

PARLIAMENTARY BRIEFING

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EMPLOYMENT RELATIONS AMENDMENT BILL THREATENS MULTI-EMPLOYER COLLECTIVE AGREEMENTS FOR SENIOR DOCTORS

MECA Opting Out Provisions

One of the strengths of the Employment Relations Act is the ability to negotiate industry or sector focussed multi-employer collective agreements (MECAs). This has been particularly beneficial for the health system which functions best on a 'whole of system' basis. Integral to this are nationally consistent entitlements in DHBs such as salary scales, professional development & education, and annual leave.

But also integral are rights. Why should the right of senior doctors to participate in public debate and dialogue (speaking out), to refer unresolved concerns over patient safety to a disputes resolution, or to require their DHB to respect senior doctors' primacy of responsibility to their patients vary between, for example, smaller DHBs such as Wairarapa and West Coast, medium sized DHBs such as Hawke's Bay and MidCentral, and larger DHBs such as Auckland, Capital & Coast or Canterbury?

The proposal in the Bill is that any employer with whom bargaining for a MECA is initiated can opt out by writing to the other parties within ten days of receiving such a notice. The MECA the ASMS negotiates with DHBs provides the base terms and conditions of employment for an increasingly 'joined up' public health service. Collaboration between DHBs would have been far more difficult in a situation where senior doctors were not covered by a single MECA.

The ability to opt out will make maintenance of national MECAs more difficult to sustain thus cutting across successive governments' commitment to national collaboration in the public health sector in the absence of a direct order from the government.

The position of the DHBs currently is that they support MECAs. This is good and responsible. But it is their current position. DHBs are notorious for their inconsistency, fluctuations and flip-flops. In 2011, influenced by government pressure, they betrayed an agreement reached on the precarious state of the specialist workforce in DHBs. Things can change at the whim of a new national leadership, as a result of a shift in political direction, poor human resources advice, or the revival of managerialism.

The ASMS also negotiates MECAs for senior doctors in hospices and also salaried GPs in the lower North Island. Both these groups of doctors are more vulnerable than their DHB colleagues. Both their employment agreements are threatened by the Bill.

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The Association of Salaried Medical Specialists (ASMS) represents salaried senior doctors and dentists. The large majority of our members are employed by DHBs. Outside the College of GPs we are the largest organisation representing doctors in New Zealand. Central to our existence is to promote the right of equal access for all New Zealanders to high quality public health services.

The ASMS publishes the ASMS Parliamentary Briefing to provide considered advice to MPs of issues and concerns where we believe we have the experience and expertise.

If your email address has recently changed or is about to change, will you please inform Terry Creighton at tc@asms.org.nz

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