

Application for approval of position and supervisor

Provisional vocational scope of practice

REG7 October 2013

Reference no:

PO Box 10 509, The Terrace, Wellington, 6143, New Zealand Level 28 Plimmer Towers, 2-6 Gilmer Terrace Wellington, 6011, New Zealand (for packages) Contact: +64 4 384 7635 – 0800 286 801 – registration@mcnz.org.nz

IMPORTANT INFORMATION

- You must complete this form in order to have your position and supervisor approved, before being granted provisional vocational registration.
- This form will take up to 3 weeks to process upon receipt.
- Complete sections 2 5, and then forward the form to Council's office. If you have been deemed eligible for registration within a <u>provisional vocational scope (assessment pathway)</u> you will need to pay a fee for advice as Council will send the form and documents to the Vocational Education and Advisory Body (VEAB) for their advice in section 6.
- If a delegate of the Chief Medical Officer (CMO) / Practice principal signs section 5, Council will need written confirmation of the delegation directly from the CMO / practice principal.

SECTION 1 – DOCUMENTS MUST BE PROVIDED				
Please complete this form and tick ☑ the documents you have provided with your application:				
☐ Current curriculum vitae				
☐ Copy of your job offer / letter of appointment				
Copy of your job description (including the duties you will be undertaking)				
Comprehensive supervision and induction and orientation plan (including who will supervise you informally and formally). At a minimum this must meet Council's supervision requirements in the following publications: Induction and supervision for newly registered doctors and Supervision for international medical graduates.				
SECTION 2 – TO BE COMPLETED BY APPLICANT				
Full name (s):	Registration Number:			
Address for medical register:				
I understand that:				
The Medical Council may review my registration at any time.				
My clinical supervisor will report to the Medical Council.				
Signed:	Date:			
SECTION 3 – TO BE COMPLETED BY SUPERVISOR				
Full name(s):	Registration Number:			
Current practising certificate:	Position:			
I am registered within a vocational scope: Yes No	Vocational scope:			
• I have read Council's documents Induction and supervision for newly registered doctors and Supervision for international medical graduates and understand what is required of me.				
I agree to supervise the applicant and to forward comple Medical Council.	•			
Signed:	Date:			

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SECTION 4 – TO BE COMPLE	TED BY EMPLO	YER (Dates must ma	atch dates listed in job	o offer)	
Position			Vocational		
appointed to:			Scope of practice:		
Employer / Hospital /					
Institution:					
Position: Full time	Part time		Hours per week:		
Start date of	/	1	End date of	1	
omployment.	/ month	/	employment:	/ / / / / dav month	voor
day	ШОПШ	year	- 1 - 7	day month	year
Printed name of			Position:		
person signing					
Signed:			Date:		
SECTION 5 – TO BE COMPLE	TED BY THE CH	IIEF MEDICAL OFFICE	ER (CMO) OR PRACTIC	CE PRINCIPAL	
 In the DHB environment, the signature of the CMO/CMA or their delegate. In the primary care environment, the 					the
signature of the practice manager/practice principal or their delegate.					
,	• • • •	•	•	an application is approved.	
	_			for ensuring the plan attache	d is
implemented.		, , , , , , , , , , , , , , , , , , ,	,	0 · · p · · · · · · · ·	
·			Docition		
Printed name of			Position:		
person signing:					
Cianad.			Date:		
Signed:					
SECTION 6 – REQUEST FOR ADVICE FROM BRANCH ADVISORY BODY					
• To be completed if doctor is registered in a provisional vocational scope of practice under assessment.					
The VEAB advise that the position and supervisory arrangements are suitable for assessment purposes.					
 Further information may 	be requested i	f the position and su	pervisor is not suitabl	e for assessment purposes.	
Vocational Education					
and Advisory Body					
(VEAB) name: -					
Printed name of			Position:		
person signing:				_	
Signed:			Date:		

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Please re-enter your name in the section below as this section will be detached from the rest of the form to be processed by our finance team after it has been received.			
Name:			
 Advice from VEAB is requested for all doctors deemed eligible for provisional vocational scope of practice assessment pathway. The VEAB advises Council on whether position and supervisor arrangements are suitable for assessment purposes. Further requirements may apply if the position and supervisor is not suitable for assessment purposes. 			
Credit Card type		Cheque	
Mastercard	Visa	Cheque enclosed	
Card number			
Expiry date]	
Name on card			
Cardholder's signature		Date	

SECTION 7 – Fees (please see our website <u>here</u> for a list of current fees).

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Supervision Summary for Supervisors of Provisionally Registered International Medical Graduates

Supervision is a requirement for registration of all doctors registered in a provisional general, provisional vocational, or special purpose scope of practice.

What do we mean by supervision?

'Supervision is the provision of guidance and feedback on matters of personal, professional and educational development in the context of a doctor's experience of providing safe and appropriate patient care.' Good supervision should enable the doctor to review and develop their practice in a supportive environment, and enhance their knowledge, skills and professionalism. In addition, supervision encourages a culture of continuous learning and development. It will be both formal (scheduled and planned) and informal.

Why do we require supervision?

Supervision supports a doctor's practice, and enables an assessment of the doctor's performance while they become familiar with the New Zealand health system and the required standard of medical practice in New Zealand. It assures Council that a doctor is able to practise safely, with support and oversight, until the doctor is able to demonstrate that they are able to practise competently and safely independently.

Responsibilities of the supervisor, supervisee and employer

The general responsibilities of a **supervisor** will include:

- Ensuring that the IMG is participating in their orientation and induction programme.
- Providing clarity about how both parties will communicate during normal working hours and after hours (where applicable). This includes setting ground rules for communicating with other team members.
- Making sure that protected supervision time is scheduled regularly and kept free of interruptions.
- Being readily available and approachable.
- Where applicable, providing clear clinical notes and comprehensive management plans, which include parameters clarifying when specialist involvement is required for a particular patient.
- Monitoring and verifying what the IMG is doing, and that they are capable of carrying out their duties competently.
- Raising performance issues early. The sooner these are addressed, the more opportunity the IMG has to take corrective action.
- Identifying whether poor performance is caused by poor communication skills and making arrangements for communication skills tuition, when necessary.
- If the supervisor believes that the IMG's practice may put patient safety at risk, the supervisor should report concerns to their employer and to Council.
- Arranging to regularly review the IMG's understanding and knowledge of key clinical areas.
- Ensuring the IMG is working within their approved scope of practice and alerting the Council if this not the case.
- Understanding the requirements that the IMG must complete in order to gain full registration (for those on provisional scopes), and providing support, where appropriate, to help the IMG meet these requirements.

The general responsibilities of the **supervisee** will include:

- Making a commitment to engage fully in the supervision process.
- Taking responsibility for ensuring that an appropriate supervision schedule has been arranged, diarising these appointments and giving it priority.
- Working with the supervisor to set supervision and educational objectives.
- Keeping a supervision logbook, including participation in continuing medical education activities.
- Communicating clearly and responsibly with the supervisor.
- Being ready to accept constructive feedback, and being receptive to changing behaviour where necessary.
- Taking part in audit and peer review or group activities.
- Asking for advice appropriately.
- Asking for more support or mentoring, should this be necessary.
- Contacting the supervisor early on when concerns or issues arise, or when they feel out of their depth in any way.

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- Recognising limits of professional competence.
- Obtaining approval from Council for any changes to supervision arrangements, registration conditions or requirements before they are implemented.
- Informing the Council if the conditions or requirements of supervision are not being met.

The general responsibilities of the **employer** will include:

- Ensuring supervision is provided according to Council's policies.
- Facilitating the provision of protected time for the IMG and supervisor.
- Ensuring the IMG is adequately oriented to organisational policies and procedures.
- Advising Council of any concerns about the IMG if they form the opinion that there is a risk to the public that cannot adequately be addressed by implementing local measures.
- Understanding the requirements that the IMG must complete in order to gain full registration (for those on provisional scopes), and providing support, where appropriate, to help the IMG meet these requirements.

Reporting requirements

While an IMG holds a provisional scope of practice, they are required to submit supervision reports to Council every three months. The reports should be completed and signed by the IMG and their supervisor. If required, the supervisor will need to be willing to discuss any concerns raised in the reports, and the measures put in place to manage issues of public health and safety with Council staff.

A comprehensive <u>IMG orientation</u>, induction and supervision guide is available on Council's website.

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