

Tuesday 6 February 2024

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Submitted via email mrtconsultations@medsci.co.nz

Dear Ms Hughes,

Re: New Zealand Medical Radiation Technologists Board – review of practitioner's Naming Policy

Thank you for the opportunity to provide feedback on the review of the practitioner's *Naming Policy*, currently being undertaken by the Medical Radiation Technologists Board.

The Australasian Sonographers Association (ASA) is the professional organisation for Australasian sonographers, who are the experts in ultrasound. With over 7,000 members across Australia and New Zealand, the ASA's purpose is to foster a sonography profession that delivers high quality ultrasound with a vision to create a healthier world through sonographer expertise.

The ASA has considered the proposed changes through its New Zealand Sonographer Advisory Group. We support the principle of naming practitioners where it helps mitigate a risk to public safety and helps improve the transparency of the health system. However, we are also keen to ensure there are no unwarranted or unnecessary negative impacts to practitioners. We believe greater clarity is needed to demonstrate how the proposed *Naming Policy* would be applied in practice. Please see our detailed feedback attached.

If you have any questions or require additional information, please contact Elissa Campbell, General Manager of Policy and Advocacy at policy@sonographers.org. We look forward to hearing of the outcomes of this consultation.

Yours sincerely,

Dr Tony Coles

Chief Executive Officer

Australasian Sonographers Association



New Zealand Medical Radiation Technologists Board

Consultation on proposed changes to the Naming Policy for practitioners

Australasian Sonographers Association: Feedback and Recommendations

General comments

The Australasian Sonographers Association (ASA) recognises that the Medical Radiation Technologist Board's purpose is to protect the health and safety of the Aotearoa New Zealand public, and we therefore support the principle of naming a practitioner in line with the requirements under the Health Practitioners Competence Assurance Act 2023, where this helps protect the public from a defined risk.

Given the significant consequences that may result from naming an individual practitioner, the ASA also welcomes the revision to the *Naming Policy* to require the Board – when considering the possible consequences for the practitioner to being named - to take into account the impact and likely reputational harm on the practitioner from both a personal and professional perspective.

Feedback and recommendations

In response to the proposed changes to the *Naming Policy* for practitioners, we offer the following feedback and recommendations:

1. Improved clarity for practitioners

We support a balanced approach to weighing up the interests of the public and the practitioner, and in general support the principles outlined in the section *Principles Under-Pinning the Decision-Making Process*. However, we believe further clarity is needed of how the policy is applied in practice to ensure the focus is on naming practitioners where there is a significant and substantiated risk.

- For example, Appendix 1 indicates orders and directions can be made in cases where 'the
 Authority <u>suspects</u> a practitioner is unable to perform required functions due to a physical or
 mental condition (S48(2), and or 'if appropriateness of the practitioner's conduct <u>is in doubt</u>'
 (S69).
- Appendix 2 then indicates that some matters may be <u>unsubstantiated</u> (row 5), part of any <u>ongoing investigation</u> (row 6), or <u>historical</u> (row 19).

To enhance clarity, we recommend the Board consider including case examples to demonstrate how the policy is applied in practice, including instances where practitioners would and would not be named, and the publication method.

2. Avoid unwarranted negative consequences for practitioners

To ensure practitioners have opportunities for remediation where issues can be more easily resolved, and to avoid unwarranted negative consequences to the practitioner and the public perception and reputation of the health profession, we believe:



- A practitioner's confidentiality and privacy should be maintained unless there is clear evidence to support disclosure.
- When concerns relate to a practitioner's physical or mental health, the practitioner should generally not be named unless there is evidence that doing so is necessary for public safety.
- When there are concerns about a practitioner's competence, the practitioner should generally
 not be named if they are actively engaging with the Board and are taking steps to remediate
 the concern. The focus should be on more significant or repeated issues, or where a
 practitioner is not engaging or complying.

3. Targeted publication that reflects risk

In terms of the principles of 'publication' we believe:

- The Board should target publication to relevant and necessary parties, based on evidence of risk to public safety. It should not notify a wide audience by default.
- We have concerns over the proposed additional content in the publication media section (p
 10), particularly regarding the use of community pages on social media sites as the Board
 cannot manage this information or any public commentary linked to it. This may present an
 unwarranted negative impact on the practitioner. Naming of practitioners via third-party
 social media should be reserved for issues involving the highest, and substantiated, risk.
- Publication of the practitioner's name should be limited to the period it is current. Historical
 notices, or those where an order has been revoked or conditions to practice no longer apply,
 should be removed.

4. Additional consideration for trainees

We believe that additional consideration should be given to trainees, particularly in matters relating to competence and health, as they are practicing under supervision and will typically have lower levels of experience and knowledge.