



Medspeak

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The Change is a CONSTANT

As most of you should be aware, the NZMA initiated and hosted a seminar on 'The Role of the Doctor in the 21st Century' in early November. NZMA Chair Dr Peter Foley writes that within the context of our changing healthcare system, the NZMA felt it was both timely and essential for the profession as a whole to achieve a consensus position on the future role of the doctor in New Zealand.



NEW ZEALAND
MEDICAL ASSOCIATION

PO Box 156
Wellington

Phone 04 472 4741
Fax 04 471 0838

www.nzma.org.nz
nzma@nzma.org.nz

The gathering of medical leaders from throughout New Zealand sought to answer these fundamental questions:

'What are the key skills, competencies and personal attributes required of a doctor in our future health system? And very importantly, how do doctors add value to New Zealand's health system?'

Before I delve into the details of the seminar and its outcome I would like to provide a background to explain the reasons for organizing such a momentous event. The NZMA recognized the urgent need to more clearly define what it is that doctors do, uniquely or as part of a broader team. In doing so, we aimed to help shape the selection and training of future doctors and define their role in the health team. We held the view that forming a consensus position should enable the profession to clearly state what the doctor's role in the contemporary healthcare team is, and should aspire to be. Without clarity we foresaw a potential erosion of the doctor's contribution and the value they bring to patient care, leading to medical training that was compromised and did not match the reality of doctors' roles and the needs of our health sector. Most importantly the quality of patient care would be undermined. It was recognized that the medical profession must have confidence in its

role moving forward, especially if we are to encourage greater numbers to undertake the intense study required of medicine and bridge medical workforce shortages.

It is now widely acknowledged that the single greatest threat to maintaining health services and high quality patient care is the shortfall in the health workforce – especially at a time when demand for health services is growing at a rapid rate, due in part to an ageing population and rising patient expectations. Solutions are being sought to achieve greater flexibility to ensure demand for health services is met. This flexibility includes the creation of new roles such as practice assistants – a trial is now taking place in Counties Manukau – and an increase in the number of unregulated health workers. There is also a greater emphasis on a multidisciplinary, team-based approach to healthcare, providing care in the community – which is both integrated and more focussed on preventative care – and assisting and facilitating patients to take more responsibility for their own healthcare.

..... CONTINUED OVERLEAF ►

Dr Murray Hodder, retired general practitioner and former NZMA Auckland Division Chair, NZMA Chair Dr Peter Foley and Mrs Gail Hodder at the NZMA Auckland art and wine event in November. Held in conjunction with Whitehaven Wines, the event took place at the Sculpture OnShore exhibition. The exhibition showcased contemporary New Zealand art, offering a diverse collection of sculptural works from well-known and emerging New Zealand sculptors. More than 90 NZMA members and their partners attended.



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Doctors
leading in health

The future healthcare landscape will move from a focus on acute conditions to long-term conditions, it will be less hospital centred with a move towards greater community-based care. Doctors will be expected to work more in partnership with the patient. Self-care will need to be both encouraged and facilitated and technology will continue to advance so that it is more accessible and shared, bringing with it the inevitability of appropriate remote care. A key goal of forming a consensus statement was to ensure that the doctor, through training and service provision, is responsive to the needs of patients.

Earlier this year the NZMA Board, after lengthy discussions on the role of the doctor in our changing health context, formed a sub-committee to organize a seminar to bring medical leaders together to achieve a consensus statement. We were inspired by a similar event that had taken place earlier in the UK, but had not been repeated in many other arenas. Amongst the criteria for holding this seminar was the necessity of involving all the key influencers of the medical profession in New Zealand. This was to ensure that there was consensus, and that the sector could then work together cohesively to promote the doctor's role – to government and its agencies, to other doctors and to the patient. As part of our seminar planning, the NZMA commissioned a public survey to gain a public perspective on expectations of the doctor's role. The results were very similar to those of the UK, but provided New Zealand contextual endorsement.

More than 80 medical leaders from throughout the profession attended the actual seminar. Organizations that were represented included Health Workforce NZ, the Medical Council of New Zealand, as well as medical schools, medical colleges, DHBs, PHOs and health organizations such as ASMS, the RDA, GPNZ, and the NZNO. The seminar was opened by Minister of Health, the Hon Tony Ryall, who challenged attendees to articulate the value they bring to the health sector.

On day one the majority of speakers delivered their presentations, which were critical in setting the scene. Participants had the privilege of hearing international guest speaker Professor Sir John Tooke address the seminar with two insightful and well-considered presentations. Sir John, a distinguished medical academic and currently head of the Medical School at University College London, was the author of a seminal and watershed report on UK medical training. The 'Tooke Report' made a multitude of recommendations and amongst these was that the profession define the role of the doctor. Subsequently in 2008 the UK held a Role of the Doctor Summit which was convened by Sir John. It was therefore quite a coup to secure Sir John's commitment to attend the seminar and elaborate on his research and findings in relation to the doctor's role. While he provided an international perspective, the relevance to the New Zealand context was high.

Other speakers included former Health and Disability Commissioner Professor Ron Paterson bringing the patient's perspective, MCNZ Chair Dr John Adams, HWNZ Chair Professor Des Gorman, AMA President Andrew Pesce, and NZNO President Nano Tunnicliff.

The perspective that our speakers were able to provide to participants was invaluable in setting the scene and encouraging us to think about the issues that will affect doctors in the future health workforce. Following the formal presentations, participants were divided into groups and

considered a range of future scenarios, hypothetical but within the realms of possibility. Each group then presented a summary of its discussion. From here began the process of developing a consensus statement on the role of the doctor. On our second day a panel of participants provided comments on the first draft of the consensus statement, which facilitated full meeting interaction. It was heartening to see that there was general agreement on principles and that a common bond of participants was their commitment to advancing the profession and optimizing interaction and the care we can offer to our patients.

Over the course of the seminar recurrent themes emerged in relation to our evolving health sector and the impact these may have on the doctor's role. These included: the rise of technology, a greater emphasis on health care delivered in a community setting, the emergence of multidisciplinary teams, and patients seeking health information from sources such as the internet and other health professionals. There was discussion about the doctor's responsibility to be a public health advocate, to demonstrate leadership and to be a mentor; to enhance the patient-doctor relationship through building trust and working with the patient in a partnership to facilitate and encourage them to take responsibility for their own health; and to work as part of a team. There was strong agreement that doctors are clinical scientists and key diagnosticians. There was consideration of the value a doctor brings to the health system that is both distinct and unique.

As mentioned, there was overall agreement throughout the seminar on the principles that needed to be included in the consensus statement and significant progress was made on writing a draft statement. Progress is now continuing with the formation of a writing group, comprising some of the seminar participants. It is envisaged that a draft will be finalized this month. The draft will then go through an extensive consultation process and will be sent to all participating organizations for feedback.

The NZMA received extremely positive feedback about the seminar from attendees, especially regarding the professional goodwill and sense of purpose generated. It gave the profession a unique opportunity to consider the place of the doctor within the healthcare community of the future. It was very positive to secure the attendance of such influential participants in our health sector and to hear such high calibre discussion and debate. It was arguably the first time that such a gathering of leaders within the profession had taken place to consider a topic of such critical importance to the profession itself and the future health of New Zealanders. As one participant commented, the process was as important as the outcome. I would further comment on the support of Nano Tunnicliff and the NZNO who understood that we have to define what we do before others similarly assess their contribution, and eventually we move forward as a genuine health team.

The finalized consensus statement will enable the profession to have a collective, unified voice in its advocacy with government and its agencies. It will usefully guide future workforce policy planners, and provide a strong foundation for medical school training. Ultimately it will assist medical schools to select and train doctors that are well prepared for their role and the challenges presented in providing patient care throughout the 21st century – which has demonstrably changed from that of our colleagues of 100 years earlier.

Peter Foley



NZMA Role of the Doctor seminar



NZMA Board member **Dr Andrew Old** presents findings from a public survey on the role of the doctor in the New Zealand health system.



Dr Lyndy Matthews, Chair Council of Medical Colleges



Dr Stephen Child, Director of Clinical Training, Auckland District Health Board



NZMA Specialist Council Chair **Professor Harvey White**



Medical Council of New Zealand Chair **Dr John Adams**

Over 80 leaders from throughout the medical profession attended the NZMA's Role of the Doctor in the 21st Century seminar in November to develop a consensus statement on the role of doctors in our future health workforce. NZMA Chair **Dr Peter Foley's** editorial (pp.1-2) provides a comprehensive account of the seminar's background, aims and progress made to date.



RoD seminar panel, from left: ASMS President **Dr Jeff Brown**, Professor of Health Law and Policy at University of Auckland and previous Health and Disability Commissioner **Professor Ron Paterson**, NZMA Specialist Council Chair **Professor Harvey White**, Resident Doctors Association President **Dr Curtis Walker**, Associate Professor **Phillippa Poole**, Faculty of Medical and Health Sciences, University of Auckland, and previous Rural General Practice Network Chair **Dr Tim Malloy**.



From left: NZMA Board member **Dr Maria Poynter**, NZMA Specialist Council member **Dr Wayne Miles**, **Dr Richard Tyler** from Medical Assurance Society, NZMA Ethics Committee Chair **Dr Tricia Briscoe**.



Associate Professor **Phillippa Poole** and **Dr Rob Carpenter**, President NZ Society of Anaesthetists.



From left: NZMA Chair **Dr Peter Foley**, Professor of Health Law and Policy at University of Auckland and previous Health and Disability Commissioner **Professor Ron Paterson**, Clinical Director Procure **Dr Michelle Bonnici** and medico-legal consultant Medical Protection Society **Dr Brendon Gray**.

Guest Speaker Professor Sir John Tooke



International guest speaker Professor **Sir John Tooke** provided an international perspective on changes to the health sector and the impact on the role of the doctor. Sir John was the author of the UK report into Modernising Medical Careers known as the "Tooke Report" which among its recommendations called on the profession to define the role of the doctor. He convened the UK Role of the Doctor Summit in 2008 in his role with the UK Medical Schools Council at the time.

Sir John graduated in Medicine from St John's College, Oxford in 1974 and went on to become a Wellcome Trust Senior Lecturer in Medicine and Physiology and Honorary Consultant Physician at Charing Cross and Westminster Medical School before moving to the Postgraduate Medical School of the University of Exeter in 1987. His clinical and research interests are in diabetes and Vascular Medicine, and he built an internationally recognized research team in these areas at Exeter.

Until November 2009, Sir John was Dean of the Peninsula College of Medicine and Dentistry. In January 2010 he took up post as Vice Provost (Health) and Head of the Medical School at University College London. Sir John is the immediate past Chair of the Medical Schools Council and Chair of the UK Healthcare Education Advisory Committee (UKHEAC). His clinical and research interests focus on diabetes and its vascular complications and he is a recipient of the European Association of Diabetes Camillo Golgi Award. He is former Chair of Diabetes UK Professional Section and former President of the European Society for Microcirculation. In addition to more fundamental work on the complications of diabetes his research has embraced screening and service delivery and organisational issues and the patient's perspective.

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NZMA Leadership

The NZMA Leadership Fund was established to support participation by NZMA members in activities which contribute to leadership skills. Fourth-year medical students Liz Carr and Hai Sue Kang received funding to assist their participation in a New Zealand 12-member youth delegation to the Millennium Development Goal (MDG) summit in the United States.

Liz Carr

The delegation's first meeting was in Washington DC where they met with World Vision, the World Bank and attended a briefing at the United Nations (UN) information centre. The UN briefing provided a good background of the Millennium Development Goals (MDGs). Liz says that the leadership shown at the UN was very inspiring. "Leaders who have worked for the UN have not only had to solve issues through the Security Council and in regards to development work, but they've also been responsible for the development of international air traffic control systems, intellectual property and internet laws, and other initiatives."

Delegates met with Helen Clark, former Prime Minister of New Zealand and now the head of the UN development programme, and discussed the importance of New Zealand's role in development.

The delegates attended the Millennium Campus Networks Conference in Columbia (with 1000 students in total) and learnt about issues such as global health, engineers without borders, and development work. "These young people had a lot to teach us about what we could be achieving, and the speakers were phenomenal," Liz said.

She says the key message for her was that the human element is vital to development work. "While there are benefits to development such as stabilising the world's economy, preventing epidemics spreading across the world, and trying to protect biodiversity, ultimately development is about people."

Liz is positive about the effect the conference had on her leadership skills. "I will be able to directly apply some of the knowledge and skills I learnt to my presidency of the NZMSA."

During the trip, Liz also attended TEDx (www.ted.com) – a conference run by a small not-for-profit based on bringing together technology, entertainment and design to effect change. The TEDx was hosted by Melinda Gates, who spoke about the powerful reach of coca-cola and how their marketing and distribution campaigns can teach people how to deliver development projects.

Liz was amazed at the range of topics during the trip: "The two weeks were almost overwhelming with the breadth and depth of topics covered. I learnt a huge amount and was inspired to think more about what I can be doing to help in aid projects. I still feel my first priority is learning to be an excellent practising clinician, but there are so many ways that my skills as a doctor and as a leader will be helpful in future."



Liz Carr kicking off the "Can you handle the jandal" campaign in New York.



Delegation with the Ambassador to the USA, and former Prime Minister, Mike Moore.

The New Zealand delegates have started their own campaign, which will continue through the P3 Foundation¹. They are asking "Can you handle the jandal?" to inspire young New Zealanders to get involved and learn more about the MDGs.

More information on the Leadership Fund can be found on our website: <http://www.nzma.org.nz/news/Leadershipfund.pdf>.

¹ The P3 Foundation was established in 2010 to encourage young New Zealanders to break the poverty cycle. The Foundation is an organisation which is run by young people, working together with young people, to end global poverty. Their vision is to educate young people about poverty, while developing their skills in finding solutions; to action solutions in alleviating poverty both in New Zealand and abroad and to mobilise individuals to advocate for a better future.

Fund recipients

Hai Sue Kang



Hai Sue Kang launching the P3 Foundation's "Can you handle the jandal" campaign at Capitol Hill.

Hai Sue Kang describes her trip, as part of the youth delegation, as a unique opportunity to see global leadership and teamwork in action. Delegates were able to see the UN launch of the Global Strategy for Women's and Children's Health "which is a joint effort by governments, philanthropic institutions, the UN and other multilateral organizations, the business community, healthcare workers, civil society and the private sector, to save 16 million lives by 2015. This will partly be achieved by preventing 33 million unwanted pregnancies, protecting 120 million children from pneumonia and safeguarding 88 million children against stunting."

Hai Sue says that the delegation met with some of the most influential people of our time including Melinda Gates of the Gates Foundation and Jeffrey Sachs, a visionary economist behind the MDGs.

Despite the varying backgrounds of the delegates "we shared a vision of a world without poverty. And we wanted tips on how we, as the youth of New Zealand can help this to happen. The message was to find the one cause that you are passionate about and to fight for it. It was very daunting being faced with a multitude of issues, and trying to think of ways we could help."

The highlight of the trip was seeing the immeasurable contribution made by organizations in the field to

bring about changes. The newly-formed US, UK, Australia and Gates alliance, will work with high-need countries in sub-Saharan Africa and South Asia to help 100 million more women satisfy their need for modern family planning.

The delegates now aim to mobilise New Zealand youths, through interactive media, to learn about the MDGs and to show their support for achieving these goals by 2015. For more information on the campaign, see <http://www.p3foundation.org.nz>.



P3 delegates meet Helen Clark after launching their "Can you handle the jandal" campaign.



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Summer Studentship

The NZMA Summer Studentship for 2010 has been awarded to second-year medical student Matthew Radford. Matthew is conducting a 10-week study of the density of tobacco retail outlets in proximity to intermediate and secondary schools in Otago, to inform future national research in this area. The study seeks to contribute to a reduction in young people smoking. Matthew chose his topic after completing a number of public health papers in his undergraduate study, which strengthened his interest in public health issues.



Matthew's proposal was selected because of its "resonance with the NZMA's statement of purpose to promote the health of all New Zealanders," said Doctors-in-Training Council Chair, Dr Jonathan Foo.

Matthew's study will evaluate the relationship between the density of tobacco retailers' proximity to schools and the deprivation of the area. Using Google Maps and New Zealand census data, he will determine the distance of cigarette outlets from schools to determine the density. The census data will be used to obtain information on the level of deprivation, ethnicity, population density and age distribution of the area the school is in.

Research has shown that smoking rates are higher for both adults and youths in more deprived areas of the community. The density of tobacco retailers has been shown to be higher in areas of socioeconomic disadvantage and where a large proportion of the population in an area is under 18 years of age.

Matthew says there is a strong call for banning cigarette sales in New Zealand and that one area that can potentially be targeted is youth uptake of smoking "which has only shown a small decrease over the last few years.

It's therefore fitting that the study looks at possible factors for youth smoking, such as the density of cigarette outlets, which will show whether this affects smoking rates in areas of deprivation."

"The data has the potential to provide more evidence in support of a move towards licensed cigarette outlets, like the current laws for alcohol outlets."

Born and raised in Dunedin, Matthew is a student at Otago University. He began his medical studies after completing a BSc in Pharmacology. His interests include cricket, hockey and orienteering – a sport in which he has won a few Otago age group titles and a New Zealand age group title in 2002.

Matthew has not decided in which area of medicine to specialise yet, but says he has an interest in public health, emergency medicine and oncology.

A goal for the future includes travelling and working overseas "however I can definitely see myself coming back to New Zealand."

Notice of Election — Call for nominations

In accordance with the Constitutional rules of the New Zealand Medical Association, nominations are invited for the positions of **Chair**, **Deputy Chair**, and two members of the **NZMA Board**.

Nominees **must be members of the NZMA**, and nominations may be made by **any financial member of the NZMA**. All nominations **must have the endorsement of the nominee**.

If more nominations are received than positions available, a postal ballot of all financial members of the NZMA will be held. Nominations close **4pm Friday 4 March 2011**.

Nominator

I, _____ being a financial member of the NZMA hereby nominate _____ for the position of **Chairman**

Signed _____

I, _____ being a financial member of the NZMA hereby nominate _____ for the position of **Deputy Chairman**

Signed _____

I, _____ being a financial member of the NZMA hereby nominate _____ for the position of **NZMA Board Member**

Signed _____

Nominee

I, _____ hereby agree to be a candidate in the election for the above position.

Signed _____ Date ____ / ____ / ____

Please return this form to:
 Chief Executive Officer, NZMA,
 PO Box 156, Wellington,
 or fax (04) 471 0838,
by 4pm Friday 4 March 2011

NEWS IN BRIEF

NZMA Auckland Council

The NZMA Auckland Council has had a stellar year with a number of events for NZMA members which included guest speakers, a formal debate, discussion on medico-political issues and an opportunity to socialise with colleagues. Enhancing collegiality of the profession is a key NZMA goal and this has been well served by a reinvigorated Auckland Council. Details of future events will be included in issues of Vital Signs.

New social media guide for medical profession

A resource to assist doctors and medical students to maintain professional standards when using online social media was launched by the New Zealand Medical Association in late November. The guide - Social Media and the Medical Profession - was developed jointly by the NZMA, the Australian Medical Association, the New Zealand Medical Students' Association, and the Australian Medical Students' Association. As participation rates in online media have increased, some evidence has emerged from overseas that the use of these media can pose risks for medical professionals if used inappropriately. The guide is intended to assist doctors and medical students to continue to enjoy the online world safely, in areas such as Facebook and personal blogs, while also exercising caution so that they do not place themselves or their patients in awkward situations. Ethical responsibilities continue to apply, such as patient confidentiality and the doctor-patient boundary. The guide is available on the NZMA website at www.nzma.org.nz/news.

Promoting general practice training

Health Workforce NZ, in conjunction with the RNZCGP, are working together to encourage more entrants into general practice training in 2011. See the HWNZ website for more information: <http://healthworkforce.govt.nz/working-in-health/medical-workforce/general-practice>.

PGY1 representative on Doctors-in-Training Council

Dr Anna Choi has been elected as the first-ever PGY1 representative on the DiTC. Anna completed all her training at the University of Otago and is now working at Middlemore Hospital in Auckland. Anna is looking forward to the busy PGY1 year but says her aim will be to be accessible and approachable in order to ensure input on the issues that affecting doctors-in-training. Anna is also currently Vice President (internal) for the NZMSA. Thank you to all NZMA trainee intern members who voted in the election.



The NZMA wishes its members a happy festive season and best wishes for the new year

Opinions in Medspeak do not necessarily represent those of the NZMA. Contributions are welcome for consideration. Please contact Communications Manager Daphne Atkinson, phone 04 472-4741 or email daphne@nzma.org.nz.

Advertising enquiries should be directed to Peter Cowan, phone 04 570 2550 or email petercowan@cowancom.co.nz.



About Us

About Us is a regular feature to let members know more about their elected representatives.

**Jonathan
FOO**

Dr Jonathan Foo is the Chair of the Doctors-in-Training Council and a member of the NZMA Board. He is a PhD candidate and general surgical trainee in Wellington.

Where were you born?
Auckland.

diverse caseload, and amazing innovations in the field.

Where did you grow up?
Deep in the heartlands of Howick.

Best thing about the NZ health system?

Regardless of wealth, every New Zealander has an equal right to healthcare.

Where did you gain your medical degree?
University of Otago.

Biggest concern about the NZ health system?

The workforce morale, funding and access to training.

Current place of work?

I've been 100% converted to being a Wellingtonian at the Wellington School of Medicine.

Best moment in medicine?

Caring for an incredibly sick patient, working on a treatment and years later seeing a life changed for the better.

Something about me that may surprise people...

I once spent three months working as a security guard.

Your ideal job?

General Surgery: great colleagues,

If I wasn't a doctor...

I'd be bored.



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Our Doctors-in-Training council members are also available if you need someone to talk to - email ditc@nzma.org.nz

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