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Health Professional Advisory Group
Specialist Mental Health Services
Canterbury District Health Board

20 December 2007

Ryan McLean
Analyst
Health and Disabilities Sector Directorate
Ministry of Health
WELLINGTON

Dear Mr McLean

Review of the Health Practitioners Competency Assurance Act 2003

Thank you for the opportunity to participate in consultation around the review of the HPCA Act 2003.

We have chosen to respond to some aspects of the consultation document.

The Act is achieving its purpose for the allied health professions in our service apart from social workers. Health Social Workers are registered under Social Workers Registration Act 2003.

The links between these Acts needs to be explicit. Documents that refer to Health Practitioners registered under the HPCA Act 2003 should also refer to Health Practitioners who are registered under the Social Workers Registration Act 2003

Protection of title and profession specific responsibilities should be continued. This is a primary way in which members of the public are able to identify practitioners who meet a specific profession's minimum standard for safe practice.

We agree that mandatory compliance and the expectations to demonstrate ongoing competency to practice has been beneficial, but it is important that this supported and enabled by employers. We note that some unions have negotiated time for professionals to prepare for recertification and also the costs of recertification. We feel that this should be built into the contracts for all health professionals.

We identified that there are major problems with Restricted Activity – *Performing a Psychosocial Intervention with the Expectation of Treating a Serious Mental Illness without the Approval of a Registered Health Practitioner*. This restricted activity inadvertently makes it difficult for Social Workers to carry out their core tasks. Psychosocial intervention with people with serious mental illness is a fundamental social work activity for Social Workers who are working within Mental Health Services. We believe that including this activity as a restricted activity creates confusion and ambiguity about the role of social workers and may limit the ability of this occupational group to function effectively in a mental health context.

In terms of scope of practice, we believe that the registering authority takes its direction from the professional associations and that this should continue. It would be useful to be clear about competency programmes and recertification. We believe that scopes of practice should continue to be developed by professional associations. The competencies upon registration reflect the scope of practice for beginning practitioners and these are established by the tertiary learning institutions alongside the relevant regulatory bodies. There should be competency standards on initial registration, and ongoing competency and practice requirements including supervision. We believe that recertification programmes should essentially be an audit of the professional's work.

We believe it would be useful to clarify the expectations of those re-entering the professions and those who are coming back from overseas.

The fitness to practice issues seem to be working well.

The parameters of risk are wide and varied. Performance management should be carefully considered and carried out first so that there is little room for doubt when situations are referred on to the registration authority. We also support the publication of decisions of the registering authorities where a practitioner may pose a risk of harm to the public.

Yours sincerely

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