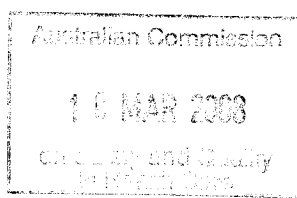




PRESIDENT
Dr Walter R. Thompson
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AUSTRALIAN AND NEW ZEALAND
COLLEGE OF ANAESTHETISTS

ANZCA 003 167873

Joint Faculty of Intensive Care Medicine
Faculty of Pain Medicine

6 March 2008

Professor Chris Baggoley
Chief Executive Officer
Australian Commission on Safety and Quality in Health Care
GPO Box 5480
SYDNEY NSW 2001

email: mail@safetyandquality.gov.au

Dear Prof Baggoley

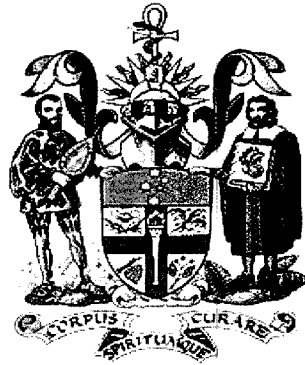
Draft National Patient Charter of Rights

Thank you for the invitation to comment on the national patient charter of rights. Please find attached a submission from the Australian and New Zealand College of Anaesthetists (ANZCA) that outlines some relevant issues and comments for your consideration.

ANZCA is fully committed to improving the safety and quality of the health care system and wishes you well with this important initiative. We look forward to working with the Commission and other key stakeholders to achieve worthwhile gains in this area. For further information please liaise directly with Mr John Biviano, Director Policy, Tel. 03 8517 5341, email: jbiviano@anzca.edu.au.

Yours sincerely

**Dr Walter Thompson
PRESIDENT of ANZCA**



ANZCA

Australian and New Zealand College of Anaesthetists

ABN 82 055 042 852

Submission

Consultation Paper:

Draft National Patient Charter of Rights

March 2008

Draft National Patient Charter of Rights

The Australian and New Zealand College of Anaesthetists (ANZCA) is pleased to provide comments on the draft national charter and congratulates the Commission on this important initiative.

A national and consistent approach to the issue of patient rights is highly desirable in the context of a safe and high quality healthcare system. The language and the rights identified in the draft document appear to be appropriate from the patient viewpoint.

ANZCA developed a Professional Document: *Statement on Patient Rights and Responsibilities* in 1990, which was reviewed in 1996 and withdrawn in 2001 as by that time such documents were readily available in hospitals. The contents of this document were in alignment with the *Draft National Patient Charter of Rights*. The Professional document did, however, specifically identify patient rights and *patient responsibilities*. The proposed Charter does not make his distinction clearly and in a balanced way.

ANZCA, through its Faculty of Pain Medicine, currently has a "Statement on Patient's Rights to Pain Management" (Professional Document PS45) which is undergoing review (ANZCA, 2001).

In relation to the roles, rights and responsibilities of the providers, there appears to be minimal content and it would be useful to outline these more clearly. Other important areas to highlight are the roles, rights and responsibilities of the governments/jurisdictions for the delivery of safe, accessible and equitable healthcare for the community. This would provide a more balanced approach.

Specific comments on the documents are:

Page 6, item 1 – ACCESS: Equity of access to public health care

Dot points two and three may need amplification to avoid confusion and/or misunderstanding.

'be admitted to a public hospital as a public or a private patient' – may lead people to expect to be 'admitted to a public hospital as a private patient' without the need for payment of private fees.

'equitable access to public health services regardless of place of residence' is also open to accusation of being misleading in that a person who becomes acutely ill in remote parts of Australia cannot have equal access to a hospital that a person in a major centre has.

Page 6, item 2 – RESPECT: Respect, dignity and consideration

Dot point one might usefully have added at the end after 'gender':
'...gender, disease and legal status'.

This covers people with AIDS for example, or criminals in goal.

Page 7, item 5 – INFORMATION: being informed about services, treatment and care

Dot point two – see previous comment on access to public hospital as a private patient.

Second last paragraph, change first line to:

'Patients (who are able) are expected to provide information to their health care provider about their history...'

Page 7, item 6 – PARTICIPATION: informed decision making and informed choices

Dot point three (page 8), replace 'success rates' with 'possible complications'.
'Success rates' is a term which will mislead patients.

Page 14, item 4 – Rights and responsibilities

There should be an expansion of 'rights' and 'responsibilities'. The current layout of the document tends to concentrate on patient rights and may lead readers to form the opinion that patients have all the rights with little responsibility. Further clarification within the document that clearly outlines patient responsibilities would enhance the charter. As indicated in the opening paragraphs it would be useful to define the roles, rights and responsibilities of providers, as well as the various governments/jurisdictions to give a more balanced view.

References

ANZCA 2001, PS45 Statement on Patient's Rights to Pain Management, available:
<http://www.anzca.edu.au/resources/professional-documents/professional-standards/ps45.html>