



**Specialty
Trainees**
OF NEW ZEALAND

FREQUENTLY ASKED QUESTIONS

Kia ora!

Earlier this year STONZ ran a number of sessions with Trainee Interns and these conversations generated some great questions.

So, what we've tried to do in this document is pull together the most commonly asked questions and also a few extras. Below we have listed some of the key information we think is important and we've also created a separate document with a comparison table highlighting the differences in the contracts and where there is now much closer alignment including the remuneration changes. You can also find this on our website.

It is important to remember that as well as your terms and conditions which govern your day-to-day employment and what you are paid, the role of your union is also to provide help, support and advocate for the overall improvement of working conditions of all RMOs— much of which cannot be changed by adding a clause to the MECA. With the changes to Health NZ and the one employer model, it's important to think about your career now and where you want to be in the future.

Want to keep in touch with STONZ?

You don't have to be a member to keep in touch, you can keep up to date via social media, Facebook - *SpecialtyTraineeDoctorNZ* & *@specialtytraineesofnz* on Instagram. We also have a quarterly newsletter that goes to all members, if you'd like to sign up to our mailing list, please email support@stonz.co.nz

Our website also has a lot of information about STONZ, who we are, what we do and also profiles of our current Executive Team and all our delegates. On the website we also have a section for Trainee Intern resources and a quick links page for many of the resources you'll need on a daily basis as a House Officer.

If you have any questions about the below FAQs or comparisons, please contact support@stonz.co.nz our team is here to help. We appreciate working through what is best for you can be difficult and we're happy to talk through any questions you have, even if you're not yet a member.

Ngā mihi nui,

The STONZ Team

STONZ Vision and Values

Our aim is to grow our collective voice in order to drive change and provide greater benefits that supports all Junior Doctors across NZ.

- We advocate inclusion so that all junior doctors have an opportunity and voice when it comes to shaping our MECA.
- We promote collaboration working closely with all parties with the aim to create outcomes and solutions that benefit and work for everyone.
- We put training at the heart of our MECA to ensure that all junior doctors have the opportunity to develop their skills without compromise or limitation.
- We strive to be progressive by looking at the long-term consequences and impact of every recommendation and decision that we make.

Frequently asked questions

Thank you to all the Trainee Interns who submitted questions – If you have a question that is not answered here, please get in touch support@stonz.co.nz

What changes are being made to the MECA at negotiations?

This isn't something that we can specifically comment on as negotiations are currently underway – obviously remuneration is always part of the discussion and as mentioned as part of our presentation's we continue to work on projects throughout the year which we hope will help to inform bargaining.

Also, we have recently completed a member survey where almost 600 of our members provided us with feedback in regards to what they thought were the most important issues facing RMOs now which we are using to influence what we ask for.

STONZ has only been established for 3-years now but we're all pretty proud of what we've been able to achieve in that short-time. We know there is a lot of work to do, and our view is that if we can make small changes at each negotiation outside of pay then we're doing ok.

What are the current MECA terms?

STONZ MECA: Currently a one-year agreement from 10th December 2020 – 13th December 2021

NZRDA: A three-year agreement from 17 May 2021 to 31 March 2024

What does this mean? For STONZ we'll be heading back into bargaining again later this year and have another opportunity to improve our terms and conditions and advocate for our workforce challenges.

If you are a member of the NZRDA, your terms and conditions are set until March 2024 (3 years). If you want to change your terms and conditions as an NZRDA member you are now only able to do this if you move DHB (between now and 30th June 2022) or 60 days before the NZRDA MECA expiry (February 2024).

FREQUENTLY ASKED QUESTIONS *continued*

How does it work with different rosters and the impact on Salaries?

The NZRDA have negotiated incremental pay increases over their 3-year term to reach pay parity with the soon to expire STONZ MECA. Despite the pay increases in the new NZRDA MECA, STONZ members will still receive greater remuneration over the next 3 years.

We have completed a couple of calculations in regards to what the NZRDA salary increase might mean in real terms. In these two examples, we looked at a NZRDA Member vs a STONZ member's salary from 1.07.2021 until 01.03.2024 using STONZ current rates and the NZRDA stepped increases.

- A House Officer on Step 2, category C at an Urban DHB, over the 3 years would still be approximately \$5000 better off under the STONZ MECA.
- Similarly, a Registrar at an Urban DHB on Step 4, category C would be approximately \$9500 better off under the STONZ MECA over this time.

The new 2021 NZRDA MECA and STONZ MECA salary are similar and in Auckland there are some runs on higher pay categories under NZRDA compared to STONZ e.g., Orthopaedic House Officers at WDHB. STONZ has a pay scale of C vs NZRDA on B, yet NZRDA also gets RDO's.

You will see in the WDHB Ortho Run STONZ RMOs on a C category are observing RDOs. So, what you have stated is technically correct, however any NZRDA member working and observing RDO's right now will have money deducted as per the deduction model (\$203 per day for Urban based PGY1s).

From April next year due to the changes in the NZRDA MECA, NZRDA members will also be a Category C when on this run. The changes in the new NZRDA MECA means instead of the current deduction model, the RDO hours won't be counted when the salaries are calculated.

Where the run descriptions say 'observing RDOs' vs 'not observing', is that choice up to the people making the roster?

Under the STONZ MECA the DHB can require you to work 12 days in a row. However, some DHBs are still offering alternative options to STONZ members who are working schedule 10 Rosters and would like to observe RDO's (Rostered days off) such as:

- Recalculating your salary individually so you can observe them.
- Balloting all STONZ member on a run and seeing what the overall preference is and then rostering for the majority e.g., everyone observes the RDOs or everyone works 12 days.
- Offering Annual Leave in order to observe the RDOs.

If you are wanting to know the options at your particular DHB, please discuss this with your RMO Unit Manager/Advisor prior to starting. Noting, in the Auckland Region they do not allow STONZ members to observe RDO's at all.

If you change positions, e.g., House Officer to Registrar can we change between STONZ/NZRDA then?

Unfortunately, no because the coverage clause of both MECAs include House Officers and Registrars you are unable to change Unions when changing positions.

The only time you are able to change MECAs is when changing employers or in the period from 60 days before the MECA expires up until the MECA is ratified again.

FREQUENTLY ASKED QUESTIONS *continued*

I need to sign and return my contract to the DHB soon, do I have to decide which Union I would like to join now?

No, if you're not sure then it's OK to remain a non-member (you can still sign up to our newsletter and follow us on social media so you can get a feel for what we're about). And then you can use the first 30-days to see how you go and then at that point join a union or remain on an IEA.

If you don't join a union within the first 30 days, can you join one later whilst in the same job/employer?

Yes, if you don't join a union in the first 30 days the DHB will place you on an IEA (individual employment agreement) leaving you free at a later date to join a union if you choose to. Note, if this is something you are considering you need to make sure you are not a member of ANY union prior to starting your first day in the hospital. If you are wanting to resign from a union you must provide this in writing (email) with at least a weeks' notice (for STONZ).

For those PGY1s working towards surgical specialties, is there a benefit in having RDOs to study for part ones? For this question we've gone out to our team to see what they think...

Emma: I think it's a personal decision, but I think as a PGY1 there is benefit to working as a part of a team, i.e., working the RDOs, rather than studying, as you get far more out of it for a surgical career and have plenty of opportunities to study in evenings/weekends and as a PGY2.

Jordan: I'm not studying for part 1's, but I am studying for my diploma and the RANZCOG PVP, whilst doing 2x research manuscripts and participating on the STONZ Executive. I think you manage with what you have and I am managing to get through my workload adequately. I think there are many factors which play into this question, like, how busy your job is, and overall, where you would like to go in your training long term, especially because as mentioned with HealthNZ switching unions is not going to be so easy in the future.

Christina: I found taking a chunk of study leave as much more beneficial to using my RDOs to study. Often, you'll do your part 1s in PGY2 or 3. I wouldn't suggest doing them any earlier! A good time is to tee it up with an ED rotation while you're on shift work. I found that worked best for most of my colleagues.

Magnus: As Jordan said, you use the time you have, & nothing substitutes a good study plan. I started study 3months out from the exam, and took two weeks off immediately prior, I made sure my study plan fit exactly into the time that I had - and that was all I needed. I am sure I probably would have used RDOs if I had them and it might have altered my study plan, but they wouldn't have changed the number of books to read/study that was required. But every person is different. Some people did the 6-week Dunedin exam course and swear by it, I did not think it was necessary but that was me. Some people might think RDOs are essential. I personally did not notice their absence.

We have just been advised the Auckland University graduation is likely to be next year. The NZRDA MECA protects leave to attend this, is there any protection for leave to attend graduation in the STONZ MECA?

Yes, we have the same entitlement in the STONZ MECA, you will be guaranteed leave to attend your graduation.

FREQUENTLY ASKED QUESTIONS *continued*

What are the benefits for parental leave with STONZ vs NZRDA?

Under the STONZ MECA if you are the primary caregiver and have been employed by the DHB's for more than 12 months you are entitled to take up to 52 weeks leave. If you have been employed for less than 12 months you can apply up to 6 months leave.

Since 2018 under the STONZ MECA as the Primary Caregiver you have been able to apply for 14 weeks paid parental leave (*the DHB will pay the difference between the weekly statutory payment and the equivalent weekly value of your base salary.*) And as the non-primary caregiver, since our last negotiations you are now entitled to apply for up to 2 weeks paid leave on your ordinary salary, this is in addition to the 2 weeks unpaid partner leave available under the Act.

What are STONZ doing to support RMO's going on/returning from Parental Leave?

As above, in 2018 we significantly increased the payment for primary carers going on parental leave and in 2020 we increased the leave secondary caregivers can take from 2 – 4 and also negotiated better flexibility for secondary caregivers as to how they can use that leave.

We are currently working on a project with some of our members (who are also busy mums) around how we can better support RMOs returning from parental leave. Our members have recently completed a survey and we've had over 120 responses to help inform this work. We've also collated all the policies from the DHBs and our aim is to use these to influence discussions at our National Engagement Group with DHBs.

Which union is optimal for supporting junior doctors with young families? What's it like being under the STONZ contract with a young family? We asked our team who have had kids whilst being an RMO to share their thoughts.

Magnus: Life has been busy as a doctor and work life balance is always tough. The STONZ contract takes some of the effort out of training, which allows more time and energy for family. It used to be a chore working out what training costs would be funded and fighting to get them approved. Under STONZ, with our collaborative approach it has been much easier to access all the training I need to progress.

My wife and our had our last child before STONZ existed. Back then parental leave required taking leave without pay - surviving on a reduced income when baby was born and claiming reimbursement months later. We could not afford to do that. Instead used 2 weeks of annual leave to ensure we had income at the point we needed it.

STONZ pioneered a new format for parental leave where parental leave is paid at the time when it is taken. Parents are provided financial support at the time when they need it, and the primary care giver is paid for far longer than previously. The secondary care giver can also now afford to actually take leave now without tapping into annual leave. I was super happy about these improvements. I only wish parental leave like this had been available when I had my kids.

Can you speak to working on a STONZ MECA vs NZRDA MECA as a PGY1 at Middlemore specifically?

Emma Littlehales was previously a Registrar at CMDHB and provided this response:

Every department and job are different. The MECA won't make a difference to your day-to-day job aside from possibly RDOs, which will differ between runs. You will earn more under STONZ, and have access to the aids to training grant \$500 (after 12 months service).

FREQUENTLY ASKED QUESTIONS *continued*

As a TI, are we able to view the new MECA (once negotiated) at the same time it goes to members? If we are thinking of signing up it would be good to know what the future MECA might include.

If you are a member of STONZ as a TI you'll receive the same communication and requests to participate and feedback as our other members. When it comes to ratifying a new MECA, you'll be provided with a copy to view but you will not be eligible to vote. Once you become a House Officer, you'll be able to vote in any future MECA's. If you are not a member of STONZ, you will not be included in the negotiation or ratification process.

Why is Medical Indemnity Insurance important?

While your union is here to support and advocate for any employment related issues. Your indemnity Insurance is there to support you if there are any issues raised in a clinical setting. Often a complaint or issue may overlap both employment and clinical spears so it's important to have both. Under the STONZ MECA you can get MPS Indemnity cover reimbursed each year. MPS provides indemnity to over 83% of all doctors in New Zealand and if you would like to know more about who they are and what they do, please contact the friendly team at MPS, 0800 225 5677, www.medicalprotection.org/newzealand or membership@mps.org.nz