

Submission of Charlotte Korte and Renate Schütte on the Pae Ora (Healthy Futures) Bill

We have some significant concerns about the proposed legislation, as outlined in brief below.

1. Legislative Haste

The short timeframe for providing submissions on this significant change in how the health system operates is not in the true spirit of consultation, something which the Bill ironically purports to advocate for. Legislative haste will undoubtedly result in limited scrutiny. Rushing something as important as an overhaul of the health system without wider stakeholder and enough public consideration will not instil public confidence. From the outset this makes a mockery of the supposed intentions for active consumer participation.

2. Promoting and Protecting Consumers Rights

There is no mention or reference to the important role and function of the Health and Disability Commissioner in promoting and protecting health consumer rights in the Bill. For the Bill to meet the principles of being responsive and compassionate, consumer complaints need to be a central issue that is addressed in order to allow for monitoring of patient safety, facilitate improved standards of care and identify systemic issues. (On this point I also note that consideration is currently being given to improving the HDC Act itself with respect to consumer rights through allowing for the right to appeal decisions made by the Commissioner – see petition of Renate Schütte at [Health - New Zealand Parliament \(www.parliament.nz\)](http://www.parliament.nz) . The principles of consumer rights and the consumer voice presented in this petition need to be reflected within the Bill.)

3. Patient Safety a Key Strategic Priority - Addressing Patient Safety Concerns

Effective consumer engagement can be pivotal in reducing harm. There is too much harm happening within the health sector and the time for consumers sitting on committees being 'consulted' has come and gone. A formal Patient Safety Consumer Representative role needs to be established in the Bill, to truly represent and give weight to the consumer voice. The importance of the consumer voice should be reflected throughout engagement at a higher level of government, advising and reporting to the Minister and Dir Gen of Health as a key part of their role responsibility. The Patient Safety Consumer Representative should be in direct contact with consumers and consumer groups, NGO's and relevant consumer organisations.

The Ministry of Health must have more accountability and responsibility for patient safety, relying on the HDC commissioner is not enough. The Minister of Health's role must be expanded to include patient safety as a specific responsibility.

4. Inadequate Legislative Mandate Over the Private Sector

It has become clear when addressing the surgical mesh issue, both from a consumer advocate perspective but also at a regulatory level, that the medical colleges have too much power in the current health system. The Ministry of Health/Government have limited powers over the private sector to enact change when needed. Creating necessary legislative

change in the Bill to give the mandate over the private sector will help to ensure patient safety.

5. Promoting culture change - a strong health and safety culture

This includes positive relationships, fairness, respect, effective communication, openness, honesty, and personal responsibility.

There is a significant level of distrust in the healthcare system particularly amongst certain groups that have been poorly supported, such as the mesh injured. Rebuilding trust is essential moving forward. The Bill needs to promote a culture change in the way healthcare is delivered by providers, using patient-centric, and where necessary a trauma informed, approach to care. This is about a genuine provider-consumer relationship, not just a tick box exercise of the Code of Rights.

6. Women's Health as a Strategic Key Health Priority

Women's health continues to be inadequately understood, researched and supported in New Zealand as extensively reported by the Gender Justice Collective. Now is the ideal time to develop and implement a National Women's Health strategy to resolve inequitable access to quality health care.

See [Women's Health Plan - gov.scot \(www.gov.scot\)](http://www.gov.scot)

See example of inequity of access in to quality health care for women- [Petition of Don Wilson and Kirsty Watt: To improve pelvic floor health care for New Zealand women pre and post birth - New Zealand Parliament \(www.parliament.nz\)](http://www.parliament.nz)

7. Addressing Mental Health Concerns

The mental health and wellbeing of consumers continues to be a significant and growing concern and is being exacerbated by the societal effects of Covid-19. Mental health needs to be specifically addressed in the Bill, with very clear lines of accountability for implementation and reporting.

8. Prevention of disease

The concepts of disease prevention and health promotion are absent from the Bill. This makes no sense as it is clear that many health issues are to varying extents preventable through various societal, lifestyle and dietary changes.