

## NEW ZEALAND ASSOCIATION OF ORTHODONTISTS (Inc.)

www.orthodontists.org.nz

### **Submission on the Review of the Health Practitioners Competence Assurance Act 2003**

#### **Presented by the New Zealand Association of Orthodontists**

If an Act is to achieve its stated aims it must be worded clearly so that inconsistencies associated with interpretation can be avoided.

**The New Zealand Association of Orthodontists believes that the wording of the Act can be improved thus removing interpretation difficulties currently being experienced.**

The New Zealand Association of Orthodontists (NZAO) is in agreement with the principal purpose of the act, to "... protect the health and safety of members of the public..."

We agree that a Scope of Practice can define the activities of a health practitioner and a registered health practitioner should be competent and fit to practice within that Scope of Practice.

We also agree that there are certain activities that present the potential of "serious or permanent harm" to members of the public and that these tasks should only be undertaken by registered health practitioners.

We are concerned however, that there are some health groups who have had scopes of practices' defined for them, thus requiring them to become registered health practitioners, but whose activities have not been shown to present a risk to the public if not registered.

The NZAO therefore believes that the Act has led to the regulating board defining scopes of practices too broadly thus encompassing workers whose activities do not present a risk of public harm.

**The New Zealand Association of Orthodontists therefore believe that in defining a Scope of Practice (section 11) the registering boards must demonstrate that an unregistered person practicing that scope of practice presents a danger to members of the public.**

If it can be shown a health worker does present a risk to the public if they are not registered, the qualifications prescribed for their designated scope of practice must not limit that health worker from practicing in that scope of practice. Such training should

be limited to the areas of activity demonstrated to present a risk to member of the public.

**The New Zealand Association of Orthodontists believe the requirements of Section 13 of the HPCAA are not being abided by.**

There are some health workers (eg Orthodontic Auxiliaries) who have traditionally worked under the supervision and instruction of a registered health practitioner, and do not present a risk to the public. The nature of this supervision and instruction may be defined by the codes of practice the health practitioner is required to practice to satisfy the requirements of their registration.

Unfortunately the HPCAA does not contain any provision for unregistered persons to work under the supervision and instruction of a registered health practitioner.

**The New Zealand Association of Orthodontists would support a provision being included within the HPCAA allowing health workers who themselves present no risk to the public to work under the supervision and instruction of a registered health practitioner who has a code of practice defining the activities and supervision requirements of these workers.**

Since the enactment of the HPCAA, the NZAO and its members have expressed concerns, such as:

- About Registration costs for themselves and staff.
- The appropriateness of certification and recertification CPD programmes and the mistaken assumption there is a relationship between these programmes and a practitioners competency to practice within their scope of practice.
- The failure to recognise varying levels of clinical risk when invoking mandatory Codes of Practice.

There is however no assurance that NZAO views are being appropriately represented to the practitioners registering Board. Without appropriate representation practitioners cannot have a direct voice on their registering Boards thus influencing factors directly related the delivery of their professional service.

It is however recognised that specific skills and representation of all the sector groups is required on a registering board. Therefore:

**The New Zealand Association of Orthodontists requests that the HPCAA be amended to require 50% of Board members to be elected from the health practitioners it represents and the remaining 50% be appointed by the Minister of Health.**

NZAO appreciates the opportunity to make this representation and looks forward to working with a more representative series of Dental Boards.

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