



NZRDA

New Zealand Resident Doctors' Association

Important Update on Nurses' Strike

11-7-18

Dear Colleagues

NZNO members have rejected the DHBs' latest offer in their MECA negotiations and are now set to strike for 24 hours from 0700 tomorrow. NZRDA has previously provided advice on "what to do" or "not to do", but have been asked to repeat that advice ahead of tomorrow's strike. If you still have a question, please contact us at the office – we will be available all day "just in case".

The Code of Good Faith for the Public Health Sector provides for the Union (NZNO) and the DHBs to provide sufficient cover for "life and limb preserving services" or LPS as they are known. So ahead of the strike NZNO and the DHBs have sorted this out. As a result, no one should be concerned that the absence of nurses will put patients' lives at risk.

The hospital should be shut down to minimal work only, and all the nurse managers will have been credentialed to work! All elective services should have been cancelled. Even where the staff may be available to provide a service, back up for services may be adversely affected by the strike. DHBs should have rescheduled electives in advance so the wards are as empty as possible on the day. The day should be planned to be like a non-festive Christmas Day.

Section 97(3) of the Employment Relations Act 2000 provides that any non-striking worker has to agree to do the work of a striking worker – or to put another way, you cannot be required to perform the duties of a striking nurse. It is our advice to you that you do not.

Okay, so that's what the law says. Nut what about ethical responsibilities? Common sense should apply here. If a patient will be harmed if you do not act – then you act.

Members have raised some issues where both doctors and nurses might undertake similar work as part of their normal duties. These duties need to be within your scope of practice (this is the position of the Medical Council). You need to be familiar with, and trained in, the relevant procedures. Don't do anything you are not comfortable with. An example here might be giving IV drugs; if you are uncomfortable drawing up or administering a drug, contact the duty manager and let them know. They should have people available to assist.

What if you are asked to do work that you would normally perform in any event? If the work you are being asked to perform is your normal work, then yes you have to do it. But

you do not have to do more than you would normally do including changing rostered shifts.

And you cannot be directed to work in an area you would not normally work in.

If concerned at all, call the relevant manager, your SMO or give us a call if you need urgent advice.

Kind regards

Dr Deborah Powell

National Secretary