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Doctors quit amid patient safety risk disagreement

RUBY SHAW

TWO doctors have quit amid a furore in Gore over the use of unregulated physician associates, the Otago Daily Times understands.

It comes as medical organisations across New Zealand rallied against the use of physician associates (PAs) - arguing patient safety is at risk and they only add to the workload of already over-stretched doctors.

The ODT understands the argument has come to a head in Gore, where Gore Health Ltd chief executive Karl Metzler has championed the use of physician associates as a way to address workforce shortages. Four physician associates -

who see patients but operate under the supervision of doctors - work in the Gore Hospital, including in general prac-

Multiple sources have said two doctors had quit amid disagreements over whether the physician associates patient safety at risk.

They disputed Mr Metzler's claim there had not been any "clinical complaints" about PAs in the 12 years since the facility began hiring them.

A second source said their relation saw a PA at Gore Health, thinking she was being treated by a doctor. Her blood pressure was not taken and three weeks later, she had a brain bleed and lost peripheral vision in one eye. She was given a cortisone injection which she had not agreed to.

She complained to the office manager and was refunded the

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> > Karl Metzler

cost of the injection but was still waiting for an apology six weeks later.

When asked whether this meant his previous comments

about there being no "clinical complaints" were incorrect, Mr Metzler stood his ground, saving "it was never a formal complaint".

> "Should the patient their family wish to make a formal complaint addition to the feedback and discussion already had on this matter, they are wel-

or

come to contact us directly."

Mr Metzler refused to comment on "internal employment matters", but said he had faith in PAs at the general practice.

"I actually find it hugely reassuring that they have not had a complaint in 12 years," Mr Metzler said.

"That's unbelievably remarkable in itself - says a hell of a

He was hopeful a paper due to be discussed by Cabinet would formalise the use of PAs and while they were not the "sole silver bullet" to the workforce crisis, they did offer an "immediate pressure valve release for the sector".

"It doesn't really matter what health system you put them in ... they are highly skilled, highly trained and highly competent.

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"You can imagine the battering I've taken from professional groups and bodies, personally and professionally over the last 12 years - it's been a long, hard

"If the health sector can't solve its own workforce crises then it deserves what it gets."

General Practitioners Aotearoa chairman Buzz Burrell said its membership had grave concerns about the use of physician associates in New Zealand.

PAs were often employed in small towns which struggled to secure GPs

"The patient populations

these PAs serve were already at a disadvantage. Depriving them of doctors is doing them a tremendous injustice.

Buzz Burrell "Gore is a

small town. It's a long way from the major centres, and it's hard to get GPs to go there.

"If, in fact, some GPs have left a clinic there, then yes, it will be harder for the GPs that remain.

GPs were being asked to



There is no training in New Zealand for the role, instead PAs must be certified in their United States.

including the Royal New Zealand College of General Practitioners, urged the government to halt plans to regulate physician associates.

Health Minister Shane Reti had signalled he had some plans to bring a paper to the Cabinet which would regulate the PA role in the New Zealand health

PAs must work with a supervising doctor who does not need to be on-site when a PA is seeing

With the supervising doctors' signature, a PA can order tests and write prescriptions for a patient.

seen as a solution to New Zealand's healthcare crisis. Dr Burrell said. "This is a big-picture,

nosis . . . we certainly have

concerns about patient wel-

The PAs themselves were not

the issue but they were being

fare."

government-level funding and priority problem. "The government is showing no willingness to invest in the high-quality doctor and nurse

professions we already have in the general practice workforce. "How could adding another profession to the mix possibly

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Last month, a joint letter from seven medical organisations.

eral term for a healthcare provider who works alongside a supervising doctor to help patients. The supervising clinician, however, does not need to be on-site.

home country - often the

supervise PAs often unpaid.

which added to - rather then

reduced - their workload, Dr

Burrell said.

"A GP's worst nightmare is a patient at their practice being

sent home with cough medicine

when they should have been investigated for a cancer diag-

help?"