



**MEDICAL SCIENCES COUNCIL
OF NEW ZEALAND**

TE KAUNIHERA PŪTAIAO HAUORA O AOTEAROA

Strategic Directions

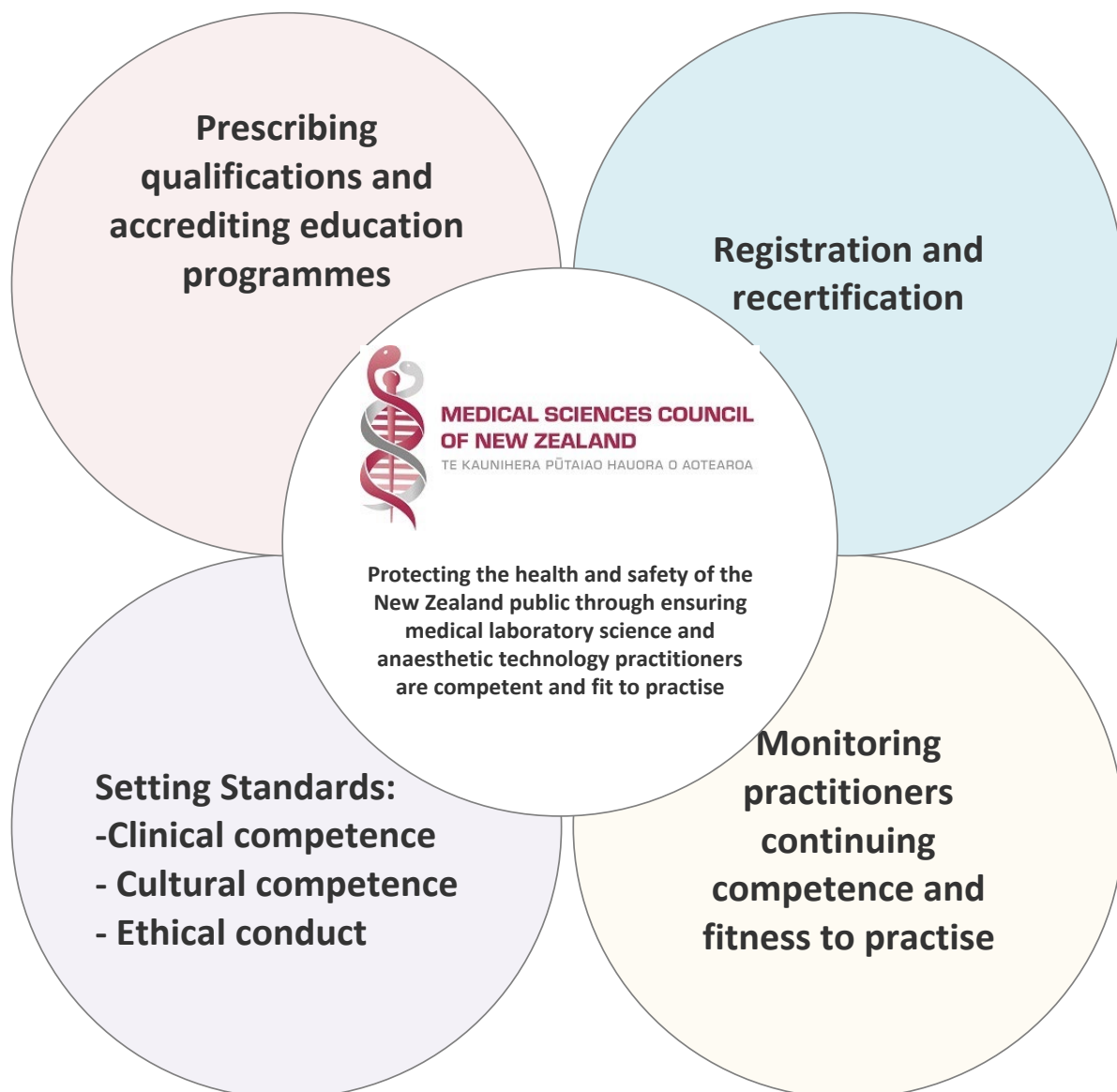
April 2021 – March 2026

Contents

Our Work	2
The Principles We Work Within	4
Organisational Structure	5
Our Strategic Directions over the Next Five Years	6
Key Outcomes of Our Strategic Directions	7
Our Strategic Directions in Context.....	8
Strategic Direction 1: Standards	8
Strategic Priority 2: Practitioner Competence	9
Strategic Priority 3: Accountability.....	9
Strategic Priority 4: Organisational Performance.....	10
Strategic Planning Environmental Influences.....	12
Economic Factors	12
Legislative and Regulatory Change	12
Political Factors.....	13
Social and Demographic Factors	13
Technological Change	14
Appendix 1: The Health Practitioners Competence Assurance Act 2003: Section 118	15

Our Work

The Medical Sciences Council of New Zealand is a responsible authority under the Health Practitioners Competence Assurance Act 2003 (the Act). We are one of sixteen independent health regulators responsible for protecting the health and safety of the New Zealand public by ensuring health practitioners are competent and fit to practise. We regulate medical laboratory science practitioners and anaesthetic technology practitioners



The Council's functions¹ are set out in section 118 of the Act. In summary this includes a number of core responsibilities:

Prescribing qualifications and accrediting education programmes to ensure graduates have the competencies and attributes required of registered medical laboratory science and anaesthetic technology practitioners.

Setting the standards for clinical and cultural competence and ethical conduct that must be met by all medical laboratory science and anaesthetic technology practitioners.

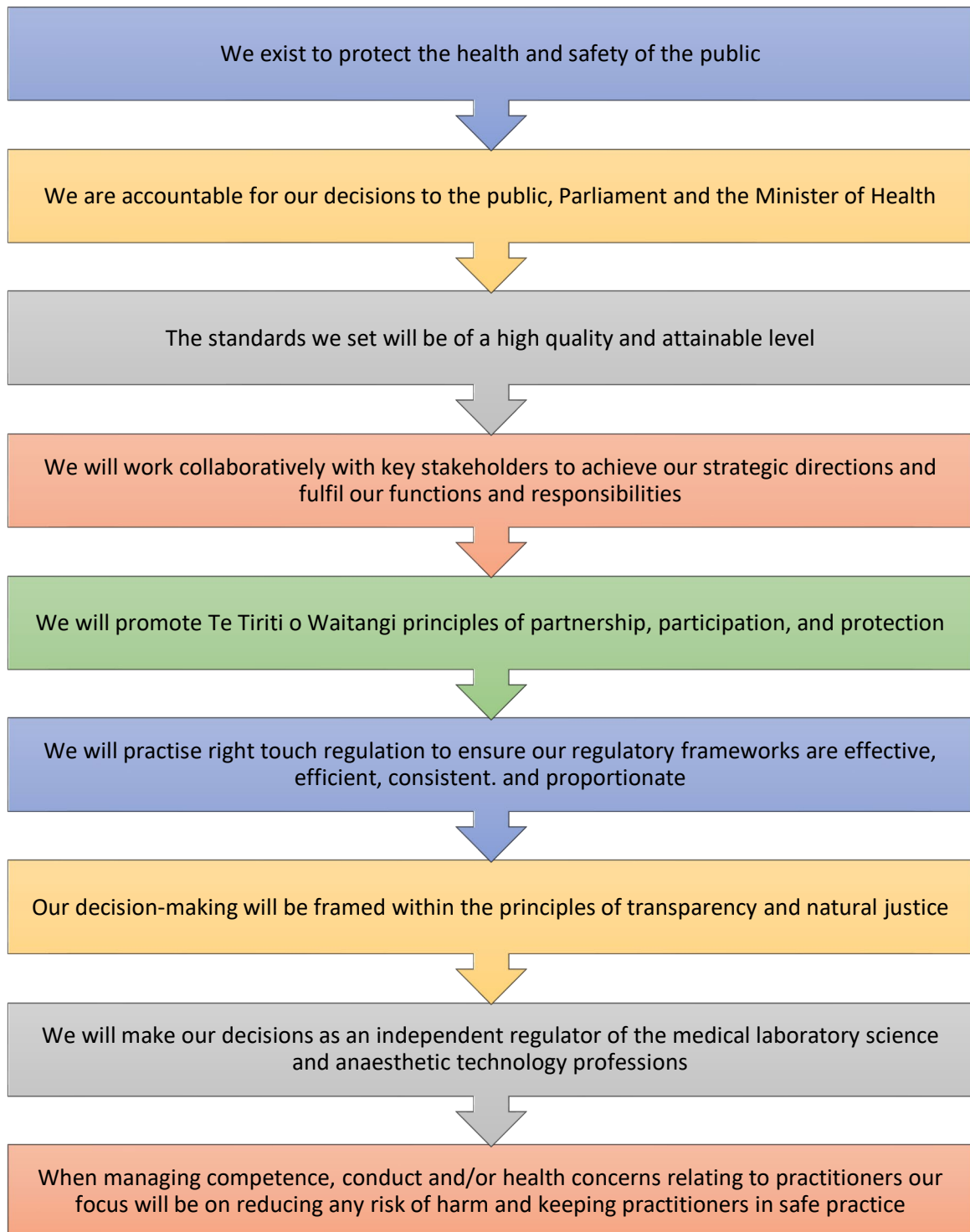
Registration and recertification of medical laboratory science and anaesthetic technology practitioners ensuring that only those with the relevant skills, competencies and fitness to practise are able to practise in New Zealand.

Ensuring registered medical laboratory science and anaesthetic technology practitioners continue to be competent and fit to practise by investigating their performance, conduct or health in response to concerns raised, and taking appropriate action to protect the safety of the public.



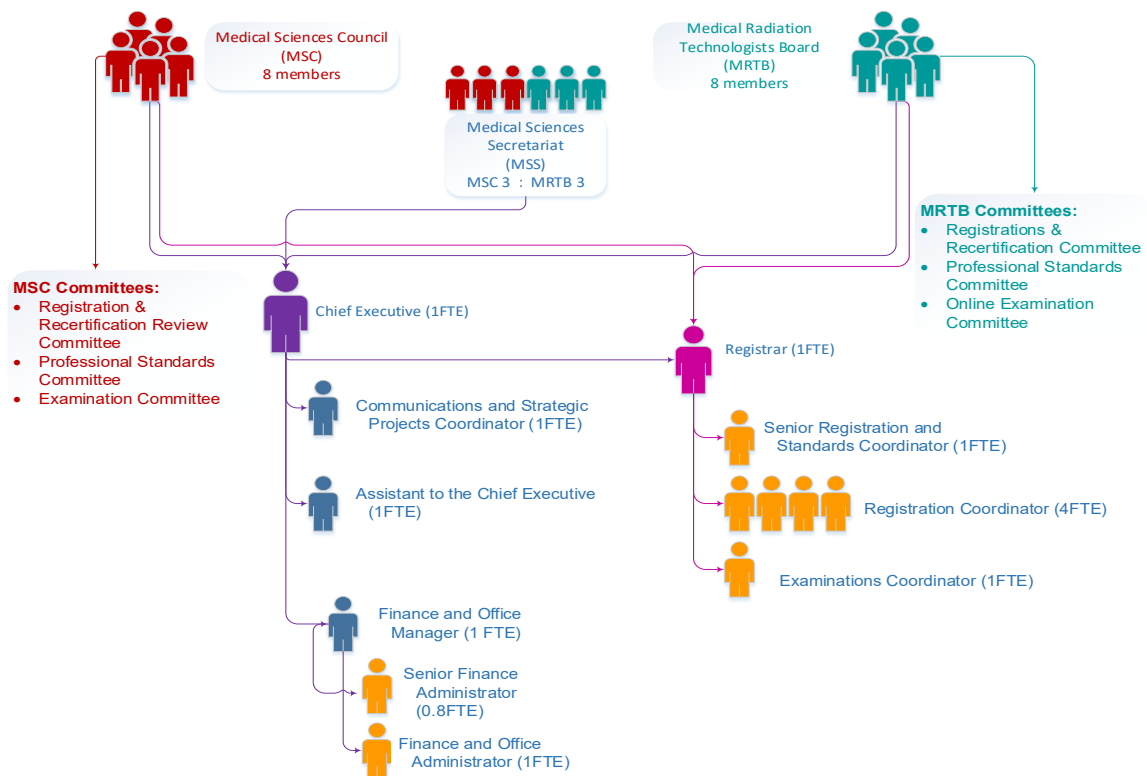
¹ An unabridged extract of section 118 of the Health Practitioners Competence Assurance Act 2003 is provided in Appendix 1

The Principles We Work Within



Organisational Structure

Secretariat services are provided through a New Zealand registered company, Medical Sciences Secretariat (MSS) that is jointly owned by two responsible authorities - the Medical Sciences Council and the Medical Radiation Technologists Board. This shared arrangement enables both responsible authorities to achieve efficiencies in terms of costs and consistency in regulatory standards. While each Council and Board is a separate responsible authority with legal responsibilities for the statutory regulation of different groups of health professionals, our strategic priorities and objectives are similar. Sharing secretariat resources enables both authorities to manage a number of strategic objectives and subsequent business goals as joint initiatives. Consequently our individual strategic planning documents share many similarities.



Our Strategic Directions over the Next Five Years

The Council has continued its theme of the four core strategic directions from its previous five-year strategic plan (2019-2025) for the next five-year period, April 2021 to March 2026. These directions articulate the areas of activity that will help us move from where we are now to what we need to achieve in meeting our regulatory responsibilities. Explicitly stating our strategic priorities helps us to balance resourcing our business-as-usual activities with directing resources into areas that will improve our effectiveness and efficiency.



Key Outcomes of Our Strategic Directions



Our Strategic Directions in Context

The social, political, economic and cultural environments within which medical laboratory science and anaesthetic technology practitioners work, continues to evolve. The Council's five-year strategic directions document for the period 2021-2026 has been formulated with a view to ensuring our work both now and in the foreseeable future continues to be responsive to the world within which medical laboratory science and anaesthetic technology is practised.

Utilising a strategic framework provides the Council with a focused approach for steering our regulatory work in a world typified by changing environmental influences. It allows us to continue to protect public safety in the years ahead through ensuring medical laboratory science and anaesthetic technology scopes of practice, standards, competencies, education, and remedial measures are sufficiently robust and responsive.

Strategic Direction 1: Standards

Appropriate and sustainable standards of clinical competence, cultural competence, and ethical conduct for the protection of public health and safety

Under the Act the Council is responsible for setting the standards of clinical competence, cultural competence, and ethical conduct. It is the sole organisation with the legal authority to do this for medical laboratory science and anaesthetic technology practitioners in New Zealand.

The standards of practice set by the Council provide the minimum threshold for competence and acceptable behaviour that registered medical laboratory science and anaesthetic technology practitioners must meet to ensure the protection of public health and safety.

The Council acknowledges Te Tiriti o Waitangi as the founding document of Aotearoa New Zealand and the importance it has in informing legislation, policy and practice. As tangata whenua of Aotearoa New Zealand, Māori hold a unique position in our society and the Council acknowledges and respects the specific importance of health services for Māori. The Council will work to improve cultural safety for patients and medical laboratory science and anaesthetic technology practitioners to help facilitate health equity.

Having clearly articulated competencies and standards of ethical conduct can help to inform patients and the public of what they can expect from registered medical laboratory science and anaesthetic technology practitioners. They also provide clarity to practitioners themselves about the standards they must meet.

The Council also employs mechanisms to ensure practitioners continue to meet the standards for ongoing fitness to practice. The Act includes specific provisions for the Council to respond to concerns that may be raised about an individual practitioner in terms of their competence, health, or conduct.

Strategic Priority 2: Practitioner Competence

Our regulatory frameworks support competent and flexible medical laboratory science and anaesthetic technology workforces both in the short and long term

Under the Act registered practitioners must firstly be registered and then recertified on an annual basis. The Council's registration and recertification mechanisms can assure the public that individual practitioners continue to be competent to practise. Registration requires practitioners to demonstrate they have an appropriate qualification to demonstrate they meet the minimum competencies required for the relevant scope of practice, to be able to practise in Aotearoa New Zealand. They must also demonstrate they meet fitness to practise requirements. Recertification covers a number of complementary strategies including annual renewal of practising certificates, and evidence of engagement in ongoing learning and professional development.

Flexibility across the medical laboratory science and anaesthetic technology workforces will be critical and the Council's regulatory framework will need to ensure practitioners continue to demonstrate competence in an ever-changing world of health demands and delivery.

Strategic Priority 3: Accountability

The Council engages with the public and stakeholders to raise awareness of our functions and responsibilities and ensure our strategic decisions are informed through consultative and collaborative processes

Health regulation does not occur in a vacuum. For many of our activities the Council is reliant on the participation of stakeholders including practitioners, patients and the public, educators, employers, professional bodies and other regulators. This helps us to ensure our activities remain appropriate, relevant, and consistent in regulating medical laboratory science and anaesthetic technology practices.

We operate in a world where there is increasing and continually changing societal expectations with respect to health care and health practitioners. The Council needs to understand the views of our stakeholders, and offer ongoing opportunities for people to tell us what they think about our work.

Anecdotal information indicates there is a gap in many of our stakeholders understanding of the Council's role and purpose. We need to continue to explain the range and limits of our responsibilities. This may require an increased level of visibility with some of our stakeholders.

Strategic Priority 4: Organisational Performance

Strong governance and operational structures and robust practices are in place to support the Council in achieving our legislative functions and responsibilities

Effective governance is essential for good decision-making and ensuring quality of our regulatory actions. This leads to better outcomes for the public and reasonable impacts for practitioners. Governance is concerned with roles and responsibilities, accountability measures, oversight of business processes, financial reporting, and risk and performance management. Reflective self-assessment can assist the Council with the ongoing monitoring of meeting their governance responsibilities.

Having the right capabilities in place is critical for ensuring the Council operates effectively and efficiently. Having the systems, policies and processes necessary for delivering our functions within an environment that minimises costs, compliance and complexity for practitioners underpins the Council's work.

The success of our work is dependent on having reliable and integrated IT systems to ensure we have the necessary functionality for operating effectively in the contemporary regulatory environment. This includes taking advantage of new technology and our partnership arrangement with the Medical Radiation Technologists Board to not only improve the way we operate, but also to improve the ways we interact with our stakeholders.

The Council's website is a core communication tool for ensuring the public, the professions, and stakeholders are well informed in respect of the Council's responsibilities and strategic and operational priorities and objectives. This will require ongoing investment to ensure the IT infrastructure, inclusive of website platforms, continues to serve the needs of the Council and users of the systems.

Under section 118 of the Act the Council has a duty to uphold the ethical conduct of practitioners and, as such, needs to provide ethical leadership in the custodianship of the current state of information security. With the increasing profile of data breaches, and the introduction of the Health Information Security Framework in 2015, information security is a critical component of the Council's quality monitoring programme. In addition the Council has other regulatory responsibilities to keep data safe, notably but not exclusively, the Privacy Act 1993 which was strengthened in 2020 with the enactment of a Privacy Bill becomes which includes the public naming of organisations which have significant data breaches.

The Council will continue to develop its quality management system and processes. This work is undertaken as a joint initiative with the Medical Radiation Technologists Board through our jointly-owned secretariat (MSS). It includes revising and improving our IT systems to support core regulatory and business functions, financial management, and information management. Furthermore, the Council operates within a world susceptible to the destructive impacts of climate change and has a key leadership role to manage its business operations in ways that are environmentally sustainable. The effects of climate change will likely impact on the health workforces of the future especially as health services respond to the effects of climate change on the health of Aotearoa New Zealand communities.

Over the span of this strategic plan the Council will engage in an ongoing programme of performance measurement. This will help us to better understand whether our strategies are fit for purpose and we have achieved/are achieving what we said we would. Our performance measures

framework will be developed and implemented as a joint initiative with the Medical Radiation Technologists Board. In accordance with the 2019 amendments to the Act, the Council will be subject to 5-yearly independent performance reviews commissioned through the Ministry of Health. The first of those reviews must be completed by April 2022.

Strategic Planning Environmental Influences

Health regulation is impacted by wider national and global factors such as economic, legislative and regulatory change, political, social and demographic, and technological change.

Adaptable and flexible governance will be critical in considering the impacts of these factors on health regulation.

Economic Factors

There is a global trend for demand for health services to be higher than the resources available. In 2020 this was exacerbated by the COVID-19 pandemic and it is reasonable to assume that the economic impact of this global phenomenon will continue for several years post-pandemic.

Economic factors the Council will need to consider in respect of its regulatory work include:

- An ongoing gap between available health resources and demands on health services.
- An ageing population will put increased pressure on health resources, and there is likely to be a corresponding trend in an ageing medical laboratory science and anaesthetic technology workforces.
- A significant reliance on being able to recruit well-trained medical laboratory science and anaesthetic technology practitioners from overseas is likely to be impacted by increasing global competition for trained health professionals.
- An expectation that quality standards will continue to improve, and there will be a reduction in both waiting times and adverse events, all within current public economic resources.

Legislative and Regulatory Change

The 2019 amendment to the Health Practitioners Competence Assurance Act (the Act) included a number of legislative changes that the Council will need to give effect to. These include:

- The ability to immediately suspend a practitioner's practising certificate where their conduct poses a risk of serious harm to the public.
- Removal of the mandatory referral of all conviction notices to a professional conduct committee (PCC), with the Council having an option to refer the notice to a PCC or to order some other form of assessment, treatment, therapy or counselling.
- The Council must undergo a performance review by April 2022 with subsequent reviews at no more than 5-years apart. Any recommendations from each review must be published in the Council's annual report and include any corrective actions the Council intends to take.
- To meet the requirement for the Council to provide the Director General of Health with specified workforce data, there will need to be a review of policies, procedures and systems to ensure we are able to obtain and store that data.
- Enactment of the Council's 2020 publication of its policy on naming practitioners in respect of an order or direction issued to a practitioner.

- The Council will need to review its regulatory frameworks to ensure there is appropriate inclusion of two significant amendments to the Board’s statutory functions (*amendment highlighted*):
 - o set standards of clinical competence, cultural competence (*including competencies that will enable effective and respectful interaction with Māori*), and ethical conduct to be observed by medical laboratory science and anaesthetic technology practitioners; and
 - o to promote and facilitate inter-disciplinary collaboration and cooperation in the delivery of health services (*new*).

In addition to the 2019 amendments to the Act, other legislative changes under development and/or recently enacted will also have an impact on the Council’s work. These include:

- The 2020 amendment to the Privacy Act 1993 which includes increased penalties for privacy information breaches. A review of Council policy and procedures will be required.
- Proposed reforms to the Secondary Legislation Bill could come into effect by mid-2021. A component of the proposed changes would classify Council-issued standards as secondary legislation. This would see Council standards being subject to potential parliamentary review and disallowance. The Council will need to ensure compliance with these reforms should they go ahead.

Political Factors

The Council considers its strategic directions as set out in this document are consistent and in sync with the *New Zealand Health Strategy*. The latter sets the high level direction for New Zealand’s health system over the ten years from 2016 to 2026. The strategy embraces five strategic themes of *people-powered; closer to home; value and high performance; one team; and smart systems*

In 2020 a New Zealand Health and Disability System Review (commonly referred to as *The Simpson Report*) recommended to the Government that a number of wide-ranging changes are made to enable a stronger and sustainable health system, and more equitable outcomes for all New Zealanders. From a regulatory perspective the report calls for responsible authorities to move towards more interdisciplinary, flexible, consumer-focused and competency-based approaches to regulation over the next five years after which time there should be a review of the effectiveness of these voluntary changes.

There is opportunity and challenge for the Council to review its regulatory frameworks as a component of this strategic plan to foster alignment with the principles as articulated in the Simpson report.

Social and Demographic Factors

New Zealand’s population not only continues to grow, future demographics are typified by an increased proportion of older people who live longer, have more complex conditions, and who will require long-term health care which is being increasingly provided through primary and community-based health services.

The Council will need to give consideration to a number of factors that may impact on its regulatory frameworks including:

- Changes in the demographics of the New Zealand medical laboratory science and anaesthetic technology workforces.
- Changing work patterns of practitioners including increased demands for more flexible working arrangements.
- Recruitment and retention issues within particular regions.
- Public expectations for immediate access to good health care irrespective of where they live.
- The importance of cultural safety to appropriately respond to the changing demographics of New Zealand.
- Ensuring effective working relationships between the health and education sectors and professional bodies.
- The impact of global pandemics on the delivery of health services and regulatory processes.

Technological Change

Technological advances are evolving rapidly with potential to change models of health care and regulatory frameworks.

Consideration will need to be given to:

- The ability for technology to provide faster and more accurate diagnosis of conditions and the impact for clinical practices to become outdated more rapidly.
- The rapid and widespread automation of diagnostic laboratory services and the impact of that for the configuration of scopes of practice.
- Cutting edge digital platforms and improved operational efficiencies and the impact of that for the delivery of health care and regulatory services.
- Improved communication and easier collaboration both within the medical laboratory science and anaesthetic technology professions and with other health professions.
- Analysis and interpretation of regulatory data to demonstrate risks and trends and show the effectiveness of frameworks and initiatives.

Appendix 1: The Health Practitioners Competence Assurance Act 2003: Section 118

The functions of each authority appointed in respect of a health profession are as follows:

- (a) To prescribe the qualifications required for scopes of practice within the profession, and, for that purpose, to accredit and monitor educational institutions and degrees, courses of studies, or programmes;
- (b) To authorise the registration of health practitioners under this Act, and to maintain registers;
- (c) To consider applications for annual practising certificates;
- (d) To review and promote the competence of health practitioners;
- (e) To recognise, accredit, and set programmes to ensure the ongoing competence of health practitioners;
- (f) To receive and act on information from health practitioners, employers, and the Health and Disability Commissioner about the competence of health practitioners;
- (g) To notify employers, the Accident Compensation Corporation, the Director-General of Health, and the Health and Disability Commissioner that the practice of a health practitioner may pose a risk of harm to the public;
- (h) To consider the cases of health practitioners who may be unable to perform the functions required for the practice of the profession;
- (i) To set standards of clinical competence, cultural competence (including competencies that will enable effective and respectful interaction with Māori), and ethical conduct to be observed by health practitioners of the profession;
- (j) To liaise with other authorities appointed under this Act about matters of common interest;
- (ja) To promote and facilitate inter-disciplinary collaboration and cooperation in the delivery of health services;
- (k) To promote education and training in the profession;
- (l) To promote public awareness of the responsibilities of the authority;
- (m) To exercise and perform any other functions, powers, and duties that are conferred or imposed on it by or under this Act or any other enactment.