

Submitted to About the Act and Code Review  
Submitted on 2024-08-13 02:27:57

Your details

1 What is your name?

Name:

[Redacted]

2 What is your email address?

Email:

[Redacted]

3 Are you submitting as an individual, or on behalf of an organisation or group?

I am submitting as an individual

4 How did you hear about this consultation?

Select from the following options:

Social media

If you selected other, please specify below:

Questions for individuals

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

Questions for organisations/groups

1 Name of your organisation or group (if applicable)

Organisation:

2 Type of organisation/group (if applicable)

Organisation - type of organisation/group/ropū :

Please feel free to provide any further detail below:

Share 'one big thing' or upload a file

## 5 Are you here to tell us your 'one big thing'?

Your one big thing::

The current complaints process is incredibly stressful and blaming towards individual healthcare workers. Sometimes there may be one or two people at fault but usually they are part of a system that is letting them and patients down. They are working long hours with unrealistic expectations (from the employers and clients) and substandard conditions or equipment. There is little blame on the IT services, the managers, the government, the funding etc. Instead it feels like a witch hunt. No 'innocent until proven guilty' in the current HDC and very little support apart from platitudes about 'we take it all seriously'. Healthcare workers are driven to anxiety, depression, leave the profession and even suicide. Just the investigation is a cruel and unreasonable punishment.

I believe patients should always be able to have the ability to use their experiences to improve the public system, but not at the expense of the mental health of individual workers.

A no fault system, a 'beyond reasonable doubt' for individual blame, and a focus on the intolerable systems that we now find ourselves working in rather than the tiny slip ups we are always going to make.

Research has shown that practicing defensive medicine is bad for patients and bad for costs. Your current system encourages this.

Find a different, more humane way of building trust, improving the system and avoiding individual blame. Do not have a punitive or vengeful process as it currently is. Do not let a healthcare worker be harmed in your processes as you seek to avoid harm to others.

## 6 Upload a file

File upload:

No file uploaded

Not Answered

## Topic 1: Supporting better and equitable complaint resolution

### 1.1 Did we cover the main issues about supporting better and equitable complaints resolution?

Please add your response below:

### 1.2 What do you think of our suggestions for supporting better and equitable complaint resolution, and what impacts could they have?

Please add your response below:

Consider the needs of both sides of the complaints process, not just the complainant. Your current system is injuring healthcare workers and means they leave the workforce.

Resolution is not punishment and focus entirely on the rights of the complainant means the healthcare worker is blamed and may never work again.

If you must focus entirely on the rights of the complainant, then the response should be at a systems level, not an individual level.

Continuing down this road may lead to no healthcare system at all due to workers being too scared and too injured to work in it.

The HDC is part of the problem.

### 1.3 What other changes, both legislative and non-legislative, should we consider for supporting better and equitable complaint resolution?

#### 1.3 changes - supporting better and equitable complaint resolution:

Better complaint resolution must stop blaming individuals. This is not based on the research around resolution and restoration, it is vengeful and harmful.

Legislative change could include protection for those working in an underfunded and broken system.

## Topic 2: Making the Act and the Code more effective for, and responsive to, the needs of Māori

### 2.1 Did we cover the main issues about making the Act and Code more effective for, and responsive to, the needs of Māori?

Please add your response below:

### 2.2 What do you think about our suggestions for making the Act and the Code effective for, and responsive to, the needs of Māori, and what impacts could they have?

Please add your response below:

### 2.3 What other changes, both legislative and non-legislative, should we consider for making the Act and the Code effective for, and responsive to, the needs of Māori?

Please add your response below:

## Topic 4: Considering options for a right of appeal of HDC decisions

### 4.1 Have we covered the main issues about considering options for a right of appeal of HDC decisions?

Please add your response below:

### 4.2 What do you think about our suggestions for considering options for a right of appeal of HDC decisions, and what impact could they have?

Please add your response below:

### 4.3 What other options for a right of appeal of HDC decisions, both legislative and non-legislative, should we consider?

Please add your response below:

## Publishing and data protection

May we publish your submission?

Yes, you may publish my submission

Please note any part(s) of your submission you do not want published::

Reasons to withhold parts of your submission

Yes, I would like HDC to consider withholding parts of my submission from responses to OIA requests.:

No

I think these parts of my submission should be withheld, for these reasons: :

If needed, can we to contact you to follow up for more detail on your submission?

Yes, you can contact me

Would you like to receive updates about the review?