



ANZCA
FPM

*Te Whare Tohu o
Te Hau Whakaora*

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Tēnā koe

Draft Guidelines to manage secondary employment – conflicts of interest

About the Australian and New Zealand College of Anaesthetists (ANZCA)

ANZCA, which includes the Faculty of Pain Medicine (FPM) and Chapter of Perioperative Medicine, is the leading authority on anaesthesia, pain medicine and perioperative medicine. It is the professional organisation responsible for postgraduate training programs of anaesthetists and specialist pain medicine physicians, and for setting the standards of clinical practice throughout Australia and Aotearoa New Zealand. Our collective membership comprises 9649 fellows and trainees in anaesthesia and pain medicine, of which about 1300 work in Aotearoa New Zealand. ANZCA is committed to upholding Te Tiriti o Waitangi in the provision of competent, culturally safe care, and to promoting best practice and ongoing continuous improvement in a high-quality health system.

Overview

Thank you for the opportunity to provide feedback on the draft guidelines and for the brief extension. This submission is informed by consultation with the New Zealand Chairs of ANZCAs National Committee and Faculty of Pain Medicine and Clinical Directors Network.

ANZCA strongly supports the process of developing the guidelines with both clinical and union input through the Chief Medical Officers and the Association of Salaried Medical Officers (ASMS). Many of our fellows work in both public and private settings. The guidelines are timely, given the impetus of increased outsourcing of public health interventions to private hospitals; although this significant change is not specifically referenced, it has serious implications for the balance of employment between private and public providers for both fellows and trainees and which the guidelines need to address.

In general, ANZCA supports the document as offering clear guidance for managing secondary employment and conflicts of interests in covering:

- Fair and transparent treatment for all patients across the boundaries of dual employment including across the public and private health systems.
- disclosing and managing potential conflicts of interest when working across different health systems, including scheduling Health NZ work and on-call duties, and clarifying explicitly that non-clinical time paid for by Health NZ should not be used for private work.
- managing referrals across public and private health systems. This includes clinicians, service managers, booking clerks, and other decision makers.
- communicating with patients about private treatment and being transparent with patients about any potential and real conflicts of interest.
- guidance and clarification about 'non-poaching' expectations.

We do, however, have concerns with the expectations around access to patient notes when transferring to a private hospital (paragraph 38) and paragraph 41 regarding “the competency or the credentialing of health professionals in either service”. We further note and support the recommendations made by the New Zealand Society of Anaesthetists (NZSA), Council of Medical Colleges (CMC), Royal Australasian College of Surgeons (RACS) and the Royal Australian and New Zealand College of Psychiatrists (RANZCP) in their respective submissions.

Guidelines

Paragraph 38 – Patient consent

Obtaining “explicit consent” to access a patient’s record when transferred between public and private facilities is problematic, because patient safety is the overriding concern. There are already significant barriers to the safe transfer of patient data between facilities because of long-standing issues with lack of interoperability between systems, facilities, and devices. This is an issue that needs to be addressed at a systems level, to ensure patient safety and reduce duplication. The onus should not be on individual clinicians to obtain/verify explicit consent from a patient who has been transferred to another facility, as it may be impracticable or unsafe to do so.

Paragraph 41 - Competency

Competency issues are outside the focus of the guidelines and are appropriately addressed elsewhere. ANZCA recommends that you delete this paragraph.

We trust the above is useful and once again, thank you for the opportunity to provide feedback.

Nāku noa, nā



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