Workforce Strategy Implementation Plan									
17	Aboriginal Employment Coordinator at Local Health District and other public health organisation level									
18	Occurrences of training for learning and development for Aboriginal staff									

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
# Respecting the Difference Cultural Training	# Existing trainees & field/profession	# Existing apprentices & field/profession	# Existing staff undertaken previous Aboriginal Cultural Training

Free Text re implementation, evaluation and compliance

Tick or Cross

