

He whakaaro: kia manaaki taua kia taua

NA PARATENE NGATA*

Introduction

*Hei tiaki, hei manaaki
He taonga tuku iho
Mai te rangi ki te whenua
Kia piki te ora*

According to the latest NZ Medical Council Workforce Survey Maori doctors Nga Rata Maori in Aotearoa (New Zealand) – make up about 2.2% of the total medical workforce. (1) Although small in number we are an important and valuable human resource for the health sector and Maori health development. Te Ohu Rata o Aotearoa - The Maori Medical Practitioners Association provides a precious kete (basket) of knowledge, skills and experiences to a wide range of health initiatives around the motu (country) from research, health service delivery, and management, governance, Maori provider and community development to clinical teaching and policy advice. And much more in a local marae, whanau and hapu setting.

Nga piki me nga heke

Because our numbers are so small we are more visible and vulnerable to the vagaries of public scrutiny and opinion. Events surrounding the competence or incompetence of doctors and delivery of health care will always be newsworthy. The Nationals Women's Hospital and Gisborne Cervical Enquiries, various reports into the delivery and failings of mental health services and increasing

complaints about the standards of practise and behaviors of doctors have put the medical profession and health system under the spotlight. The public wants to know what is going on or more specifically what went wrong and who was responsible.

Maori doctors and health workers can't escape. Increased media attention and public expectations as well as demands for accountability and answers for inadequacies in the quality assurance or monitoring systems in the health service has created an environment of distrust, hostility and vulnerability. The public seems to have lost confidence in the doctor as well as the systems that should ensure their wellness and safety. More people are resorting to litigation and the courts to seek justice and compensation for their pain, hurt and suffering. Many health or social service agencies seem to have lost their humanity in their focus on efficiency and financial accountability –

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getting value for the dollars. More doctors are practicing defensive medicine. Not surprisingly, Maori people are also resorting to the courts to resolve their differences. Such a pity. The traditional

processes of hui and wananga to reach a consensus or to facilitate understanding and compromise doesn't seem to work as effectively as it did in the past.

Ngai taua

All of this doesn't help the Maori doctor very much. Moreover, many of us work alone and in isolation. Together with the obligation of participating in Te Ao Maori at a marae, whanau and hapu level as well as trying to find time for personal and family matters – the conditions for "burn out" and "stress" are only too apparent. Trying to maintain a balance between these and ones professional, clinical and continuing education commitments is not an uncommon scenario for the Maori doctor. It is an environment that is more conducive to unsafe rather than safe clinical practice. It need not be; provided we are pro active in managing our work, time and other commitments. There are a number of actions we can take to keep ourselves safe.

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Tuatahi: Te Mana Rata

It is important to acknowledge and recognize the power we have as doctors and to exercise this with sensitivity and care. This power is part of any person with special knowledge, skills and privileges because of the intimate nature of their work.² We should use it wisely in our practise of medicine – and not abuse it.

Tuarua: Hei manaaki tangata

We must respect the autonomy of patients at all times and be guided by the professions ethical principles and practices. Our first one should always be to do no harm, to do good, and to keep ourselves safe.

Tuatoru: Hei mahi totika

It is paramount we participate in maintaining certain standards of competence in our mahi (work) and practice. For general practitioners the NZGP's standards for practise assessment and validation are vital. These are team based and patient orientated with the goal of practise accreditation.³ Along with a programme of maintenance of professional standards (MOP's) it is envisaged that patient safety can be assured. We must strive to minimize our mistakes and use the best available evidence in our practise of medicine.

Tuawha: Hei mahi kaiakopono

The practice of monitoring and supervision by colleagues or appropriately skilled mentors and supervisors should be encouraged. It should be mandatory that Maori doctors participate in programmes to ensure issues of personal, clinical and professional concern can be disclosed and addressed. These are better managed sooner rather than later when the consequences can be devastating to oneself, whanau and our community or when the well being of patients has been compromised by incompetent, unethical or unacceptable practise and behaviors. Te Ora is in an

ideal position to provide this services as part of its Te Ngakau programme.⁴

Tuarima: Hei whai matauranga

Ongoing professional and continuing medical education development is essential in the modern clinical setting. With the advent and speed of genetic and molecular research, modern technological, information and pharmaceutical developments it is important we participate in continuing education programmes. Keeping up to date, constant change and accountability are now requirements of sound evidence based clinical practise.

Hei whakaaro: Hei tiaki, hei manaaki

Appropriate mentoring with collegial or peer support, supervision, early intervention when needed and participation in a continuing education programme along a pathway of best clinical practise within a Maori framework should help us keep ourselves safe and ensure a high quality of care for patients and the community. It is important we not only set a good example for other kaimahi (worker) in the Maori Health Sector but provide the leadership integrity and robustness to enhance our collective efforts to address the health needs of the people. Hei aha, kia piki te ora, hei taonga tuku iho mai o taua tipuna malua, mai te rangi ki te whenua kia tatou te hunga tangata. Heoi ano, tena tatou huri noa.

References

1. NZ Medical Council Workforce Survey 1999.
2. NZ Medical Journal Editorial Malpractice 2000 Vol 113 No 1116 August 2000.
3. NZ Family Physician Editorial New Standards to Raise Patient Safety Vol 27 No 5 October 2000.
4. Te Ora Te Ohu Rata o Aotearoa. Maori Medical Practitioner Association Nga Whanga Te Ngakau. 1999

HE WHAKATAUAKI

He kahika ka tu koia anahe i te koraha,
ka tu hai kai ma te marangai.

*A single kahikatea tree is beaten down by the
elements – find strength in unity.*