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Medical Council of New Zealand
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Submission to the Medical Council of New Zealand on the draft revised statement on Safe practice in an environment of resource limitation

OraTaiao: The NZ Climate and Health Council thanks the Medical Council of New Zealand (MCNZ) for the opportunity to have input into the Draft revised statement on safe practice in an environment of resource limitation.¹

In summary, we consider the proposed revisions need to specifically address the sustainable use of resources in healthcare as part of professional medical practice.

About OraTaiao

Climate change is increasingly recognised as the biggest global health threat of the 21st Century,^{2,3} as well as the greatest opportunity to improve health.⁴

OraTaiao: New Zealand Climate & Health Council has about 650 health professional members. Our [Health Call to Action on Climate Change](#) is supported by [17 leading health professional organisations](#) including the New Zealand Medical Association, the New Zealand Nurses Organisation and the Public Health Association, as well as a number of Specialist Colleges and the leaders of both New Zealand's Faculties of Medical and Health Sciences. All New Zealand's climate change and health experts are members, including eminent international climate change and health experts.

OraTaiao is part of a worldwide movement of health professional authorities urgently focusing on the health challenges of climate change ([The Global Climate and Health Alliance](#)). As senior doctors, nurses and other health professionals, and also junior doctors and others in training whose working lives will be conducted in a working environment of constrained resources and potentially worsening

¹ Medical Council of New Zealand consultation on its Statement on Safe practice in an environment of resource limitation <https://www.mcnz.org.nz/news-and-publications/consultations/medical-council-advisory-consultation-on-its-statement-safe-practice-in-an-environment-of-resource-limitation/>

² Costello A, Abbas M, Allen A, et al. Managing the health effects of climate change: Lancet and University College London, Institute for Global Health Commission. Lancet 2009,373:1693–1733. [http://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(09\)60935-1/fulltext](http://www.thelancet.com/journals/lancet/article/PIIS0140-6736(09)60935-1/fulltext)

³ World Medical Association. WMA Declaration of Delhi on Health and Climate Change, <https://www.wma.net/policies-post/wma-declaration-of-delhi-on-health-and-climate-change/>

⁴ Watts N, Adger WN, Agnolucci P, Blackstock J, et al., Montgomery H, Costello A, for The 2015 Lancet Commission on Health and Climate Change. Health and climate change: policy responses to protect public health. Lancet 2015. doi: 10.1016/S0140-6736(15)60854-6. <http://www.thelancet.com/commissions/climate-change-2015>

health outcomes for populations and individuals, we are advocating on behalf of our patients and communities now and in the future.

OraTaiao is a politically non-partisan incorporated society, emphasising science, evidence, health, health and social equity, and resilience. We regard climate change adaptation and mitigation as New Zealand health priorities.

We understand that health and wellbeing includes physical, mental, social, cultural, environmental and spiritual wellbeing. Health is impacted by what happens in people's homes, communities, schools, workplaces, and societies; natural and built environments; the economy; and internationally. Public policies can protect, enhance and shape the building blocks of health and wellbeing, or undermine, damage and even destroy those building blocks. Many of the building blocks of health are distributed unjustly and unfairly as a result of public policy and investment.

We honour Māori aspirations, are committed to the principles of Te Tiriti o Waitangi, and strive to reduce inequities between Māori, Pacifica peoples and other New Zealanders. We are guided in our practice by the concepts of kaitiakitanga (guardianship), kotahitanga (unity), manaakitanga (caring), and whakatipuranga (future generations).

Response to the draft revised statement

OraTaiao agrees with the Council that the current statement on '*Safe practice in an environment of resource limitation*' needs updating to reflect the current context of increased resource constraints, including resources other than fiscal, and current thinking on appropriate use of resources, eg. the Choosing Wisely initiative. Our following comments relate to issues of sustainability, insofar as this impacts on mitigating climate change.

OraTaiao generally agrees with the changes that the Council has proposed, in particular the inclusion of a principle relating to the equitable allocation of resources. We consider however that the proposed revisions need to specifically address the sustainable use of resources.

Sustainable use of resources in healthcare is part of professional medical practice

Addressing resource limits must include the sustainable use of resources; and when recognising resource limitation as an important part of the working environment of medical professional practice, this needs to include using resources sustainably.

The central idea of sustainability is, in effect, doing more with less, and not doing or using too much.⁵ This is to keep within both costs and immutable planetary limits,^{6,7,8} the climate being but one, which if breached will spell human extinction, with increasing distress, disability and ill health prior to that. See Figure 'Planetary limits' below.

⁵ New Zealand College of Public Health Medicine. NZCPHM Policy Statement on Sustainability. Wellington: NZCPHM, 2017. https://www.nzcphm.org.nz/media/104677/2017_04_sustainability_policy_statement_reviewed_2017_.pdf

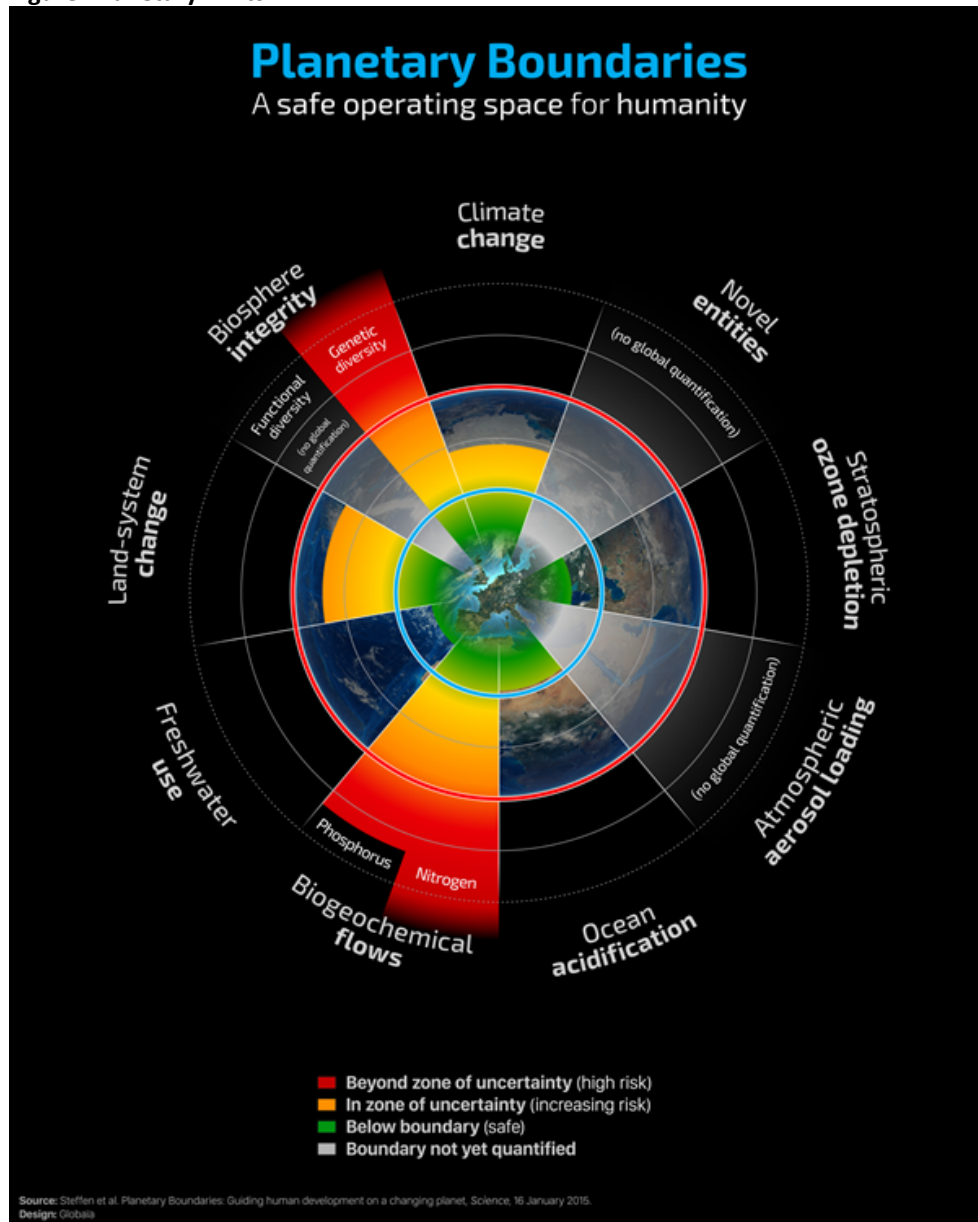
⁶ Rockström J, Steffen W, Noone K, Persson Å, Chapin FS, Lambin E, et al. Planetary boundaries: exploring the safe operating space for humanity. *Ecology and Society* 2009;14(2):32. <http://www.ecologyandsociety.org/vol14/iss2/art32/>

⁷ Rockström J, Steffen W, Noone K, Persson A, Chapin FS 3rd, et al. A safe operating space for humanity. *Nature*. 2009;461(7263):472-5. <https://www.nature.com/articles/461472a.pdf>

⁸ Raworth K. A safe and just space for humanity: can we live within the doughnut? *Oxfam Discussion Papers*. Oxford: Oxfam International, 2012. <http://www.oxfam.org/sites/www.oxfam.org/files/dp-a-safe-and-just-space-for-humanity-130212-en.pdf>

A healthy physical environment is a key foundation for the health and wellbeing of people, and thus environmental sustainability is core to the health of individuals, families, communities and populations.⁵

Figure: Planetary limits



from Stockholm Resilience Centre <http://www.stockholmresilience.org/research/planetary-boundaries.html>

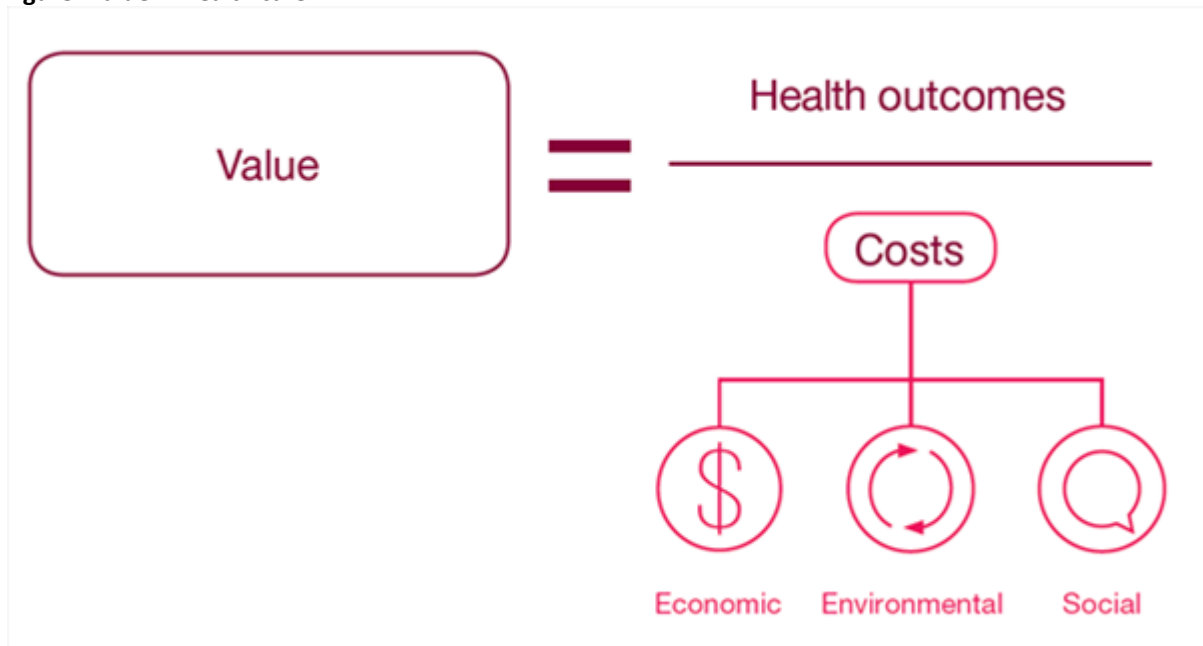
Sustainable health improvement meets the essential health needs of the present (especially the world's poor) without compromising the ability of future generations to meet their own needs.⁹

Such a sustainable approach accepts limits, protects the environmental determinants of health, and can potentially reduce healthcare spending. This is where sustainability not only helps to protect the physical environment, but also aligns with health sector goals to improve efficiency, and to reduce health care costs (thus freeing opportunities for health gain elsewhere).⁵ Costs of treatments in their broadest sense relate not only to fiscal 'economic costs' (including wasted resources clinically) but

⁹ United Nations World Commission on Environment and Development. Our Common Future: Report of the World Commission on Environment and Development. Oxford: Oxford University Press, 1987. <https://sustainabledevelopment.un.org/milestones/wced>

also the environmental and social costs for a given service or intervention.¹⁰ Traditionally, non-fiscal costs have been poorly accounted for in conventional economic modelling. This weakness is a significant contribution to the problems of both social inequities and climate threats.¹¹

Figure: Value in health care



adapted from Academy of Royal Medical Colleges, 2014.¹⁰ Note 'Economic' costs in this diagram would be better depicted as 'Fiscal' costs.

We emphasise that when discussing 'sustainability', we mean in fact environmental sustainability within the context of health equity.¹² We note that difficulty can arise with the way the word 'sustainable' is interpreted differently. With regard to the United Nations' Sustainable Development Goals (SDGs),^{13,14} for example, the word 'sustainable' may sometimes be misconstrued to inadvertently advance worsening inequities to solve environmental and social problems.

We also emphasise with the diagram above that 'economic cost' is better considered 'fiscal cost' and is not comprehensive, where for example the diagram does not include necessary components of environmental and social costs; rather, in this context, 'economic cost' is just a means of counting some aspects of human endeavours and use of natural resources. Sustainability should always be subservient to, and part of, wider health equity, and should improve health equity, not worsen it. Therefore we consider that 'sustainability', properly implemented, should also allow for, and build on, the significant health co-benefits that are available to patients, families/whānau and populations from the broader interpretation of "sustainable".

¹⁰ Academy of Royal Medical Colleges. Protecting resources, promoting value: a doctor's guide to cutting waste in clinical care. London: AoRMC, 2014. <http://www.aomrc.org.uk/reports-guidance/protecting-resources-promoting-value-1114/>

¹¹ Stiglitz J. The price of inequality: how today's divided society endangers our future. New York: WW Norton & Co., 2015.

¹² New Zealand College of Public Health Medicine / New Zealand Medical Association. NZCPHM Policy Statement on Health Equity (adopting the New Zealand Medical Association Position Statement on Health Equity 2011). Wellington: NZCPHM, 2016. https://www.nzcpmh.org.nz/media/58923/2016_11_17_nzcpmh_health_equity_policy_statement.pdf

¹³ UN General Assembly. Transforming our world: The 2030 Agenda for Sustainable Development. New York: United Nations, 2015. <https://sustainabledevelopment.un.org/post2015/transformingourworld>, <https://www.un.org/sustainabledevelopment/sustainable-development-goals/>

¹⁴ Dugarova E, Gülasan N. Global trends: challenges and opportunities in the implementation of the Sustainable Development Goals. New York & Geneva: United Nations Development Programme (UNDP) & United Nations Research Institute for Social Development (UNRISD), 2017. http://www.undp.org/content/dam/undp/library/SDGs/English/Global%20Trends_UNDP%20and%20UNRISD_FINAL.pdf

Responses to selected consultation questions:

1. Are there any other key points that should be included or omitted from the summary box?

Answer: The principle of sustainability in resource use (see above) is crucial, and should be included in the summary box as well as the text of the policy.

2. In your view, are there any other points that should be covered in 'Background'?

Answer: We ask that the concept and definition of sustainability, as described above (including notes/caveats), be included in the Background section of the document.

4. What other changes, if any, should the Council include in the section on "Ethical principles"?

Answer: We ask that the words 'and the need to use resources sustainably and equitably' be inserted in paragraph 4:

"4. Resource limitation, **and the need to use resources sustainably and equitably**, should be recognised as an important part of the environment of medical professional practice."

For paragraph 5, we ask that the word 'sustainably' also be added to the phrase "Efforts to use resources efficiently, equitably, and **sustainably**".

8. What other changes, if any, should Council include in the section on 'Care of acute patients'?

Answer: For paragraph 18 (under the heading 'care of outpatients'), we ask that the words 'equitable' and 'sustainable' be added to the second sentence:

"Prioritisation systems should be fair, systematic, consistent, evidence-based, **equitable, sustainable**, and transparent."

Thank you again for the opportunity to make this submission.

Yours faithfully

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Executive Board member

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