

19 October 2016 Our Ref: MT16-174

Janet Lewin
Principal Advisor
Public Legislation and Policy
Public Health
Protection, Regulation and Assurance
Ministry of Health
P O Box 5013
WELLINGTON

Email: Janet Lewin @moh.govt.nz

Dear Ms Lewin

## Draft Health (Infectious and Notifiable Diseases) Regulations 2016

Thank you for the opportunity to comment on the Ministry of Health's draft document, *Health (Infectious and Notifiable Diseases) Regulations 2016* (the draft Regulations). The Royal New Zealand College of General Practitioners (the College) commends the Ministry of Health for its work in this area.

### **General practice and the College**

General practice is the range of values, knowledge, skills, and practices required to provide first level medical services in both community practice and hospital settings. General practice includes the provision of both first contact and continuing care for all ages and both sexes that is comprehensive, person-centred, and takes into account the roles of family, whānau, community and equity in achieving health gains.

GPs comprise almost 40 per cent of New Zealand's specialist workforce and their professional body, the College is the largest medical college in the country. The College provides training and ongoing professional development for GPs and rural hospital generalists, and sets standards for general practice. The College is committed to achieving health equity in New Zealand through:

- A greater focus on the social determinants of health.
- A greater focus on measures to reduce smoking and to increase healthy food options for lowincome families.
- Better integration of health and social services.
- Ensuring the funding model for primary care is targeted towards the most disadvantaged.

# The draft Regulations

We understand that the draft Regulations will replace the Health (Infectious and Notifiable Diseases) Regulations 1966, and that it focuses on notification of infectious diseases, new processes for notifying four sexually transmitted infections, and provisions supporting public health measures for individuals with or suspected of having infectious diseases (and their contacts).

### The College's response

The College is disappointed with the timeframe (four working days) you have given to respond to this consultation. This timeframe does not allow for a considered response, or sufficient time for us to seek the views of College members.

The College strongly supports moves to update the Regulations to give effect to the changes to the Health Act 1956 relating to the management of infectious diseases. In particular, we welcome revisions to the forms and minimum information requirements for notifications of infectious disease by general practitioners and other health practitioners.

#### Notification by electronic means

On 10 February 2015, the College made a submission to the Health Select Committee on the Health (Protection) Amendment Bill. At this time, the College proposed streamlining the process for notifying diseases under section 74 of the Health Act 1956. We noted that in some regions, general practitioners need to send notifications by fax to medical officers of health using the prescribed form.

Accordingly, the College welcomes the addition by the draft Regulations of providing notification via electronic means. Specifically, clause 10 of the draft Regulations states that notifications under sections 74 or 85 of the Health Act must be given by electronic means (and by post or delivery if not reasonably practical). We consider that electronic means provides the potential for a quicker and more seamless notification process; GPs will be able to upload a patient's details electronically during the consultation. This would also facilitate contact tracing.

The College notes that the term 'delivery' in clause 10(1)(b) may include by fax, and we suggest that this is made more explicit.

The College also notes that notifications via email may not be secure and that 'electronic means' should explicitly exclude notifications by such unsecure email. However, we acknowledge that there are some secure communication channels such as hMael<sup>TM</sup> that provide a closed messaging exchange system. However, the notification system should ideally be within a general practitioner's practice management system (PMS) to facilitate ease of use for general practitioners.

We understand that the draft forms will ensure that identifying patient information is not included for particular diseases such as HIV. The College considers it would be useful for the notification system to make it clear to health practitioners where this is the case and the reasons why. For example, providing information for general practitioners by an addendum or pop-up box indicating that the details given will be used for statistical purposes only rather than for contact tracing.

We consider that it is important the notification system:

- Makes reporting as simple and time-efficient as possible.
- Ideally is based within a general practitioner's PMS.
- Provides some incentive for general practitioners to use it.

We understand that Worksafe is developing a system to collect data about notifiable occupational diseases. The Public Health team at the Ministry of Health may wish to contact Worksafe about the considerations they had in implementing such a system.

### **Further information**

In addition to contacting Worksafe, the College suggests that you may wish to seek feedback on the draft Regulations from the New Zealand College of Public Health Medicine (NZCPHM). We note that the email of 18 October 2016 has not been sent to the NZCPHM.

We hope you find our comments helpful. If you would like any further information or clarification please do not hesitate to contact the College's policy team (<a href="mailto:policy@rnzcgp.org.nz">policy@rnzcgp.org.nz</a>).

Yours sincerely

Michael Thorn

Manager - Strategic Policy