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Te Roopu Tupu Tahī

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**NGO Mental Health  
Workforce Development Plan  
2006-2010**

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# 1 Executive Summary

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This NGO Mental Health and Addictions Workforce Development Strategy (Strategy) has been prepared with the assistance of Te Roopu Tupu Tahī (TRTT) members. Included in the document is an account of the process that has led to the production of the Strategy. Assumptions made about the scope of the document and the nature of the mental health service system are described because workforce development occurs within a context that influences what is achievable and what the full contribution of NGO workforce development can be.

The Strategy reflects the work undertaken as a result of the initial 2004 Briefing Paper to TRTT identifying activities to progress workforce development across NGO services. Next Steps are identified based on the continuation of existing work and identification of new areas to progress.

A framework for considering workforce development and then clustering activities or projects is used in both the reflection on Achievements and the Next Steps.

A brief review of some significant workforce development papers and regional and national documents is included to illustrate the potential to use these to inform local actions.

The Strategy concludes that adequate infrastructure (people, time, resources and systems) are required to ensure that the other areas of workforce development can be sustained. The vision for the Nelson Marlborough NGO Mental Health and Addiction sector is:

***“A strong, robust and professional NGO mental health and addictions workforce”***

And how do we intend to achieve this:

***By working collaboratively, sharing resources and expertise across the sector***

This strategy is incumbent upon making the best utilisation out of existing resources. Accordingly it is ‘owned’ by the mental health and addiction sector. The key tasks have been separated into two levels of responsibility. It is envisaged that regular reports against achievement will be made and reported to Te Roopu Tupu Tahī.

**NGO Mental Health and Addiction Sector will strive towards completing the following key tasks:**

1. Contribute to the local Workforce Development Advisory Group.
2. Undertake workforce development planning based on national guidelines contained in the National Non Government Services (NGO) Mental Health and Addictions Workforce Development Plan 2006-2009.
3. Review service training needs against District priorities.
4. Commit to District training.
5. Make service training and development opportunities available to other NGO services.
6. Identify one workable retention practise per annum as part of the Services workforce development plan and implement it e.g. an effective orientation programme.

7. Focus on one area of OD per annum either team development, leadership development or change management.
8. Identify and progress one Action Research project per annum to investigate a significant workforce development question e.g. What do workers value about their work and workplace?

**NMDHB Planning and Funding will strive towards completing the following key tasks:**

1. Explore opportunities for NMDHB Learning and Development to support NGO Workforce Development position of 0.2 FTE.

Then:-

- Prioritise activity areas based on the strategy and develop project briefs
  - Monitor NGO workforce development progress against this Strategy
2. Maintain a Workforce Development Advisory Group in association with the Workforce Development position.
  3. Facilitate workforce development planning at service level using national guidelines provided in the National NGO Workforce Development plan
  4. Improve access to national workforce development centres and initiatives
  5. Improve access to regional resources
  6. Develop collaborative working relationships with DHB and the PHO.
  7. Support core training provided regularly across the District
  8. Provide co-ordination for all training across the District in collaboration with the workforce development position.
  9. Review barriers to training and develop a response plan
  10. Develop and implement an education and training package that improves access and responsiveness for/to Maori, relevant in a mental health and addictions setting.
  11. Develop and implement an education and training package that improves access and responsiveness for/to Service Users, relevant in a mental health and addictions setting.
  12. Support the provision of Recovery training
  13. Access Dual Diagnosis training, and outcomes training via MHSMART
  14. Identify and respond to service users training needs as resources become available.
  15. Identify and respond to Whanau /Family training needs as resources become available.
  16. As resources become available from mental health surplus, provide a training grants system. Work with Careers Force on the National Mental Health Diploma and Community Support Worker Certificate.

17. Continue to develop the Mental Health Diploma at NMIT
18. Focus on NGO capacity and capability when developing services. In particular
  - a. pre acuity support
  - b. expansion of child and youth services
  - c. consumer and family
  - d. employment and education services
  - e. older persons mental health team
  - f. early intervention services
19. Support the provision of Human Resources Training
20. Prioritise service development i.e. team and leadership development and change management projects to the consumer and family sector Services
21. Assess the need for governance and management training
22. Develop and implement an Evaluation Framework for projects
23. Review national and South Island projects to assess relevance and access opportunities
24. Identify and progress one Action Research project per annum to investigate a significant workforce development question e.g. How might the recruitment difficulties within the Marlborough area be addressed or conduct exit interview research to determine what informs departure decisions as a basis for retention practices
25. Investigate the possibility of utilising televideo equipment as a training and supervision tool for the NGO sector.

## 2 Background

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In 2004 a Briefing Paper on Non Government Organisations Mental Health and Addictions Workforce Development was prepared for Te Roopu Tupu Tahi (TRTT). The paper provided information collected by survey regarding staff qualification, training provision, training gaps and barriers to provision. The paper also identified eight strategies for workforce development. In April 2005 Nelson Marlborough District Health Board (NMDHB) Mental Health Funding Manager contracted external assistance to work with TRTT to progress these strategies. Workforce Advisory Groups (Advisory Groups) were established in Nelson and Blenheim with members of TRTT providing ongoing oversight and working together to inform the various projects. NMDHB provided a central administrative function including communication between Advisory Group members and the wider TRTT network.

The activities engaged in reflected the focus of NGO (Non Government Organisations) services on Training and Development. However the Advisory Groups considered the wider scope of workforce development contained in the Mental Health and Addictions Workforce Development Framework (Ministry of Health 2002). This means that the strategic areas of Infrastructure Development, Retention and Recruitment, Organisational Development, and Research and Development were used to group activities. These headings continue to be used in this planning document.

This document represents one output from the original Briefing Paper - the development of a strategic plan against which to measure progress. It captures achievements to date as well as identifying next steps which will contribute to further workforce development.

With the help of the Advisory Groups a Draft was developed and then made available for consultation to the TRTT network. Most feedback has been provided via hui held in Nelson and Blenheim with some additional written feedback. Feedback received from the consultation has been incorporated into the Strategy where applicable.

### 3 Assumptions

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In preparing a NGO Mental Health and Addictions Workforce Development Strategy within Te Roopu Tupu Tahi the following assumptions have been made:-

- i. This strategy intends to align to national and regional mental health and addiction strategies including Tuutahitia te Wero, Meeting the Challenges Mental Health Workforce Development Plan 2000 to 2005, DHBNZ Future Workforce, South Island Regional Mental Health Workforce Development initiatives, NGO National Mental Health and Addictions Workforce Development Plan and the proposed Nelson Marlborough District Workforce Development Strategy.
- ii. The NGO mental health workforce in Nelson Marlborough is diverse and varied. The Strategy relates to all those who work within a paid or voluntary capacity in any aspect of the service delivered. Those working in the addictions field are part of the NGO Workforce. Whanau, whether whakapapa or kaupapa, identified by tangata whaiora as contributing to their recovery are included in the mix.
- iii. There has been a commitment from TRTT and the NGO sector to work collaboratively, sharing resources and creating efficiencies that is reflected in the approach to workforce development across the region. Therefore not all key tasks outlined in the strategy require financial resourcing. Without this a workforce development plan for the NGO Workforce[s] across the Nelson – Marlborough region would not be viable.
- iv. The Strategy acknowledges the Mental Health Development Needs document prepared for Te Roopu Tupu Tahi, including the review of Mental Health Policy, Blueprint Stocktake and achievements against the previous plan. Given this the Strategy will focus on workforce development policy framework and planning, and reflect alignment between this and wider service planning.
- v. Mental health services, whether Non Government or District Health Board, (DHB), are all part of the same service system and as such the issues facing NGOs must be considered within the wider context. The interdependence of the DHB and NGO services means that this Strategy document is relevant for both as is the responsibility for implementation.
- vi. While not all service development is about workforce development any investment in workforce development will develop services. By its very nature workforce development develops services by improving the ability of those working within NGO services to be more responsive to consumers.
- vii. Contractual prices determining salaries and funds available at service level to invest in workforce development are a significant factor. While low wages are identified as a key contributor to difficulties of recruitment and retention, particularly during times of high employment, it is not within the scope of the strategy to address this or other contractual issue.
- viii. While contract prices include a component for workforce development at service level, this Strategy acknowledges the commitment made by the DHB Funder to resource regional initiatives to date and anticipates that commitment, dependant on available resources, to continue.
- ix. Only some of the key tasks listed in the document will require financial resourcing, and it is difficult to be precise about the financial implications of the Strategy. However, it is

recommended to Planning and Funding that should underspend in the mental health ringfence occur, then up to \$100,000.00 per annum be prioritised for utilisation of this strategy.

- x. Throughout the development of the strategy the NGO sector along with Planning and Funding have taken leadership in the NGO mental health and addictions workforce, and the Strategy aims to encourage and promote this. Several of the key tasks identified are in the process of, or have been implemented. It is very important that this Strategy is owned by both the NGO sector and the DHB.
- xi. Workforce development in the NGO sector is considered as business as usual and an overall requirement of existing service agreements.

## 4 Achievements to Date

In 2005, a Project Manager was contracted to assist NGOs progress the initiatives identified within the TRTT workforce development briefing paper. Additionally NGOs built on existing practise, for example, making service training available to other services, and achieved some success in key areas. While the provision of work based placements for NGO staff and the promotion of working in the NGO sector did not proceed, other achievements are tabled below mapped against local planning documents and using the framework that covers the different areas of workforce development.

<b>Te Roopu Tupu Tahi Briefing Paper 2004</b>	
Infrastructure Development	<ol style="list-style-type: none"> <li>1. Project Manager contracted to facilitate progress</li> <li>2. Two Workforce Development Advisory groups were established in Nelson and Blenheim</li> <li>3. Appointment of Gateway Manager to the national ITO advisory board</li> </ol>
Training and Development	<ol style="list-style-type: none"> <li>1. Training calendar established and continues to be coordinated by Care Marlborough.</li> <li>2. Core competency training: Non Violent Crisis Intervention provided by Care Solutions and First Aid made available across the region</li> <li>3. Gateway and Richmond Fellowship delivered a comprehensive training programme to their staff and others</li> <li>4. Hearing Voices Peer Support, Self Harm [Compass]</li> <li>5. Pacific Island Training</li> </ol>
Recruitment and Retention	<ol style="list-style-type: none"> <li>1. Nelson Marlborough Institute of Technology committed to the provision of the Mental Health Support Work Diploma based on the national framework</li> </ol>
Organisational Development	<ol style="list-style-type: none"> <li>1. Quality Improvement Workshops [DHB]</li> <li>2. Compliance with National Mental Health Service Standards</li> </ol>
Research and Development	No research and development projects.

## Mental Health Needs for Nelson, Tasman and Marlborough Communities 2005-2010

Infrastructure Development	Not applicable at this point pending development of NGO Workforce Development Strategy.
Training and Development	<ol style="list-style-type: none"> <li>1. Dialectical Behavioural Therapy [Te Whare Mahana]</li> <li>2. Pacific Peoples [Gateway Trust]</li> <li>3. Advanced Directives [DHB]</li> <li>4. Quality Improvement Workshops</li> <li>5. Consumer Peer Support Training (COMPASS)</li> <li>6. Individual provider workforce development requests considered and if applicable resourced.</li> </ol>
Recruitment and Retention	Not applicable at this point pending development of NGO Workforce Development Strategy.
Organisational Development	Supporting SF branches to develop capacity for managing service agreements (ex National office contracts)
Research and Development	NGO Sustainability Project Completed.

The provision of First Aid and Non Violence Intervention Training as Core Training programmes free to NGO services have been highly valued. The development of the Training Calendar as a mechanism to inform services and workers about training availability has also been appreciated.

Training and Development and in particular consistency regarding the availability and funding of Core Training continues to be a priority for many services.

Because NGO services are generally small in scale, they have expressed a requirement for training programmes to be available on a regular basis in order that they may release all staff over time to attend. Extending the Core Training programmes free to NGO services to include Tiriti o Waitangi and Recovery Training is supported by the sector.

The Dialectical Behavioural Therapy Training provided by Te Whare Mahana is an example of success in accessing a national project and applying the resources locally.

## 5 Next Steps

The opportunity exists to build on workforce development experience to date. This will involve maintaining some existing projects or practises and creating new initiatives. There is general agreement that Training and Development and in particular Core Training continues to be the priority for the NGO Workforces.

Without the Infrastructure in place experience shows progress will be limited and erratic. Next Steps can occur at Service level or District level and be clustered using the workforce development framework as identified below.

The following two tables outline NGO Mental Health service responsibilities and those of the District Health Board in relation to the strategy.

<b>NGO Mental Health Services</b>		
Infrastructure Development	<b>Key Task One</b> Contribute to the local Workforce Development Advisory Group	<b>Measurement</b> Nelson and Marlborough Workforce Development Advisory Groups meet six monthly and provide updates at TRTT forums.
	<b>Key Task Two</b> Undertake workforce development planning based on national guidelines contained in the National Non Government Services (NGO) Mental Health and Addictions Workforce Development Plan 2006-2009	<b>Measurement</b> Workshop of national guidelines held in Nelson, Marlborough and Tasman, led by Workforce Development Advisory Groups.
Training and Development	<b>Key Task Three</b> Review service training needs against District priorities	<b>Measurement</b> NGO Workforce Development Strategy reviewed on a six monthly basis.
	<b>Key Task Four</b> Commit to District training	<b>Measurement</b> At least 60% of the NGO sector take advantage of training opportunities as listed on the Training and Workforce Development calendar.
	<b>Key Task Five</b> Make service training and development opportunities available to other NGO services.	<b>Measurement</b> At least 60% of the NGO sector offer training through the Training and Workforce Development calendar on an annual basis.
Recruitment and Retention	<b>Key Task Six</b> Identify one workable retention practise per annum as part of the Services workforce development plan and implement it e.g. an effective orientation programme	<b>Measurement</b> At least four NGO's share their workforce retention practices through Te Roopu Tupu Tahi on an annual basis.

Organisational Development	<p><b>Key Task Seven</b></p> <p>Focus on one area of OD per annum either team development, leadership development or change management</p>	<p><b>Measurement</b></p> <p>NGO Workforce Development Advisory Group determine one area of organisational development per annum, provide an action plan for implementation.</p>
Research and Development	<p><b>Key Task Eight</b></p> <p>Identify and progress one Action Research project per annum to investigate a significant workforce development question e.g. What do workers value about their work and workplace?</p>	<p><b>Measurement</b></p> <p>NGO Workforce Development Advisory Groups develop and implement survey, information analysed and findings reported back to Te Roopu Tupu Tahi.</p>

## District Health Board

Infrastructure Development	<p><b>Key Task One</b> Explore opportunities for NMDHB Learning and Development to support NGO Workforce Development position of 0.2 FTE.s</p> <p>Then:-</p> <ul style="list-style-type: none"> <li>• Prioritise activity areas based on the strategy and develop project briefs</li> <li>• Monitor NGO workforce development progress against this Strategy</li> </ul>	<p><b>Measurement</b> Investigation completed by 31<sup>st</sup> March 2007 for workforce development 0.2 FTE</p> <p>Regular updates/reports are provided to Te Roopu Tupu Tahi forum.</p>
	<p><b>Key Task Two</b> Maintain a Workforce Development Advisory Group in association with the Workforce Development position.</p>	<p><b>Measurement</b> Workforce Development FTE supports the Marlborough and Nelson Workforce Development Advisory Groups in an administration capacity.</p>
	<p><b>Key Task Three</b> Facilitate workforce development planning at service level using national guidelines provided in the National NGO Workforce Development plan</p>	<p><b>Measurement</b> Workshop of national guidelines held in Nelson, Marlborough and Tasman, led by Workforce Development Advisory Groups.</p>
	<p><b>Key Task Four</b> Improve access to national workforce development centres and initiatives</p>	<p><b>Measurement</b> Information on National Workforce Development initiatives are shared through TRTT email database within 10 working days of receipt.</p>
	<p><b>Key Task Five</b> Improve access to regional resources</p>	<p><b>Measurement</b> Information on Regional Workforce Development initiatives are shared through TRTT email database within 10 working days of receipt.</p>
	<p><b>Key Task Six</b> Develop collaborative working relationships with DHB and the PHO.</p>	<p><b>Measurement</b> PHO Primary Healthcare Plan is developed and operational, that outlines workforce development needs for the sector.</p>
Training and Development	<p><b>Key Task Seven</b> Support the provision of Core training provided regularly across the District</p>	<p><b>Measurement</b> As funding becomes available, First Aid and NVCI training is provided free to the NGO mental health sector.</p>
	<p><b>Key Task Eight</b> Provide coordination for all training across the District in association with the Workforce Development position.</p>	<p><b>Measurement</b> NGO Training Calendar outlines up to date training available to the sector.</p>
	<p><b>Key Task Nine</b> Review barriers to training and develop a response plan</p>	<p><b>Measurement</b> Information gleaned from the Nelson and Marlborough Workforce Development Advisory Groups outlining barriers to training are reviewed and considered in alignment with this strategy.</p>

	<p><b>Key Task Ten</b> Develop and implement an education and training package that improves access and responsiveness for/to Maori, relevant in a mental health and addictions setting.</p>	<p><b>Measurement</b> As funding becomes available, at least two training packages are provided to the sector.</p>
	<p><b>Key Task Eleven</b> Develop and implement an education and training package that improves access and responsiveness for/to Service Users, relevant in a mental health and addictions setting.</p>	<p><b>Measurement</b> As funding becomes available, at least two training packages are provided to the sector.</p>
	<p><b>Key Task Twelve</b> Support the provision of Recovery training</p>	<p><b>Measurement</b> As funding becomes available, at least two Recovery training workshops are provided to the sector.</p>
	<p><b>Key Task Thirteen</b> Access Dual Diagnosis training, and outcomes training via MHSMART</p>	<p><b>Measurement</b> At least one dual diagnosis training is provided to the sector.</p> <p>Support the National MHSMART roll out of training to the NGO sector when this is made available.</p>
	<p><b>Key Task Fourteen</b> Identify and respond to service users training needs as resources become available.</p>	<p><b>Measurement</b> As funding becomes available, at least two service user led agency workforce development</p>
	<p><b>Key Task Fifteen</b> Identify and respond to Whanau /Family training needs as resources become available.</p>	<p><b>Measurement</b> Service agreements with local SF branches are reviewed on a yearly basis to respond to changes in whanau/family need.</p>
	<p><b>Key Task Sixteen</b> Provide a training grants system. Work with Careers Force on the National Mental Health Diploma and Community Support Worker Certificate.</p>	<p><b>Measurement</b> As funding becomes available, workforce development applications and forwarded to the NGO sector.</p>
Recruitment and Retention	<p><b>Key Task Seventeen</b> Continue to develop the Mental Health Diploma at NMIT</p>	<p><b>Measurement</b> NMDHB participation on the Mental Health Diploma Advisory Group.</p> <p>Upon approval from NMIT, and as resources become available, grants are provided to the first intake.</p>
	<p><b>Key Task Eighteen</b> Focus on NGO capacity and capability when developing services. In particular</p> <ul style="list-style-type: none"> <li>• pre acuity support</li> <li>• expansion of child and youth services</li> <li>• consumer and family</li> <li>• employment and education services</li> <li>• older persons mental health team</li> <li>• early intervention services</li> </ul>	<p><b>Measurement</b> For all new service agreements aligned to priorities outlined in the Mental Health Service Needs for the Nelson, Tasman and Marlborough regions, NGO's will demonstrate and provide workforce development plans.</p>

	<p><b>Key Task Nineteen</b> Support the provision of Human Resources Training</p>	<p><b>Measurement</b> As resources become available, at least two Human Resource training opportunities will be provided.</p>
Organisational Development	<p><b>Key Task Twenty</b> Prioritise service development i.e. team and leadership development and change management projects to the consumer and family sector Services</p>	<p><b>Measurement</b> Work with service user led agencies to determine their need.</p>
	<p><b>Key Task Twenty One</b> Assess the need for governance and management training</p>	<p><b>Measurement</b> Assessment completed by 30<sup>th</sup> June 2007.</p>
Research and Development	<p><b>Key Task Twenty Two</b> Develop and implement an Evaluation Framework for projects</p>	<p><b>Measurement</b> Evaluation framework completed by 31<sup>st</sup> December 2007</p>
	<p><b>Key Task Twenty Three</b> Review national and South Island projects to assess relevance and access opportunities</p>	<p><b>Measurement</b> Information on National and Regional Workforce Development initiatives are shared through TRTT email database within 10 working days of receipt.</p>
	<p><b>Key Task Twenty Four</b> Identify and progress one Action Research project per annum to investigate a significant workforce development question e.g. How might the recruitment difficulties within the Marlborough area be addressed or conduct exit interview research to determine what informs departure decisions as a basis for retention practices</p>	<p><b>Measurement</b> As resources become available at least one Action Research project completed.</p>
	<p><b>Key Task Twenty Five</b> Investigate the possibility of utilising televideo equipment as a training and supervision tool for the NGO sector.</p>	<p><b>Measurement</b> Opportunities assessed by the December 2008.</p>

## 6 Documents Informing Next Steps

The strategic next steps identified above are based on a review of the following documents, from which were identified NGO workforce development implications and opportunities for the NGOs of this region.

These documents are:-

- Mental Health Development Needs for the Nelson, Tasman and Marlborough Communities 2005-2010
- Te Roopu Tupu Tahī Briefing Paper – NGO Workforce(s) Development 2004
- The South Island Regional Network Workforce Development Plan
- National Non Government Services (NGO) Mental Health and Addictions Workforce Development Plan 2006-2009
- Awhitia te Wero, Embracing the Challenges National Mental Health and Addiction Workforce Development Plan 2006-2009
- Mental Health ( Alcohol and Other Drugs) Workforce Development Framework 2002

<b>Title</b>	<b>Highlights</b>	<b>Usage</b>	<b>Local Opportunities for NGO Workforces Development</b>
Mental Health Development Needs for the Nelson, Tasman and Marlborough Communities 2005-2010	Review of progress against Blueprint and TRTT Action Plan Description of NMDHB Mental Health Strategies for 2005-2010	To guide future service and workforce development locally	To respond to service requirements and needs in this strategy To anticipate future service direction
Te Roopu Tupu Tahī Briefing Paper – NGO Workforce(s) Development 2004	Documented for the first time the makeup of the NGO workforce Provided action points based on eight proposed strategies	This document provided the impetus for a range of NGO workforce development activity in 2005	To maintain impetus via the Strategy including in it learning from the 2005 experience
The South Island Regional Network Workforce Development Plan	Although regional the plan documents DHB led workforce development projects which gained funding via the Workforce Development Programme	The SIRD plan did not include a NMDHB identified project and was initially considered less relevant to the district	To ensure that the NGO sector benefit from the implementation of projects by insisting on regional coverage, e.g. recovery training, where that fits with local priorities

Title	Highlights	Usage	Local Opportunities for NGO Workforces Development
National Non Government Services (NGO) Mental Health and Addictions Workforce Development Plan 2006-2009	Provides national direction for NGO workforce development, a review of literature, a planning tool and information to the sector	This is the first national NGO workforce development plan reflecting the importance to the wider system of NGOs	To use the national plan as a resource to assist with service level planning
Awhitia te Wero, Embracing the Challenges National Mental Health and Addiction Workforce Development Plan 2006-2009	Developed by the HFA to direct activity into the future and was used as the basis for the establishment of Te Rau Matatini and the Werry Centre and the Pacific Mental Health Awards	Widely used to inform national workforce development projects focussing on key areas	The NGO sector locally may consider accessing established national initiatives relevant to their development
Mental Health (Alcohol and Other Drugs) Workforce Development Framework 2002	<i>See Figure 1: Workforce Development</i>	This framework has been used in all national and regional mental health workforce development plans	Provides opportunity for alignment of local strategy to an existing and accepted framework. It has been used to group Achievements and Next Steps in this document



**Figure 1: Workforce Development**

## **7 Conclusion**

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Considerable work is being done within services and across the district to develop the NGO Workforce(s). This document captures and recognises some of projects and programmes undertaken or provided. For workforce development to be sustained there must be adequate infrastructure within services and the district.

## **8 Acknowledgements**

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Te Roopu Tupu Tahi acknowledges the Marlborough and Nelson NGO Workforce Development Groups for their valuable contribution and feedback that has informed the development of this strategy.

A very special acknowledgement of Ms Jacqui Gough who facilitated and led the development of this strategy.