Act and Code Review consultation questions | Ngā pātai matapakinga

This document contains all the questions we are asking as part of the Act and Code Review consultation. Aside from the required questions, you can answer as many or as few as you'd like. When completed, please either email it to review@hdc.org.nz or post it to us at PO Box 1791, Auckland, 1140.

Please visit https://review.hdc.org.nz to answer these questions online.

Your details (required)

It's important for us to know a bit about you so that we understand whose views are being represented in submissions. It helps us to make sure that any changes we recommend will work well for everyone and have an equitable impact.

1. What is your i	name?		
Howard William	NORTON		
2. What is your o	email address?		
3. Are you subr group?	nitting as an individ	ual, or on behalf of an	organisation or
	ing as an individual g on behalf of an org	2	
4. How did you l	near about this cons	sultation? (please sel	ect)
		□ Social media □ Other (please speci	

Please answer the following questions **if you are submitting as an individual**. If you are submitting on behalf of an organisation or group, please go to page 3.

Which of these services do you engage with the most? (Please select all that apply)
What is your gender?
How old are you?
What is your ethnicity? (Please choose all that apply)

Do you identify as having a disability?
f you are submitting on behalf of an organisation or group:
What is the name of your organisation or group?
N/A
What type of organisation/group is it?
□ Consumer organisation/group (please specify below) □ Iwi/ Māori organisation/group (please specify below)
☐ Health and/or disability services provider (please specify below)
□ Central Government
□ Local Government
□ University/Academic
□ Other (please specify below)
Please feel free to provide any further detail:
N/A
<u> </u>

Share 'one big thing'

This survey contains structured questions that ask for your feedback on each chapter in our consultation document. If you would prefer to give us your feedback as a whole, by telling us 'one big thing' – you can do so below.

If this is all you want to provide by way of your submission, that's fine by us. We will consider all the submissions we receive.

What is your 'one big thing'?

HDC 's Standard operating procedure – that it's findings, no matter how egregious are not reviewable or able to be challenged. Along with the ACC bar on any action to recover costs for any treatment injury, protects not only surgeons who make nonest, unavoidable errors, but also those who are are not.

It does not provide for an independent review of an orthopaedic procedure by another, not another one from the same pool of orthopaedic surgeons.

Having five operations on my right hip joint, with a number of miss-steps in the procedures carried out by the one surgeon that has left me with and implant 15 degrees internal rotation of the last femur stem implant, a second broken drill bit with some possibly infected bone cement, deliberately driven down above my knee joint – a stem implant driven out the side of my femur – and unrecorded fracture and proken piece of my femur.

The first second opinion I saw (under ACC) did not examine me, would not operate over another surgeon.

The second orthopaedic opinion sought by HDC is unbelievable, is biased in opinion that ignores X-rays in any format, including those in medical imagining format that clearly show the damaged caused to my femur and the end of the prothetic stem being out the side of my femur, by the window he had cut in operation three, to extract the first broken drill bit, and not as the operation surgeon insists, was out the back where he could be excused for not seeing it. The whole tone of this reviewers report excuses all the first surgeons errors as mere happen chance, where in sum

they illustrate the carelessness of which I complained. He details the correct orocedure for replacement of an infected hip, then he finds finds that the first surgeon did not complete the procedure, that he did no wrong.

consider it wrong for the HDC to consider this third orthopaedic surgeons review to be "expert advice". That is a semi judicial term and description of a witness whom all agree is an expert in an acknowledged field and who is expected to give unbiased testimony, not weighted to either party.

This is a brief outline of what was not 'standard best practice" - and the cascade of errors that from the third intervention left me reliant unable to mobilise without support – or able to carry something in both hands, walk on a beach, et along exercise, run or jog. by another, not another one from the same pool of orthopaedic surgeons.

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1.1: Did we cover the main issues about supporting better and equitable complaints resolution? Having an avenue to resolve issues where the HDC pays more attention, at east respect, to evidence a layman can illustrate clearly, for example X-ray mages, and less to the "experts" opinion that Laser prints are irrelevant and even Medical Imaging files are also irrelevant unless they are viewed on a medical x-rays projecting device.

1.2: What do you think of our suggestions for supporting better and equitable
complaints resolution, and what impacts could they have?
Get on with it.
have waited over three years for a HDC "provisional decision" and to find it
ailing in the above regard.
can see where it has grasped it's expert's opinion as an excuse to end this
saga, without using others judgements, or even it's own, if it was forced to explair
why what was plain on a X-ray image, is not real, or needed superior eyesigh
only their "expert" could interpret correctly.

1.3: What other changes, both legislative and non-legislative, should we consider for supporting better and equitable complaints resolution?
Publish all the complaints.

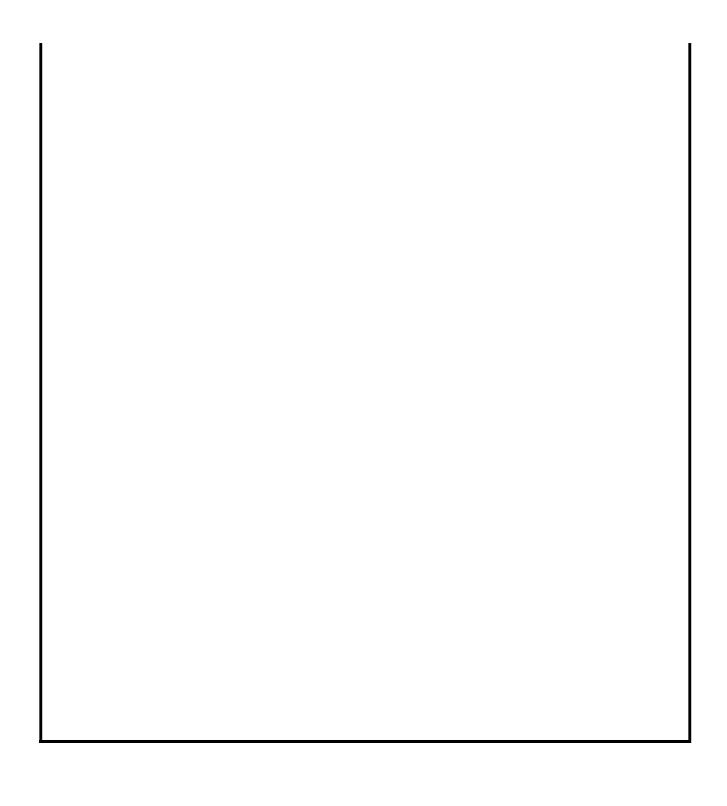
Topic 2: Making the Act and Code more effective for, and responsive to, the needs of Māori

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

Make sure Māori values are considered relevant to any complaint resolution.

2.2: What do you think about our sugges nore effective for, and responsive to, could they have?	_
Make sure Māori values are considered	d relevant to any complaint resolution.

eeds of M	aori?							
Make esolution.	sure	Māori	values	are	considered	relevant	to an	y complair



Topic 3: Making the Act and the Code work better for tāngata whaikaha | disabled people

β.1: Did we cover the main issues about making the Act and the Code wo
better for tāngata whaikaha disabled people?
By reviewing the desk files, the one covering HDC standard operatir
procedures. At present, complaints are reviewed for the HDC by a self selection
of Surgeons fro New Zealand's relatively small, collegiate pool of specialists.
Overseas specialist are available to give opinions (on such aas my complaint) b
are wary of giving advce in case they get involved in messy court procedures. A
authoritive approach from such as the HDC could satisfy this – by informing the
of the statute bar on suing for treatment injuries.
B.2: What do you think of our suggestions for making the Act and the Coo
work better for tāngata whaikaha disabled people, and what impacts cou
they have?
Make sure Māori values are considered relevant to any complaint resolution

3.3: What other changes should we consider (legislative and non-legislative) for making the Act and the Code work better for tāngata whaikaha | disabled people?

Make sure Māori values are considered	relevant to any complaint resolution.

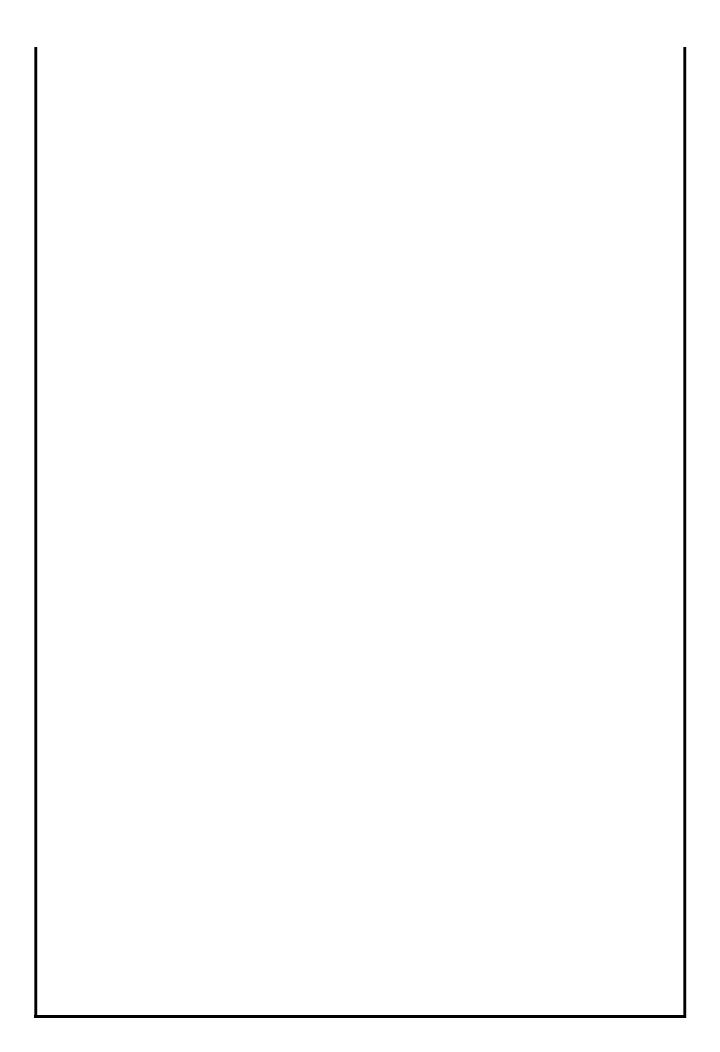
Topic 4: Considering options for a right of appeal of HDC decisions

4.1: Did we cover the main issues about considering options for a right of
appeal of HDC decisions?
Making the HDC decisions appealable is one step – provisioning the process is the second.
At present a Judicial review is the only recourse, but they are only concerns failing in law.
There is a Prison Ombudsman for inmates, why not a similar provision for challenging apparently egregious decisions by the HDC?

4.2: What do you think about our suggestions for considering options for a right of appeal of HDC decisions, and what impacts could they have?
As in 4:1 above

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

Review the HDC desk file/SOP and have it encompass the use of truly "expert Advisor" to review complaint files - this may mean using overseas internationa experts who are truly independent of our local small orthopaedic collegiate.



Topic 5: Minor and technical improvements

5.1: What do you think about the issues and suggestions for minor and technical improvements , and what impacts could they have?
See 4:3 above.
5.2: What other minor and technical improvements , both legislative and non- egislative, should we consider?
See 4:3 above

5.3: What are your main concerns about advancing technology in relation to the
rights of people accessing health and disability services?
Ights of people accessing health and disability services:
None.
5.4: What changes, both legislative and non-legislative, should we consider to
respond to advancing technology?
Get all medical data storage and retrieval systems on the same hooh.



Publishing and data protection

This section provides important information about the release of your information.

Please read it carefully.

You can find more information in the Privacy Policy at hdc.org.nz.

Being open about our evidence and insights is important to us. This means there are several ways that we may share the responses we receive through this consultation. These may include:

Publishing all, part or a summary of a response (including the names of respondents and their organisations)

Releasing information when we are required to do so by law (including under the Official Information Act 1982

Publishing permission

May we publish your submission? (Required)

X Yes, you may publish any part of my submission

- □ Yes, but please remove my name/my organisation/group's name
- □ No, you may not release my submission, unless required to do by law

Please note any parts of your submission you do not want published:



Reasons to withhold parts of your submission

HDC is subject to the Official Information Act 1982 (The OIA). This means that when responding to a request made under the OIA, we may be required to disclose information you have provided to us in this consultation.

Please let us know if you think there are any reasons we should not release information you have provided, including personal health information, and in particular:

which part(s) you think should be withheld, and the reason(s) why you think it should be withheld.

We will use this information when preparing our responses to requests for copies of and information on responses to this document under the OIA.

Please note: When preparing OIA responses, we will consider any reasons you have provided here. However, this does not guarantee that your submission will be withheld. Valid reasons for withholding official information are specified in the Official Information Act.

□ Yes, I would like HDC to consider withholding parts of my submission from responses to OIA requests.
think these parts of my submission should be withheld, for these reasons:
N/A.

Follow up contact

f needed, can we contact you to follow up for more detail on your submission? (required)

K Yes, you can contact me - please - on "WhatsApp"



□ No, do not contact me

Further updates

Would you like to receive updates about the review?

X I'd like to receive updates about the review

□ I'd like to receive updates from HDC about this and other mahi

Thank you

We really appreciate you taking the time to share your thoughts with us. If you have provided your details, we'll keep you updated on progress. If not, feel free to check our consultation website https://review.hdc.org.nz for updates or to contact us if you have any questions. We can be reached at review@hdc.org.nz.