

HOUSE OF REPRESENTATIVES

Supplementary Order Paper

Tuesday, 27 April 1993

HEALTH AND DISABILITY SERVICES BILL

Proposed Amendments

Rt. Hon. HELEN CLARK, in Committee, to move the following amendments:

Clause 2: To omit the definition of the term "board" (lines 34 to 37 on page 4).

To omit the definition of the term "director" (lines 4 to 7 on page 5).

To omit the definition of the terms "Crown health enterprise" and "enterprise" (lines 1 to 4 on that page).

To insert, after line 11 on that page, the following new definition:

"District health service" means a body corporate established by health boards in accordance with section 24J of this Act:

To insert, after paragraph (g) of the definition of the term "good employer" on that page, the following new paragraph:

(ga) Maintenance by employees of proper standards of integrity, conduct and concern for the public interest; and.

To insert, after line 37 on that page, the following new definition:

"Health board" and "board" mean a body corporate established by Order in Council in accordance with section 5H of this Act:

To omit the definition of the term "Minister for Crown Health Enterprises" (lines 42 to 45 on page 5 and lines 1 and 2 on page 6).

To omit the definition of the term "Public Health Commission" (lines 11 to 13 on that page).

To omit the definition of the terms "regional health authority" and "authority" (lines 26 to 28 on that page).

New clause 3A: To insert, after clause 3, the following new clause:

3A. Treaty of Waitangi—In achieving the Crown's objectives under section 7 of this Act, all persons exercising functions and powers under it shall take into account the principles of the Treaty of Waitangi (Te Tiriti o Waitangi).

| "The Residual Health Management
Unit."

To omit from the amendment to section 8 (2) of the Misuse of Drugs Act 1975 on page 156, the words "Crown health enterprise", and substitute the words "district health service".

To omit from the amendment to section 20 (3) of the Misuse of Drugs Act 1975 on page 157, the words "regional health authorities", and substitute the words "health boards".

To omit the amendment to the First Schedule of the Official Information Act 1982 on page 176, and substitute the following amendment:

| By inserting in the First Schedule (as substituted by section 23 (1) of the Official Information Amendment Act 1987), in their appropriate alphabetical order, the following items:
"District health services.
"Health Boards.
"Residual Health Management Unit."

To omit from the amendment to section 2 of the Civil Defence Act 1983 on page 177, the words "Crown health enterprise", and substitute the words "district health service".

To insert, after the amendment to Part I of the Second Schedule to the Local Government Official Information and Meetings Act 1987 on that page, the following amendment:

| By inserting in Part I of the Second Schedule (as substituted by section 7 (1) of the Local Government Official Information and Meetings Amendment Act 1991), in their appropriate alphabetical order, the following items:
"District health services.
"Health boards."

To omit from the amendment to clause 9 of Part I of the First Schedule to the Rating Powers Act 1988 on page 178, the words "Crown health enterprise" in both cases where they appear, and substitute in each case the words "district health service".

To omit from the definition of the term "service" (page 186) being substituted in section 2 of the Mental Health (Compulsory Assessment and Treatment) Act 1992, the words "regional health authority or person declared to be a purchaser under section 6 (c) of", and substitute the words "health board under".

Seventh Schedule: To omit Part III of the Seventh Schedule on pages 192-195.

Title: To omit all the words after the words "**An Act**", and substitute the following words:

to provide a public system of world-class health and disability services, by—

- (a) Providing and planning public health services, based on public health needs; and**
- (b) Ensuring the delivery of health and disability services based on need, rather than income or profit**

EXPLANATORY NOTE

This Supplementary Order Paper outlines amendments to the Health and Disability Services Bill that the Labour Opposition considers are necessary to ensure an integrated, accountable, and democratic health system. It is designed to ensure public health programmes are not marginalised, but are instead brought into the mainstream of the health system. The amendments ensure that the public health system will be clearly focused on improving the health status of all New Zealanders, and on providing quality services.

Under these amendments, public hospitals will not be run on a competitive, profit-oriented model. The legislation, as amended by this Supplementary Order Paper, will promote the delivery of integrated health services based on need, rather than profit.

Under the Bill as it currently stands, the core public health function of health promotion and disease prevention will be vested in the Public Health Commission. That would be a costly and wasteful division of responsibilities. This Supplementary Order Paper proposes to return the health promotion function to the Department of Health. Health promotion will become a top priority of the Department of Health.

Staff appointed to the Public Health Commission will retain a distinct identity within the Department of Health. References to the Public Health Commission as a separate organisation are removed by this Supplementary Order Paper.

NEW PART IIA
Health Boards

Health boards are detailed in the proposed Part IIA.

The Supplementary Order Paper replaces regional health authorities with six or more health boards. The boards will consist of a majority of elected members, and a minority of members appointed by the Minister of Health.

Health boards will be responsible for co-ordinating the planning, provision, monitoring and evaluation of comprehensive health services across the regions. That means that the objectives and functions of the regional health authorities will be extended to include responsibility for the public health function, and to ensure that the boards are region-wide co-ordinators of the broad spectrum of health services.

No alternative health care plans competing with the health boards will be permitted under this Supplementary Order Paper. Consequently, clause 6 (c) in Part I of the Bill is omitted by these amendments.

NEW PART IIB
District Health Services

The operation of district health services is specified in the proposed new Part IIB.

Crown health enterprises will have no place under the structure planned by the Opposition. The amendments replace the profit-oriented enterprises with district health services, which will be owned by the health boards.

District health services will have their own local boards of management, appointed by the health boards, after consultation with the local communities.

The meetings of both the health boards and the management boards of the district health services shall be open to the public.

This Supplementary Order Paper deletes all references to regional health authorities and Crown health enterprises, and where appropriate, replaces them with health boards and district health services respectively.

Other Amendments

Other notable features of this Supplementary Order Paper are detailed below.

New clause 3A: Recognition of the principles of the Treaty of Waitangi is a vital component of the Opposition's policies. It is appropriate therefore, that reference to Te Tiriti be included in this Supplementary Order Paper, so that health administrators may take it into account in the decision-making processes.

Clause 5: The Opposition does not propose to continue with the Core Committee on Health and Disability Services. Setting priorities for public funding in health should be the responsibility of central government and the health boards, in consultation with the community.

New clause 9A: This clause proposes to give legislative protection to free health services in special areas. The special areas are generally isolated, have low socio-economic levels, and poor health status. This clause will ensure that special area status is maintained in those areas which presently have it.

New clause 38A: In a similar manner to the proposed clause 3A, the Opposition wishes to ensure that matters of serious concern to Maori regarding Te Tiriti are

not ignored by this legislation. In particular, this clause is concerned with the transfer of assets and liabilities.

Clause 58: The amendment to this clause is intended to maintain the legislative guarantees of medical benefits available under Part II of the Social Security Act 1964. The Government's legislation gives no guarantees on future subsidy arrangements.

Clause 62: For similar reasons to those stated with respect to clause 58, the Opposition seeks to prevent the repeal of Part II of the Disabled Persons Community Welfare Act 1975. This Act gives a comprehensive recognition of the needs of people with disabilities.

Sixth Schedule: The proposed amendments to the Sixth Schedule include amendments to the Physiotherapy Act 1949. Members of the New Zealand Private Physiotherapists Association have expressed concern to the Opposition regarding the structure of the Physiotherapy Board, its disciplinary powers, and the absence of any provisions to set its own fees. The amendments set out in the Schedule propose to address these concerns.