

#### **APPENDIX**

LPS Requirements 23-24/9/2025

Master sheet: staffing available at time of strike and LPS requirements:

Lead Contact: Alex Pimm				Request Confirmed: Jennifer Walker Name: 021306474 Date: Signature	Ene	In a	25
Department / Service	Normal volumes in or through Department per 24 hours for which LPS being made	Medical staff roster for stril date notice is:	ke day as at	Other clinical staff who will be available on strike day who are appropriately trained to undertake some patient management/support	Non-Union/non striking/redeployed medical staffing available on strike day – SMOs, RMOs	LPS Requested (Should be listed as on duty, or on call on site or on call off site)	Reason for LPS request — Contingency Plan and gap unable to be filled. Tasks to be covered
Anaesthesia- Whangarei	16 theatre sessions, non- theatre-based activity	23rd Sept 0001 – 0800hrs 23rd Sept 1800- 0800hrs Sept 24th 1800hrs- 2359hrs	1x SMO 1x RMO	RNs, AT	Unknown	23 Sept 2025  0001 – 0800hrs  1x SMO on call – off site  1800 – 0730hrs (overnight) 1x SMO oncall off site  24th Sept 1800 – 2359hrs 1x SMO on call off site	Available for acute theatre if needed 2x Acute theatres

		23rd Sept 0800- 1800hrs 24th Sept 0800- 1800hrs	11x SMO 8x RMO	RNs, AT	Unknown	September  0730 – 1800hrs  2 x SMO on duty – on site  0001hrs-0800hrs	Ensure the consistent presence of senior clinical desirion makers in access
Whangarei ED	150-170*	AM x2 SMO 0800:1800 P2 x2 1300-2300 PM x1 1400-0800 incl on call 0001 - 0800		Nil at SMO level  RMO level  AM 0800-1800  Reg x2  HO x1  PM 1400-2400  Reg x1  HO x2  Night 2230-0800  Reg x2  HO x1	Unknown	23rd and 24th Sept SMO on call off site  0800-1800hrs 23rd and 24th Sept 2 x SMO on site on Duty  1300-2300 23rd and 24th Sept 1 x SMO on site on duty  1400- 2359 hrs 23rd and 24th Sept 1x SMO on site on duty PLUS  23rd and 24th Sept 0800 -2359 hrs	decision-makers in areas such as resuscitation and acute care, and to support timely and effective interventions Safeguard patient safety, particularly for undifferentiated presentations, through vigilant assessment and responsive care. Deliver appropriate clinical management and decision-making for patients exhibiting behavioural disturbances, ensuring safety and therapeutic engagement. Conduct thorough assessment and proactive management of complex medical and surgical cases, with a focus on early identification and intervention to prevent deterioration. Provide high-level acute care leadership, including the capability to oversee multiple simultaneous

						1 x SMO ON CALL OFF SITE	critical events, ensuring coordinated resuscitation efforts and patient safety across scenarios.
	90-120 pts, 40 admissions a day.	0001- 0830hrs 23 <sup>rd</sup> Sept	1 SMO on call	2reg & 2 HO	Unknown	0000-0800hrs 23 Sept 1x SMO on call (handover at 0800 to 0830)	Advise over night for unwell pts & admissions
							To support very junior RMO skill mix , acute and unwell pts advice etc Will also cover HOPS/Rehab  SMO weekend level of cover is 3 SMOs on duty 0800-
General Medicine		Sept 23 <sup>rd</sup> and 24 <sup>th</sup> 0800- 1600hrs	9 SMOs on duty for acute and 10 +varying no for clinics	10x Registrar 10x HOs (including medical sub specs)	Unknown	0800-1600hrs 23 and 24 Sept  2x SMOs On Duty for acute care  PLUS 1x SMO On duty for any unwell review inpatients	Given the current high volumes of medical patients, the acuity of these, and the fact that the strike commences one day after a weekend (there are always high patient numbers post a weekend) 3 SMOs are requested on duty to support care. This will allow one SMO to review acutely unwell inpatients before they deteriorate further while the other 2 SMOs are involved in the management of acute
							involved in the



		1600- 0800hrs 23 <sup>rd</sup> Sept	1 SMO on call	3 Reg & 3 HO 1600 - 22.30 2 Reg & 1 HO 2230 -0800	Unknown	1600-0800hrs 23rd Sept 1 SMO on call off site	Advice over night for unwell pts & admissions
		1600- 2359hrs 24 <sup>th</sup> Sept	1 SMO on call	3 Reg & 3 HO 1600 - 22.30 2 Reg & 1 HO 2230 -2359	Unknown	1600-2359 hrs 24 Sept 1 SMO on call off site	Advice over night for unwell pts & admissions
Cardiology		0800- 1700hrs	4 SMO's		unknown	23 and 24 Sept 0800 – 1000hrs – 1x SMO inpatient cardiology ward round onsite.  23 <sup>rd</sup> and 24 <sup>th</sup> September 1000- 1700hrs 1x SMO On call offsite  23 <sup>rd</sup> and 24/09 0730-1600hrs 1 x Interventional cardiologist off site on call	Cardiology inpatient LPS cover required.  Cath lab cover required - Acute cover for urgent coronary angiography, cardiac pacing,
Stroke (Medicine)	10	0800- 2200hrs	1 SMO,	2x RMO	Unknown	23 & 24 Sept 0800-1600hrs	Time is of the essence for code stroke

23rd – 2 Endo sessions 1 x OPD clinic 24 <sup>th</sup> – 4 Endo sessions 2 x OPD clinic Unpredictable Workloads include: - Inpatient cal - Planned Outpatient clin Drop clinic - Unplanned/i patient assess across Renal		23 <sup>rd</sup> – 2 (2 sessions) SMOs 24 <sup>th</sup> – 4 SMOs (4 sessions)	RNs and Allied staff, none of the appropriate delegation to cover SMO medical management	Unknown with the exception of 1 SMO who has offered to complete ERCP session 23 <sup>rd</sup>	23 and 24 Sept 0800-1700hrs 1x SMO on call off site	Life threatening GI bleed management
Workloads include: - Inpatient cal - Planned Outpatient clii Drop clinic - Unplanned/i patient assess	9				23 and 24 Sept	
outpatient subspecialties - Acute patier presentation  (WHG) Whg HD 4	anics/ acute sment	6 SMO's	0800- 1700: PGY1 x1 Reg x1  Snr nursing staff can help as able within Nursing scope. Renal MDT can help with scope	Unknown	0800-1000hrs 1x SMO on site on duty for ward round 0001-0800hrs 23rd Sept 1x SMO On call - off site 1000-0800hrs 23rd September 1x SMO On call - off site 1000-2359hrs Sept 24th 1x SMO On call - off site	Patient complexity requires SMO back-up at all times  Covers all services across Te Tai Tokerau Acute and critically unwell patient assessment as follows: - Renal inpatients - Acutely presenting patients across all Renal modalities.

	PD 3 Whg Home HD 4 Clinic 20-30 Treatment 2-4  IP inc consult 15-20 Access Procedures 1-2					back up if required	
General Surgery	Wards 34 + 28 bed capacity	0000-0800, 1700-0000 hours 23 <sup>rd</sup> and 24 <sup>th</sup> Sept	1x SMO 1x RMO	RNs and Allied staff, none of the appropriate delegation to cover SMO medical mgmt.	Unknown	0001-0800hrs 23 <sup>rd</sup> Sept 1x SMO On call - off site  1700-0800hrs 23 September 1x SMO On call - off site  1700-2359hrs Sept 24 <sup>th</sup> 1x SMO On call - off site	Off site and on call to support acute on call operating and ED presentations. Need skill set to be able to manage ward, theatre, ED Patient deterioration and should more than one occurs at one time.
	OPD- 7 clinics-2 MSP RMO Skins, OT 2x sessions Endo 1 x AM session	0800-1700 hours	9 x SMO 9 x RMO	RNs and Allied staff, none of the appropriate delegation to cover SMO medical mgmt.	Unknown	Sept 23 <sup>rd</sup> and 24th  0800-1000-hrs  2x SMO On duty on site (ward round, one coming off call and one starting call)	On site or on call to support acute on call operating and ED presentations. Need skill set to be able to manage ward, theatre, ED Patient deterioration and should more than one occurs at one time.  For both dates - dependent on patient acuity and clinical risk on the day the



						23 and 24 <sup>th</sup> Sept 1000-1700hrs 1x SMO On call – Off site	SMO may be required on site  Support and advice is required at all times for RMOs
	Theatre -9 elective cases, 6 acute cases Ward- 32 inpatients (34 bed capacity)	0001-0800 hours	1x SMO 9 x RMO	RNs and Allied staff, none of the appropriate delegation to cover SMO medical mgmt.	Unknown	0800-1000hrs 23 and 24 Sept 1 SMO on duty on site for ward round, acute orthopaedic life/ limb surgery/ assessments of acute patients 0001-0800hrs 23rd Sept	Off site or on call to support acute on call operating and ED presentations. Need skill set to be able to manage ward, theatre, ED Patient deterioration and should more than one occurs at one time.
Orthopaedics EC 15 Cli pa	Admissions- 5-10 patients ED assessments- 15- 20 patients Clinic- #- 60-70 patients Clinic FSA/ follow up- 25 patients	1700-0000 hours	1x SMO 9 x RMO	RNs and Allied staff, none of the appropriate delegation to cover SMO medical mgmt.	Unknown	1x SMO On call - off site  1000-0800hrs 23 <sup>rd</sup> September 1x SMO On call - off site  1000-2359hrs Sept 24 <sup>th</sup> 1x SMO On call - off site	Off site and on call to support acute on call operating and ED presentations. Need skill set to be able to manage ward, theatre, ED Patient deterioration and should more than one occurs at one time.
	OPD- 4 clinic sessions, OT- 6 sessions	0800-1700 hours	6x SMO 5x RMO	RNs and Allied staff, none of the appropriate delegation to cover SMO medical mgmt. RNs x 26	Unknown		to support acute on call operating and ED presentations. Need skill set to be able to manage

				(ward) RNs x 5 (OPD)			ward, theatre, ED Patient deterioration and should more than one occurs at one time.  Support and advice is required at all times for RMOs
		1700-0800 hours	1x SMO	RNs and Allied staff, none of the appropriate delegation to cover SMO medical mgmt. RNs as for Gen Surg wards.	Unknown	o001-0800hrs 23 <sup>rd</sup> Sept  1x SMO On call - off site 1700-0800hrs 23 <sup>rd</sup> September 1x SMO On call - off site 1700-2359hrs Sept 24 <sup>th</sup> 1x SMO On call - off site	Off site on call to support acute on call operating and ED presentations. Need skill set to be able to manage ward, theatre, ED Patient deterioration and should more than one occurs at one time.
Urology	OPD 2 Sessions OT 0 Session	0800-1700 hours	2x SMO 2x RMO	RNs and Allied staff, none of the appropriate delegation to cover SMO medical mgmt. RNs as for Gen Surg wards. RNs x 3 OPD	Unknown	0800-1000hrs 23 <sup>rd</sup> and 24 <sup>th</sup> September  1x SMO On site on duty (acute ward round)  1000hrs- 1700hrs Sept 23 and 24  1x SMO on call off site (dependent on patient acuity	Need skill set to be able to manage ward, theatre, ED Patient deterioration and should more than one occurs at one time.  Support and advice is required at all times for RMOs



						and clinical risk on the day)  Same SMO who does ward round, on duty 2 hours, then on call back	
		1700-0800 hours	1x SMO	RNs and Allied staff, none of the appropriate delegation to cover SMO medical mgmt. RNs as for Gen Surg wards.	Unknown	0001-0800hrs 23 <sup>rd</sup> Sept  1x SMO On call - off site 1000-0800hrs 23 <sup>rd</sup> September 1x SMO On call off site 1000-2359hrs Sept 24 <sup>th</sup> 1x SMO On call - off site	off site on call to support acute on call operating and ED presentations. Need skill set to be able to manage ward, theatre, ED Patient deterioration and should more than one occur at one time.
ENT	OPD 5 sessions OT 1x sessions	0800-1700 hours	3x SMO 3x RMO	RNs and Allied staff, none of the appropriate delegation to cover SMO medical mgmt. RNs as for Gen Surg wards. RNs x 3 OPD	Unknown	0800-1000hrs Sept 23 and 24  1x SMO on duty (acute ward round)  1000-1700hrs Sept 23 and 24  1x SMO On call — off site (dependent on patient acuity and clinical risk on the day)	On site or on call to support acute on call operating and ED presentations. Need skill set to be able to manage ward, theatre, ED Patient deterioration and should more than one occur at one time.  Support and advice is required at all times for RMOs

Ophthalmology	OPD 1 sessions OT 2x sessions	0800-1700 hours	3x SMO 4x RMO	RNs and Allied staff, none of the appropriate delegation to cover SMO medical mgmt. RNs as for Gen Surg wards. RNs x 3 OPD	Unknown	Whole strike 1x SMO On call- Off Site	Off site on call to support acute on call operating and ED presentations. Need skill set to be able to manage ward, theatre, ED Patient deterioration and should more than one occurs at one time.  Support and advice is required at all times for RMOs
Oral Health	60		8 SMO	3 RMO's	Unknown	24 hours (whole of strike) 1x SMO - on call off site	SMOs need to be available for any patient coming through ED – trauma or dental infection. Support and advice required at all times for RMOs and dental/oral health therapy workforce.
ICU	2-8 patients	1700- 0000hrs	2x SMO 4x RMO	RNs and RMOs none of which are at appropriate delegation to cover SMO medical management	Unknown	Sept 23 <sup>rd</sup> 0001hrs -0800hrs 1 x SMO on call off site  0800hrs - 1700hrs: 1 x SMO on site on call  1 x SMO off site on call	SMOs conduct patient reviews & return to the ICU at 2000hrs to see all patients.  Support and advice is required at all times for RMOs



						1700- 0800hrs Sept 23-24th 1 x SMO on call off site  September 24 <sup>th</sup> 0800hrs – 1700hrs SMO on site on call  1 x SMO off site on call  1700-2359hrs 1 x SMO on call off site	Most registrars are junior and need a lot of supervision. Also need cover for possible flight retrievals
		0800-1700 hours	2x SMO 4x RMO	RNs	Unknown	0800-1700hrs 23 and 24 <sup>th</sup> Sept 1x SMO on site, on duty, 1x SMO on call off site	
Oncology/Haematology	60-80 per day		5x SMO 1x RMO	1 NP 2 CNS 3 DSN 8 RN	Unknown	0800-1700hrs Sept 23 <sup>rd</sup> and 24 <sup>th</sup> 1x SMO On call- off site	There may be a small number of patients that delaying chemotherapy by a few days may impact on their outcome and can't be postponed
Paediatrics (Incl SCBU)	10-20 Children, 8-10 Babies		1 SMO on call for Paeds and NNU	4 RN's Paeds 3 RN's NNU 1 Registrar between Paeds and NNU 1 SHO between Paeds and	Unknown	0001-0800 Sept 23 <sup>rd</sup> 1x SMO On call- Off Site And Additional SMO on call off site for neonatal retrieval	1x ward, 1xSCBU Need skill set of SMO available for any admission, emergency in OT or delivery suite plus



		1 SMO NNU 1 SMO Paeds 5 SMO's Clinics  1 SMO on call for Paeds and NNU	9 RN's Paeds 4 RN's NNU 1 Registrar Paeds 2 SHO's Paeds 1 SHO NNU  6 RN's Paeds 2.5 RN's NNU 1 Registrar between Paeds and NNU 2 SHO's between Paeds and NNU No clinicians working on any shift who meet skill level of SMO.		1700- 0800hrs Sept 23-24th 1x SMO On call- Off Site And Additional SMO on call off site for neonatal retrieval  1700-2359hrs 24th 1x SMO On call- Off Site And Additional SMO on call off site for neonatal retrieval  0800-1700hrs 23 and 24th Sept 2 SMO on duty (1 for neonatal, 1 for ward)  0900-1200hrs 23rd Sept 1xSMO on duty for Oncology clinic	possibility of retrieval from a rural hospital  Palliative Weekly Chemo to several children— administration is dependent on counts — occurs weekly — may not be required if count low
Radiology- Breast		2 SMO	Reg x1 for 1 hour to perform examination of patients to be biopsied	Unknown	1xSMO on call off site	Required for patients where the Radiologist triages as having a high risk of cancer diagnosis. With Northland' shortage of radiologists there is no capacity to provide additional clinics post the strike to catch up



24 Sept  Mauri Ora Breast Clinic - New Cancer Clinic	New Cancer Clinic 8-10	8-10	<b>0900-1230</b> 1 x SMO Surgeon	None of the appropriate delegations to cover SMO management in the results clinic	Nil	0900-1230 on duty on site 1 X SMO Surgeon	and will delay diagnosis and treatment.  Clinic for management of new and complex breast cancer patients. If cancelled can delay treatment and cause patient harm.  Treatment delays and inability to meet FCT targets. Inability to catch up with reduced Breast  Surgeon numbers and no capacity to reschedule without treatment delays for the cancers. NB NZNO granted LPS for this clinic during the recent industrial action
Whangarei  Mauri Ora Breast Clinic new  cancer results clinic	Results Clinic 3-6	3-6	1300-1630 1 x Surgeon	None of the appropriate delegations to cover SMO management in the results clinic	Nil	1300-1630hrs on duty on site 1 X Surgeon	Results clinic (6 patients) for newly diagnosed breast cancer patients to plan treatment. Delays can cause harm i.e. a referral for chemo or surgery and psychological distress for the patient There is no capacity to catch these up and are time sensitive to meet the cancer timelines for surgery / treatment of patients. Treatment delays and inability to meet FCT targets

						NB NZNO granted LPS for this clinic during the recent industrial action
Radiology- Whangarei	250- 300 patients a mixture of acute and elective	7 SMO	5x RN 20x MIT	Unknown	1x SMO On call-Off Site in case of: technical issues with teleradiology - or 0800hrs-1700hrs 23 and 24 Sept urgent interventional procedure	Radiology manage the 24/7 roster without any local SMOs on site by using tele radiology. This can be implemented during the strike period.  A SMO is always on call to cover emergencies or IT issues.  We would limit the number of contrast examinations performed over the strike period. The referring team would need to sign the relevant contrast documentation if required and ED would need to support the department with any contrast reactions.
Pathology				Unknown	24 hours (all of strike)  1 x SMO On call-Off site	1x Haematologist for acute leukaemia diagnosis
				unknown	24 hours (all of strike)1 SMO on call off site	1x microbiologist for sepsis advice
Obstetrics & Gynaecology	Whg ANC = 14  Whg Gynae Clinic = 20  BOI - ANC 8  Gynae 6			Unknown	0800- 1700hrs 1x SMO On call- On site  0001-0800 Sept 23 <sup>rd</sup>	If there is no SMO available there is potential for loss of life – either mother or baby or both.  Acute presentations are difficult to predict and can

	Theatre list = 6					1x SMO On call- Off Site  1700- 0800hrs Sept 23-24th 1700-2359hrs 24th 1x SMO On call- Off Site	be time critical due to the nature of the service
Kaitaia Hospital	40-60 A&M plus oversight of patients on general ward, renal and maternity	24 hours on Thursday, 1st May (midnight to midnight)	3 SMO		Unknown	0001-0800 Sept 23rd 1700- 0800hrs Sept 23-24th 1700-2359hrs 24th 1x SMO On call- Off Site 0800-17:00hrs 23 and 24 th Sept: Ward 1 x SMO on duty ED 1x SMO on duty ward  [AP(1]	Kaitaia hospital receives patients from Triage 1-5. These patient presentations are unpredictable, and we need to have someone with the skill set to intubate / resuscitate a patient at all times.  Unwell patients on the ward may require prescriptions and change in medication depending on their status.  Additional clinics cancelled (e.g. ECG)
Bay Of Islands Hospital	15-20 in ward 50-60 through ED	0800-1630 Ward ED 0800- 2030hrs 2030- 1000hrs	2x SMO or 1 RMO and one SMO 2 SMO	Unknown		Ward 0800-1630 23 <sup>rd</sup> and 24 <sup>th</sup> sept One SMO One RMO/or SMO if no rostered RMO	Required to maintain safe care all ED presentations are life preserving. All Doctors live outside the mid-north region therefore must be on duty on site.

						One SMO on duty  Sept 23 <sup>rd</sup> and 24th 0830 - 1900hrs 1 SMO on duty Sept 23 and 24 1030 – 2100hrs 1 SMO on duty  Sept 23 2030 -0930hrs One SMO on duty Sept 24 <sup>th</sup> 2030hrs- 2359hrs	
Dargaville Hospital		1000- 1700hrs	1 SMO	No RMOs	Unknown	0800-1200hrs 23d and 24 <sup>th</sup> Sept 1x SMO On Duty 1200 – 1700 23 <sup>rd</sup> & 24 <sup>th</sup> Sept On call on site 1 SMO	We require an on-site SMO to provide inpatient and acute presentation care between 0800 and 1700.
		0000-1000 and 1700-2359	Virtual support			nil	Process for after-hours remains unchanged.
Mental Health- Mid North, Far North & Kaipara	30-40	0800- 1630hrs	1 SMO	Key workers will take care of some of load-unable to prescribe	Unknown	23 <sup>rd</sup> and 24 <sup>th</sup> September 0800-1630hrs 1x SMO On call - Off site	Physical Assessment by Psychiatrist for acutely unwell clients. Prescription required if needed for acutely unwell clients. No

							other staff able to perform this.
Community mental health and addictions Whangārei		0800- 1630hrs	1 SMO			0800-1630hrs 23 and 24 <sup>th</sup> September 1 SMO on call off site	covering LPS for existing people who present in crisis in ICT AOD GA DD POPs ICAMHS
Mental Health- Crisis	Up to 40	0800-1630	1 SMO		Unknown	0800-1630hrs 23 and 24 <sup>th</sup> September 1x on site- on duty (Manaia House)	covering LPS new referrals in whangarei and Kaipara, Raranga Tahi, ED and custody in whangarei
Mental Health- Inpatient Unit (Tumanako)	25-27	0800- 1630hrs	1x SMO	Clinical team, RBs and Allied. Can't prescribe or undertake aspects of the MHA	Unknown	0800-1630hrs 23 and 24 <sup>th</sup> September 1x On site- On duty	We provide a 24 hour service with acute Turoro (whaiora) requiring SMO Assessments and medication reviews. Mental Health Act reviews as legally required. Admissions and Discharges.
Mental Health on call		23 <sup>rd</sup> Sept 0001- 0800hrs 23 <sup>rd</sup> Sept 1630- 0800hrs 24 <sup>th</sup> Sept 1630- 2359hrs	1x SMO			23rd Sept 0001- 0800hrs  1 SMO on call off site  23rd Sept  1630-0800hrs  1 SMO on call off site  24th Sept	As per roster

					1630-2359hrs	
					1 SMO on call off site	
GP Liaison		3 SM	lO's		nil	
Medical Administration		2x SN	MOs		23rd Sept 0001- 0800hrs 1 SMO on call off site 23rd Sept 1700-0800hrs 1 SMO on call off site 24th Sept 1700-2359hrs 1 SMO on call off site 23rd and 24th Sept 0800-1700hrs 2 SMO's on call on site	Clinical leadership during strike action.
12.5 C Civil Defence or Major emergency	Situations exceeding the ability of staff available to deliver LPS	all		Reduced staffing	Access to staff required should this situation arise and return to work (full or partial) be needed Regional support from neighbouring districts not involved in industrial action	Pool of staff as agreed in the emergency management protocol

					will be sought additionally in a major emergency/public health event. CMOs in Auckland hospitals have agreed to this support. St John has been made aware.	
Sexual Health Sexual Assault (SAATS and NFSS)	No volume of work as this is on-call in the event of a Forensic Sexual Assault Case	No volume of work as this is on- call in the event of a Forensic Sexual Assault Case	On call SMO x 1	No other available, A MEDSAC Doctor is on-call and it is a requirement to have a Dr and a MEDSAC RN for sexual assault cases and gathering of forensic evidence.	1 x SMO MEDSAC Dr On call 24hrs	Essential for an acute sexual assault, essential to forensic evidence being collected A MEDSAC Doctor is on-call and it is a requirement to have a Dr and a RN for sexual assault cases and gathering of forensic evidence

Note: Please note that non-union staffing numbers still need to be confirmed.

• ED patient numbers- the estimate is based on similar day of the week.

During the July NZNO 2025 strike and despite advertising to the public across SM, radio and print along with communications to primary and Iwi healthcare providers there are either less than 10 or increased presentations than the same days in the previous year.

In 2024 157 & 149 presentations occurred on the same weekdays with the first spike of 10 patients starting at 9 am. If we see the same 8% increase we did in 2024 and expected presentations would be 160-169 During a strike Emergency Departments (EDs) must maintain safe staffing. Unlike other areas that can limit activity to accommodate fewer doctors EDs have no control over patient arrivals. Inadequate staffing during a strike risks unsafe workloads for doctors leading to fatigue errors and patient harm.

ED doctors possess specialised skills to manage diverse acute and critical situations caring for patients of all ages and conditions. During industrial action appropriately trained doctors are



crucial and an appropriate number to be able to respond to unpredictable situations. Recent NZNO strikes did not see any or a significant drop in presentations.

N