

STRATEGIC PLAN

1 July 2018 to 30 June 2019



TE KAUNIHERA RATA O AOTEAROA MEDICAL COUNCIL OF NEW ZEALAND

Protecting the public, promoting good medical practice

Te tiaki i te iwi whānui me te whakatairanga pai i te mahi e pā ana ki te taha rongoā

OUR VISION

We will provide leadership to the medical profession and enhance public trust by promoting excellence and openness in medical practice.

OUR STATUTORY PURPOSE

Our statutory purpose is to protect the health and safety of the public by providing mechanisms to ensure that doctors are competent and fit to practise.



OUR VALUES:

- Consistency and fairness
- Respect
- Integrity
- Openness and accountability
- Commitment
- Effectiveness and efficiency

OUR PRINCIPLES

- In undertaking all its functions, Council will focus primarily on achieving its purpose of protecting the health and safety of the public.
- Council will be accountable for its decisions to the public, Parliament and the Minister of Health and, in relation to the efficient use of funds to achieve its purpose under the HPCAA, to the profession.
- Council will make its decisions as an independent regulator of the medical profession free of influence from external bodies.
- Council will operate as a right touch regulator, ensuring the most effective, efficient, consistent and proportionate regulation for the profession.
- Council will consider whether there is a risk of harm or risk of serious harm to the public when managing doctors with competence, conduct and/or health concerns.
- Council will work in a collaborative and constructive manner with all key stakeholders and continue to foster mutual trust and respect in all our relationships.
- Council will aim for excellence in everything that we do and will focus on continually improving our performance.
- Council will promote the Treaty of Waitangi principles of partnership, participation and protection.
- Council will work to improve cultural competence within the medical profession with the aim of improving health equity for disadvantaged groups within New Zealand.
- Council will aim for excellence in our people and will focus on being an employer of choice and applying best practice human resource policy and practice.
- Council will make decisions within a transparent natural justice-based decision-making framework.
- Council will work with other international medical regulators to promote national and international best practice in medical regulation.
- Council will work with other health regulators in New Zealand promoting greater collaboration to support an effective and efficient regulatory environment.
- Council will set standards that signify a high and readily attainable level of medical practice.

OUR STRATEGIC GOALS

GOAL ONE

Optimise mechanisms to ensure doctors are competent and fit to practise.

GOAL TWO

Improve Council's relationship and partnership with the public, the profession, and stakeholders to further Council's primary purpose – to protect the health and safety of the public.

GOAL THREE

Promote good regulation of the medical profession by providing standards of clinical competence, cultural competence and ethical conduct and ensuring that the standards reflect the expectations of the public, the profession and stakeholders.

GOAL FOUR

Improve medical regulatory and workforce outcomes in New Zealand by the registration of doctors who are competent and fit to practise and their successful integration into the health service.

GOAL FIVE

Promote good medical education and learning environments throughout the under-graduate / postgraduate continuum to help ensure all doctors have achieved the necessary standards for their practice.

OUR FIVE STRATEGIC DIRECTIONS

DIRECTION ONE –ACCOUNTABILITY TO THE PUBLIC AND STAKEHOLDERS

The accountability to the public and stakeholders strategic direction relates mainly to strategic goals two and three:

GOALTWO

Improve Council's relationship and partnership with the public, the profession, and stakeholders so that Council can fulfil its role under the Health Practitioners Competence Assurance Act 2003.

■ GOAL THREE

Promote good regulation of the medical profession by providing standards of clinical competence, cultural competence and ethical conduct and ensuring that the standards reflect the expectations of the public, the profession and stakeholders.

The Council is accountable to the public, to Parliament, and to the profession. There are many individuals and groups with whom we collaborate in the performance of our functions. This strategic direction intersects with and sits across all the strategic directions.

Key outcomes:

Improved engagement with the public and stakeholders to raise awareness of Council's role and functions, obtain valuable feedback into our strategy, policy and business development and improve how we perform our functions. The best interests of the public are integral to all Council strategic planning, policy development and business activity.

How we will achieve our outcomes:

For patients and the public

- Our decision-making will take into account the principles of 'patient-centred regulation' and the Code of Health and Disability Services Consumers' Rights to ensure openness and accountability to the public in processes.
- We will incorporate public and patient feedback into policy development through input from Council's Consumer Advisory Group and other stakeholder engagement and consultation.
- We will clearly communicate meaningful regulatory information to the public about doctors.

For doctors and other stakeholders

- We will continually seek to improve our methods and processes for managing communication with doctors and other stakeholders.
- We will raise awareness of Council's role, responsibilities and approach to medical regulation and promote standards of good medical practice.
- Our agreements and Memoranda of Understanding with key stakeholders will be monitored to ensure they are used effectively to define roles and responsibilities related to medical regulation.
- We will continue to action and maintain Council's stakeholder engagement plan, including specific engagement with DHBs on Council's key strategic priorities and updates on statements and standards.
- We will engage with other Responsible Authorities to develop a consistent and effective regulatory approach across health professions in New Zealand and to collaborate about best practice and the impact of future legislative change.
- We will continue with a quality improvement focus for effective and efficient Council processes, when undertaking our functions under the HPCAA and in strategy, policy and business development.

DIRECTION TWO – PROMOTING COMPETENCE

The accountability to the public and stakeholders strategic direction relates mainly to strategic goals two and three:

■ GOAL ONE

Optimise mechanisms to ensure doctors are competent and fit to practise.

■ GOAL THREE

Promote good regulation of the medical profession by providing standards of clinical competence, cultural competence and ethical conduct and ensuring that the standards reflect the expectations of the public, the profession and stakeholders.

All doctors must maintain competence, have up-to-date knowledge and be fit to practise to ensure public health and safety.

The principles of 'right touch' risk-based regulation, that is effective, efficient, consistent and proportionate, will be used to continue Council's focus on changing behaviour through the use of education and non-regulatory levers.

Key outcomes:

Council provides leadership to the profession and works collaboratively and constructively with key stakeholders, including the Medical Colleges, DHBs, primary care, and the Ministry of Health using preventative regulation to continually improve the current high quality of medical practice in New Zealand. Council will focus on proactive strategies that will improve standards of practice, supporting doctors to provide quality care to patients in an effort to reduce the need for reactive regulatory measures.

How we will achieve our outcomes:

Strengthening recertification

We will:

- Work with the profession and other stakeholders to promote recertification activities that reflect Council's Vision and Principles of Recertification, which are:
 - o Formative in nature
 - o Based in the doctor's actual work and workplace settings
 - o Informed by public input and referenced to the Code of Consumer's Rights
 - o Supported by employers
 - o Profession-led
 - o Informed by relevant data
 - o Evidence-based.

- Develop a collective approach between Council, Medical Colleges and employers to ensure doctors are not burdened with repetitive and duplicated recertification activities.
- Establish accreditation standards for recertification that align with Council's Vision and Principles for Recertification.
- Evaluate the effectiveness of regular practice review (RPR) as a method of maintaining and improving the standard of medical practice.
- Review the nature and effectiveness of collegial relationships within the recertification programme for doctors registered in a general scope of practice, including the expectations on the senior colleague.

Supporting the profession and employers to continually improve medical practiceWe will:

- Collaborate with colleges, DHBs and other stakeholders to facilitate collegial and employer support for doctors with health, competence and/or conduct concerns that Council are assessing, investigating and managing.
- Support professional bodies to build a culture of respect and collaboration in medical practice, including fostering relationships of trust, confidence and cooperation between doctors and members of the public to support public safety.
- Develop standards to support integrated care, team work and inter-professional communications.
- Provide guidance to the profession, professional bodies and employers about accessing and utilising doctors practising outside New Zealand to provide medical services to New Zealand patients.
- Consider and provide guidance to the profession about appropriate incorporation of multimedia and virtual communication methods in the delivery of medical services.

DIRECTION THREE – CULTURAL COMPETENCE, PARTNERSHIP AND HEALTH EQUITY

The cultural competence, partnership and health equity strategic direction relates mainly to strategic goals one, two, three and four:

GOAL ONE

Optimise mechanisms to ensure doctors are competent and fit to practise.

GOAL TWO

Improve Council's relationship and partnership with the public, the profession, and stakeholders so that Council can fulfil its role under the Health Practitioners Competence Assurance Act 2003.

■ GOAL THREE

Promote good regulation of the medical profession by providing standards of clinical competence, cultural competence and ethical conduct and ensuring that the standards reflect the expectations of the public, the profession and stakeholders.

GOAL FOUR

Improve medical regulatory and workforce outcomes in New Zealand by the registration of doctors who are competent and fit to practise and their successful integration into the health service.

A doctor's culture and world view influence the way they interact with patients and the way they understand health, healthcare and wellness. They can also impact upon the doctor-patient relationship. Patients' cultures and world views can influence the way they interact with the health system and how they respond to healthcare interventions. A doctor's approach to patients with a cultural identity that differs from their own can influence the way a patient accesses care.

Medical regulators and colleges have a responsibility to support doctors in the further development of a culturally competent workforce. Developing the cultural competence of doctors is a method of improving the experiences of Māori within the health system and reducing the inequities in health that exist between the indigenous Māori and other population groups.

Key outcomes

Improved health outcomes and reduced health inequity for Māori and other ethnic groups, through Council's role as the medical regulator responsible for professional standards and ensuring doctors'

competence.

How we will achieve our outcomes:

Strengthening Cultural Competence

We will:

- Develop resources for Council staff to improve understanding of tikanga Māori and Te Reo.
- Develop accreditation standards and statements for the profession that identify clear expectations and standards of cultural competence for doctors and the related competencies which can be used for assessment and professional development of doctors during prevocational medical training, vocational training and recertification programmes.
- Advocate for the identification and removal of barriers in delivery of medical care.
- Review IMG induction, supervision and assessment, to strengthen cultural competence and cultural safety aspects.
- Collaborate with colleges and employers about the importance of cultural safety, focusing on the experiences of the patient to improve the quality of care.
- Review Council's statements and resources so that they reflect the standards of cultural competence with a focus on cultural safety.
- Engage with colleges and other stakeholders to influence an increase in the number of Māori doctors entering and completing vocational training.
- Improve understanding of the outcomes of care and the causes of health inequities.
- Work collaboratively with medical colleges and employers to ensure cultural competence is embedded in all prevocational, vocational and recertification programmes.
- Gather baseline data and evaluate the effectiveness of the cultural competence, partnership and health equity work programme to ensure it achieves the agreed outcomes.

Improving partnerships and participation of Māori

We will:

- Work with doctors and stakeholders to support them to establish and strengthen their partnerships with Māori communities and organisations and encourage increased Māori participation in governance and decision making.
- Develop frameworks and resources for supporting doctors who identify as Māori, through prevocational and vocational training, and recertification programmes.

DIRECTION FOUR – MEDICAL EDUCATION

The medical education strategic direction relates mainly to strategic goals three and five:

■ GOAL THREE

Promote good regulation of the medical profession by providing standards of clinical competence, cultural competence and ethical conduct and ensuring that the standards reflect the expectations of the public, the profession and stakeholders.

■ GOAL FIVE

Promote good medical education and training throughout the undergraduate / postgraduate continuum to ensure all doctors have achieved the necessary standards for their practice.

It is a function of Council to ensure and promote the competence of doctors through their education and training programmes, from undergraduate to postgraduate education.

Key outcomes:

An improved educational experience for all doctors and medical students, protecting the health and safety of the public by ensuring all doctors are competent and fit to practise.

How we will achieve our outcomes:

Improved quality of prevocational medical training:

We will:

- Implement multisource feedback (MSF) for interns as a formative educational tool in ePort.
- Continue enhancing ePort as a record of learning for each intern, including the development of an App for on-the-go use.
- Encourage training providers to meet targets so all interns are able to complete a community based attachment by 2020; and encourage the development of community based attachments that support integrated care that is closer to home aligning with the New Zealand Health Strategy 2016.
- Undertake a review of the New Zealand Curriculum Framework for prevocational medical training so it appropriately guides a doctor's learning.
- Undertake an evaluation of the changes to the prevocational medical training programme.

Transition into medical practice

We will collaborate with New Zealand's two medical schools to create a quality transition process and vertical educational integration for medical students into the prevocational medical training programme.

DIRECTION FIVE: RESEARCH AND EVIDENCE-BASED REGULATION

The research and evidence-based regulation strategic direction relates mainly to strategic goals two, three and five:

GOALTWO

Improve Council's relationship and partnership with the public, the profession, and stakeholders to further Council's primary purpose – to protect the health and safety of the public.

GOAL THREE

Promote good regulation of the medical profession by providing standards of clinical competence, cultural competence and ethical conduct and ensuring that the standards reflect the expectations of the public, the profession and stakeholders.

■ GOAL FIVE

Promote good medical education and training throughout the undergraduate / postgraduate continuum to ensure all doctors have achieved the necessary standards for their practice.

Council is aware of the fast pace of technological and communication advancement and the need to ensure policy and standards are developed using valid and reliable evidence.

Key outcomes:

All strategic and policy decisions are supported by valid and reliable evidence, utilising research and evaluation outcome data where possible, with the public interest at the centre.

How we will achieve our outcomes:

We will:

- Evaluate all strategic and policy initiatives to consider the effectiveness of regulatory interventions.
- Analyse and interpret data that Council gathers to make it useful and meaningful and to inform strategic and policy development and decision-making.
- Undertake relevant research and literature reviews to inform strategy and policy.
- Use data to demonstrate risks and trends, and show the effectiveness of initiatives to improve the quality of medical practice and patient care.
- Use and disseminate Council-collected data effectively to provide meaningful information to stakeholders.
- Collect and provide workforce information and data to contribute to health workforce flexibility and planning, subject to privacy requirements.

