

29 May 2024

Health Select Committee
Parliament Buildings
Parliament 6011

Tēnā koutou katoa,

The Council of Medical Colleges (CMC) is writing to the committee to correct statements made in the 2022/23 Annual review of Health New Zealand/Te Whatu Ora. The Council of Medical Colleges is the collective voice of all eighteen medical colleges in New Zealand, who provide support to over 9000 medical practitioners.

Unfortunately, the report makes a number of inaccurate statements that were subsequently reported on in the media and as currently published on the Parliament website, stands as the official record.

It is important to clarify that medical colleges are post-graduate vocational training organisations which are responsible for the training, examination and recertification of medical practitioners (doctors) in specific medical specialities. In New Zealand, the colleges' role starts after a medical student has completed their six year medical degree, gained general registration with medical council, and enters their post-graduate training.

Medical colleges are not responsible for:

- The number of student places available at medical school and their decisions around post-graduate specialities
- The registration of international medical graduates to work in the New Zealand health system
- FTE positions available in the New Zealand public health system
- Wages and conditions as set out in contracts or collective agreements which are an integral part of any discussion around workforce retention.

CMC recognises the current challenges around medical practitioner workforce numbers and retention. We are currently working with Health New Zealand/Te Whatu Ora on short-term and long-term proposals on training pathways (where medical colleges play a role) to encourage retention of our homegrown post-graduate medical workforce and support returnees.

It is important to emphasise to the Committee that if New Zealand wishes to grow its medical workforce then it relies on a number of factors, most importantly:

- The number of places available at medical school (Government-funded places at universities)
- Employment offer (Health New Zealand/Te Whatu Ora, Primary Health Care)
- Number of funded training positions
- Salary and conditions (Health New Zealand/Te Whatu Ora, Primary Health Care)

Australasian College
for Emergency
Medicine (ACEM)

College of Intensive Care
Medicine of Australia and
New Zealand (CICM)

New Zealand College of
Sexual and Reproductive
Health (NZCSRH)

Royal Australasian College
of Medical Administrators
(RACMA)

Royal Australian and New
Zealand College of Obstetricians
and Gynecologists (RANZCOG)

Royal College of
Pathologists of
Australasia (RCPA)

Australasian College of
Sport and Exercise
Physicians (ACSEP)

New Zealand College of
Musculoskeletal Medicine
(NZCMM)

Royal Australasian College
of Physicians
(RACP)

Royal Australasian
College of
Surgeons (RACS)

Royal Australian and New
Zealand College of
Psychiatrists (RANZCP)

Royal New Zealand
College of General
Practitioners (RNZCGP)

Australian and New
Zealand College of
Anesthetists (ANZCA)

New Zealand College of
Public Health Medicine
(NZCPHM)

Royal Australasian
College of Dental
Surgeons (RACDS)

Royal Australian and New
Zealand College of
Ophthalmologists (RANZCO)

Royal Australian and New
Zealand College of
Radiologists (RANZCR)

Royal New Zealand
College of Urgent Care
(RNZCUC)

- Registration of international graduates (Medical Council of New Zealand)
- Quality training pathways and environment (medical colleges and Health New Zealand/Te Whatu Ora)

Any plan to grow New Zealand’s medical workforce needs to include all the above.

The inaccurate claims in relation to the Council of Medical Colleges and the colleges in the report are as follows:

<p>“We asked HNZ whether anything could be done from a government policy position to recruit foreign nurses more quickly. HNZ noted that medical colleges have a key role to play.” (Page 13, para 4).</p>	<p>Medical Colleges are not responsible for the nursing workforce. They are responsible for post-graduate specialist training of medical practitioners (doctors).</p>
<p>“Medical colleges, like the Nursing Council, are also responsible for accrediting international health professionals before they can work in New Zealand.” (Page 13, para 7).</p>	<p>The Nursing Council is not a medical college.</p> <p>The Medical Council of New Zealand (MCNZ) is the regulatory authority for granting medical registration in Aotearoa New Zealand.</p> <p>MCNZ set the entry criteria for vocational registration (working in a specialty). If the criteria is met then generally an interview will take place with the relevant college to establish the equivalence of the doctor’s qualifications, training and experience. They will give their feedback to the MCNZ who then makes the final decision including fitness to practice etc.</p> <p>As with all jurisdictions, it is critical that a standard is set that meets the specific and unique needs of the population that any health professional is working in. Our standard should be no less stringent than that of comparable jurisdictions.</p> <p>It is important to note that in 2023, 1134 international medical graduates who applied were approved for registration by MCNZ and 10 were formally declined. At the same time 559 home grown medical graduates were registered.</p>
<p>“We learnt that New Zealand’s process for accrediting foreign medical practitioners is</p>	<p>MCNZ is responsible for the registration of medical practitioners that allows them to</p>



<p>slow compared to Australia. HNZ said it recently met with the Council of Medical Colleges, which represents 17 medical colleges, to discuss accelerating the pipeline for training and bringing people into the country.” (Page 13, para 8).</p>	<p>practise in New Zealand. The process itself is not the responsibility of medical colleges (and there are now 18).</p>
<p>“We fully support HNZ’s efforts to increase the volume of medical trainees and speed up accreditation. New Zealand is competing with Australia to attract talent from the northern hemisphere and needs to position itself competitively. We encourage the medical colleges to work collaboratively with HNZ to achieve this.” (Page 13, para 9)</p>	<p>As above. Noting that employment conditions and funded training places are also a key variable in this.</p> <p>The CMC are working with Health New Zealand/Te Whatu Ora on aspects CMC can influence.</p>
<p>“We consider that the medical colleges could do more to address workforce shortages and grow the medical workforce that New Zealand needs. We respect that medical colleges are self-regulated; however, we implore them to use every tool available to speed up the accreditation process and enable more medical students to be trained and qualified.” (Page 13, para 10).</p>	<p>The sentence conflates two different groups:</p> <ol style="list-style-type: none"> 1) Registration of international medical graduates (MCNZ) who have already received their degree qualification (overseas); and 2) Medical students who are still undertaking their training. <p>To increase the number of medical students there needs to be an increase of Government-funded places at the universities and an increase in internship placements. The degree is six years with the sixth year being a trainee intern year.</p> <p>Generally, in the seventh year - the graduate doctor (who has been granted provisional registration by MCNZ) applies to become a House Officer for 12 months (through the ACE system). A paid role is usually offered by Health NZ/Te Whatu Ora.</p> <p>After 12 months as a House Officer, then the doctor can apply for general registration (full registration is required from MCNZ). Following their second postgraduate year after completing MCNZ requirements doctors can apply to enter one of the colleges training programmes for specialisation. In order to train the increase in registrars coming out of universities, Health NZ/Te Whatu Ora will</p>

Australasian College for Emergency Medicine (ACEM)

College of Intensive Care Medicine of Australia and New Zealand (CICM)

New Zealand College of Sexual and Reproductive Health (NZCSRH)

Royal Australasian College of Medical Administrators (RACMA)

Royal Australian and New Zealand College of Obstetricians and Gynecologists (RANZCOG)

Royal College of Pathologists of Australasia (RCPA)

Australasian College of Sport and Exercise Physicians (ACSEP)

New Zealand College of Musculoskeletal Medicine (NZCMM)

Royal Australasian College of Physicians (RACP)

Royal Australasian College of Surgeons (RACS)

Royal Australian and New Zealand College of Psychiatrists (RANZCP)

Royal New Zealand College of General Practitioners (RNZCGP)

Australian and New Zealand College of Anesthetists (ANZCA)

New Zealand College of Public Health Medicine (NZCPHM)

Royal Australasian College of Dental Surgeons (RACDS)

Royal Australian and New Zealand College of Ophthalmologists (RANZCO)

Royal Australian and New Zealand College of Radiologists (RANZCR)

Royal New Zealand College of Urgent Care (RNZCUC)

	<p>need to fund additional training places in the programmes. Of note, not all vocational training places are funded.</p> <p>It is also important to note that colleges are not self-regulated. Medical colleges are self-governed but are accredited by the Australian Medical Council and MCNZ based on accreditation standards required of colleges.</p>
<p>“We consider it crucial that HNZ works with the medical colleges to ensure that there is a sufficient pipeline of GPs in training to backfill planned retirements.” (Page 15, para 3).</p>	<p>There are 18 colleges in New Zealand for each specialty. The Committee is referring to the Royal New Zealand College of General Practitioners.</p> <p>The CMC supports a wider system view not just the GP pipeline when it comes to primary care. Strengthening the primary care system and supporting preventative public health measures are critical elements.</p>

As laid out in the above table, the 2022/2023 Annual Review of Health New Zealand/Te Whatu Ora incorrectly assigns responsibility to medical colleges for medical student numbers, registration to practise in New Zealand for international medical graduates, and nurses.

Given that the existing published report will likely be used as an authoritative source of information on New Zealand’s health workforce issues, we ask that the Committee opens a briefing specifically on Health New Zealand’s/Te Whatu Ora 2022/23 Annual Review section on workforce that corrects the existing record. We also urge that the Committee asks for a robust fact-checking process in place from officials on summary reports of their proceedings.

Nāku noa, nā



Dr Samantha Murton
 Chair of the Council of Medical Colleges

-
- Australasian College for Emergency Medicine (ACEM)
 - College of Intensive Care Medicine of Australia and New Zealand (CICM)
 - New Zealand College of Sexual and Reproductive Health (NZCSRH)
 - Royal Australasian College of Medical Administrators (RACMA)
 - Royal Australian and New Zealand College of Obstetricians and Gynecologists (RANZCOG)
 - Royal College of Pathologists of Australasia (RCPA)
 - Australasian College of Sport and Exercise Physicians (ACSEP)
 - New Zealand College of Musculoskeletal Medicine (NZCMM)
 - Royal Australasian College of Physicians (RACP)
 - Royal Australasian College of Surgeons (RACS)
 - Royal Australian and New Zealand College of Psychiatrists (RANZCP)
 - Royal New Zealand College of General Practitioners (RNZCGP)
 - Australian and New Zealand College of Anesthetists (ANZCA)
 - New Zealand College of Public Health Medicine (NZCPHM)
 - Royal Australasian College of Dental Surgeons (RACDS)
 - Royal Australian and New Zealand College of Ophthalmologists (RANZCO)
 - Royal Australian and New Zealand College of Radiologists (RANZCR)
 - Royal New Zealand College of Urgent Care (RNZCUC)