



Otago District Health Board

Pōari Hauora-ā-rohe ki Otago
DEPARTMENT OF HEALTH

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24 January 2007

Ryan McLean
Sector Policy Directorate
Ministry of Health
PO Box 5013
WELLINGTON

Dear Ryan

RE: HEALTH PRACTITIONERS COMPETENCE ASSURANCE ACT REVIEW

Thank you for the opportunity to feedback on the HPCA. We appreciate the extension of time in which to feedback.

This submission is from the Otago District Health Board Nursing and Allied Health Representatives.

The questions posed in your document are numerous. Our group felt it more appropriate to provide general comment on the experience of utilising the Act as it stands. In addition I have completed the survey electronically to compliment our response.

The Act has attempted to bring together an array of health disciplines. In doing so it has in our opinion increased the bureaucratic processes required to support the increased demands of measuring and processing applications for practice and various other outcomes. Additionally the infrastructures required to support the disciplinary processes of the Act have created significant cost increases across all organisations either governing or employing health professionals (the consequence of this being the decision to not employ Registered Health Professionals where possible in some instances).

Our general thoughts are that the Act is utilised reasonably well. However the key gaps relate to those disciplines that work within health who are not covered by the Act. An improvement would be to work with the services to determine whom those providers are and what systems are needed to ensure some form of accountability. Examples are: Social Workers, Anaesthetic Technicians, Vision and Hearing Screeners etc.

On a positive note the Act has encouraged staff to be more familiar and aware of their professional obligations. It has allowed employers to use more leverage in

employer/employee expectation setting. The competence assessment processes appear more frequent and more structured since the inception of the Act.

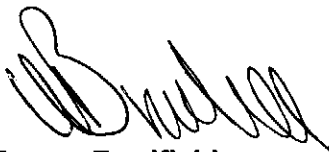
The Act has also enabled employers to report concerns to statutory bodies in a more structured way. An area where this could be improved is the Student/Education institution notification process. Health organisations that place students in learning situations carry the clinical risk and it would be useful if the Act incorporated the need for mutual or joint notification where two institutions are involved (a practical example being where a student nurse is considered unsafe to continue in the clinical setting - the onus is on the education institution to notify, not the hospital. In the interest of maintaining EFT numbers in tertiary institutes there may be a conflict of interest when deciding to notify Council and therefore potentially lose a placement and subsequent funds).

On a more general note it is a difficult document to read and interpret. Perhaps it could be supported by some practical examples of how to make operational the Act for the future.

Thank you for the opportunity to submit our thoughts on the HPCA.

Please do contact me should you require clarity.

Yours sincerely

A handwritten signature in black ink, appearing to read 'Teresa Bradfield', written in a cursive style.

Teresa Bradfield
Chief Nursing Officer

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