



NEW ZEALAND COUNCIL OF TRADE UNIONS
Te Kauae Kaimahi

by

**New Zealand Council of Trade Unions
Te Kauae Kaimahi**

Submission on

**2012 Review of the Health
Practitioners Competence
Assurance Act 2003**

26 October 2012

Summary of NZCTU Recommendations:

The Health Practitioners Competence Assurance Act 1993 (HPCA Act) is fit for purpose and provides much of the necessary solutions to address potential problems which may affect the effectiveness of the HPCA Act. We do not believe major changes are required to the scope, functions or operation of the HPCA Act.

The intention of the HPCA Act review or what it is seeking to achieve is unclear. There is insufficient information and analysis to support the issues stated in the review document. We encourage further consideration of evidence, analysis of problems and available options, and likely impacts.

Potential changes to the HPCA Act must ensure safety, competency and care to the public are not adversely affected in pursuit of efficiencies and cost savings.

We encourage consideration of the review outcomes from the Standards and Conformance Infrastructure review conducted by the Ministry of Business, Innovation, and Employment (MBIE) which may have an impact on the review of the HPCA Act and the Independent Taskforce on Workplace Health and Safety's review of workplace health and safety.

Given the complexities, autonomous role and accountability measures of Regulatory Authorities we urge due consideration of issues before any decisions are finalised regarding the amalgamation of a shared secretariat.

Workforce data collection and planning is the role of groups such as Health Workforce New Zealand. They have been specifically tasked with the role of workforce planning of which workforce data collection is and should be a prerequisite.

We consider the HPCA Act is already operating in a flexible manner but have concerns in respect of the interface between the regulated and non-regulated workforce and potential issues that may arise between professional boundaries and scopes of practice for practitioner groups.

We support greater transparency of information and processes however we encourage due consideration of privacy issues in regards to transparency of information.

Consumer representation is not an issue for the HPCA Act as there are other available avenues in which good consumer representation can either be enhanced, achieved or democratically recognised.

We consider the HPCA Act is sufficiently clear on the level of risk assessment.

The CTU supports the inclusion of additional professional groups that may wish to come under the HPCA Act but we believe there should be strong mechanisms including robust criteria for inclusion.

1. Introduction

- 1.1 The New Zealand Council of Trade Unions - Te Kauae Kaimahi (CTU) is the internationally recognised trade union body in New Zealand. The CTU represents 39 affiliated unions with a membership of over 350,000 workers.
- 1.2 The CTU acknowledges Te Tiriti o Waitangi as the founding document of Aotearoa New Zealand and formally acknowledges this through Te Rūnanga o Ngā Kaimahi Māori o Aotearoa (Te Rūnanga) the Māori arm of Te Kauae Kaimahi (CTU) which represents approximately 60,000 Māori workers.
- 1.3 The CTU welcomes the opportunity to make a submission on the Review of the Health Practitioners Competence Assurance Act (HPCA Act) 2003. The CTU supports the submissions of CTU affiliated health sector unions.
- 1.4 The CTU has an Active role in health sector forums including the Health Sector Relationship Agreement (HSRA) and the National Bi-Partite Action Group (NBAG).
- 1.5 It has been indicated that the review of the HPCA Act is just that – *only a review*, therefore it is difficult to understand why there is much urgency around consultation. The short public consultation process makes it difficult to provide well informed and considered submissions on what can be very complex and far reaching matters. These concerns are reflective of affiliated health sector unions, networks and members of the public.
- 1.6 The CTU notes the aim of the HPCA Act is to protect the health and safety of members of the public from harm and provides a mechanism for ensuring health practitioners are competent and fit to practice in their professions. The CTU supports these aims and submits that if there are any changes to the HPCA Act, these must ensure safety, competency and care to the public are not adversely affected in pursuit of efficiencies and cost savings.
- 1.7 We believe there may also be potential overlaps between the HPCA Act review and that of the recent Standards and Conformance Infrastructure Review (including health care standards) conducted by MBIE. The consultation process is now complete for the MBIE review but of which outcomes may have a potential impact on the HPCA Act. We understand that there was little input from the health sector into this review.
- 1.8 We also note the Independent Taskforce on Workplace Health and Safety's review of workplace health and safety and the potential impact outcomes may have on the HPCA Act review.

1.9 The consultation document asks a number of questions in respect to the HPCA Act. As some of these issues fall outside the ambit the CTU, this submission focuses on general comments and concerns from the perspective of the CTU.

2. Issues

Intent of the HPCA Act review

2.1 We are not clear on what the intention of the review is or what it is seeking to achieve. In our view the HPCA Act is not in need of major change and if there are problems with the operation of the HPCA Act we believe the status quo provides much of the necessary solutions to address any potential problems.

2.2 In our view the discussion document lacks enough information, cost-benefit analysis or rationale of the problems of which the review of the HPCA Act is attempting to address. We are concerned that if there are changes to the HPCA Act there may be unintended consequences due to the lack of evidence and benchmark information. There needs to be further consideration of evidence, analysis of problems and available options, and likely impacts.

Amalgamation - Secretariat Functions of 16 Regulatory Authorities

2.3 Although there may be efficiencies to be gained from amalgamating secretariat functions of the 16 Regulatory Authorities (underway by Health Workforce New Zealand), we have serious concerns around the implications of a shared secretariat service given the complex roles, potential loss of accountability mechanisms and autonomous nature of Regulatory Authorities (particularly larger Authorities).

2.4 It is not clear what the true objective or intent is of the amalgamation. We strongly believe the Regulatory Authorities (particularly larger Authorities) should remain free from political influence and retain a role in maintaining quality regulation. Although efficiencies may be gained from amalgamating secretariat functions, the CTU strongly believes this should not come at the cost of effectiveness, autonomy or roles of Regulatory Authorities.

Workforce Planning and Information

2.5 The discussion document gives the impression that HPCA Act may be used to address inefficiencies and workforce issues such as a lack of robust and reliable data. Our view is that the HPCA Act should not be seen as a mechanism for addressing what is essentially a longstanding problem of poor workforce information in the health sector. We agree that there is a strong gap in reliable and robust data collection of both the regulated and non-regulated workforce and subsequent workforce planning. Nevertheless, this is not the purpose of the HPCA Act but

rather of other groups such as Health Workforce New Zealand who have been specifically tasked with the role of workforce planning of which workforce data collection is and should be a pre-requisite.

Scopes of Practice

- 2.6 The discussion document refers to reviewing scopes of practice to support workforce flexibility. We consider the HPCA Act is already operating in a flexible manner. We have concerns in respect of the interface between regulated and non-regulated workforce and potential issues that may arise between professional boundaries and scopes of practice for practitioner groups. These concerns include blurred lines of accountability, responsibility and the risk of promoting a generic health workforce which could have serious implications for the health sector in future.
- 2.7 A lack of clarity around the review of scopes of practice in the discussion document may suggest that there are other underlying motives which are not being clearly communicated to stakeholders in the health sector. Our view is that a key aim of the HPCA Act should be to ensure there are adequate systems and processes in place to address potential workforce “boundary” issues and which maintain independence and effectiveness of roles.

Risk Assessment

- 2.8 We consider the HPCA Act is sufficiently clear on the level of risk assessment. We urge caution in respect of any changes that may seek to restrict, broaden or take a “one size fits all” approach to risk assessment given the varied levels of risk for each practitioner group.

Inclusion of other professional groups to HPCA Act

- 2.9 The CTU supports the inclusion of additional professional groups that may wish to come under the HPCA Act but we believe there should be robust processes including criteria for any Group wanting to join. This process must not undermine the intention or credibility of the HPCA Act and seek to ensure public safety, trust and confidence in the system.

Transparency and accountability of processes

- 2.10 The CTU supports greater transparency of information and processes but recognise this may be more difficult to administer and achieve in some instances e.g. non-regulated workforce.
- 2.11 Whilst we recognise the importance of having sufficient protections around safety, we note there are privacy issues to consider in respect of any change that would look to promote greater transparency and information sharing. We urge caution where the rights of either the consumer or practitioner may become compromised.

2.12 The CTU also recognises that whilst better consumer representation mechanisms are beneficial in respect of accountability, we do not believe this is an issue for the HPCA Act as there are other available avenues in which good consumer representation can be either enhanced, achieved or democratically recognised.

3. Conclusion

3.1 The intention or the outcome of what the HPCA Act review is seeking to achieve is not entirely clear. Whilst we acknowledge the work that has been put into developing the discussion document we do not believe there is enough evidence, information of problems or a robust cost-benefit analysis which may warrant major changes to the HPCA Act.

3.2 The CTU considers the HPCA Act is currently operating well but recognise that there could be some changes made to enhance the operation and effectiveness of the HPCA Act. However, we urge caution in moving too fast in finalising any changes as there is the potential for unintended consequences to occur which may have serious implications for the health sector and public.

3.3 The CTU welcomes further opportunities to provide input into the review of the HPCA Act. As part of future consultation processes we suggest that common areas of interest or key themes be identified as part of the submissions analysis process and which can act as a basis for future consultation forums.