

## Policy on practising certificates<sup>1</sup>

| Policy<br>Statement | No doctor may practise medicine unless he or she is registered under the<br>Health Practitioners Competence Assurance Act 2003 (HPCAA) within a scope<br>of practice and holds a current PC (s 8 of the HPCAA).   |
|---------------------|---|
|                     | <ul> <li>If the Registrar receives a complete application for an annual practising certificate ('PC'), together with the required fee, the Registrar must issue a PC unless he or she believes on reasonable grounds that the applicant –</li> <li>has at any time failed to maintain the required standard of competence</li> </ul>  |
|                     | <ul> <li>has failed to fulfil, or has failed to comply with, a condition included in<br/>the applicant's scope of practice</li> </ul>   |
|                     | <ul> <li>has not satisfactorily completed the requirements of an educational<br/>programme that he or she has been ordered to complete</li> </ul>   |
|                     | <ul> <li>has not held a PC in New Zealand within the 3 years immediately<br/>preceding the date of application</li> </ul>   |
|                     | <ul> <li>Is unable to perform the functions required to practice medicine<br/>because of some mental or physical condition</li> </ul>   |
|                     | <ul> <li>has not engaged in the practice of medicine within the 3years<br/>immediately preceding the date of the application.</li> </ul>  |
|                     | If the Registrar believes one or more grounds apply, the Registrar must<br>determine whether he or she is able to consider and issue the PC under<br>delegation or, in the case of a medical or physical condition, whether the<br>Health Committee is able to do. In any other case, the Registrar must submit<br>the application to the Council (s 27 HPCAA.)                     |
|                     | The Registrar or the Council may propose to decline to issue the PC if<br>satisfied that any information included in the application is false or<br>misleading. However, the applicant must be given full details of the reasons<br>for this decision, and an opportunity to make written submissions to be<br>heard on the matter before a final decision is made. (s 27(4) HPCAA) |
|                     | If any fines, costs or expenses that the applicant has been ordered by the<br>HPDT to pay remain unpaid, the Registrar may decline to issue a PC until the<br>fine, costs or expenses are paid. The applicant may request the Council to<br>review such a decision. (ss 26(4) and (5) HPCAA)  |

<sup>&</sup>lt;sup>1</sup> This policy supersedes the *Policy on Annual Practising Certificates*.

In considering an application for a PC, the Council must not decide that a PC should be issued unless it is satisfied that the applicant meets the required standard of competence. In order to satisfy that criterion, the Council may include any conditions in the applicant's scope of practice or vary any existing conditions.

| Application<br>requirements<br>and procedure | -  |  |  |
|--|--|--|--|
|  | Current PC required for practice of medicine |  |  |
|  | 1.   | <ul> <li>To practise medicine in New Zealand, a doctor must be registered and hold (or be deemed to hold under the HPCAA) a current PC. The HPCAA provides for fines for up to \$10,000 for breaches of this requirement (see s 8 HPCAA). The exceptions to this requirement are if a doctor performs health services – <ul> <li>in an emergency</li> <li>as part of a training course or instruction</li> <li>in the course of an examination, assessment or competence review required or ordered by Council. (s 8(3) HPCAA)</li> </ul> </li> </ul>  |  |
|  | 2.   | <ul> <li>The Council has defined the practice of medicine as including:</li> <li>advertising, holding out to the public, or representing in any manner that one is authorised to practise medicine in New Zealand</li> <li>signing any medical certificate required for statutory purposes, such as death and cremation certificates, prescribing medicines, the sale or supply of which is restricted by law to prescription by doctors or designated prescribers</li> <li>assessing, diagnosing, treating, reporting or giving advice in a medical capacity, using the knowledge, skills, attitudes and competence initially attained for the MB ChB degree (or equivalent) and built upon in postgraduate and continuing medical education (CME), wherever there could be an issue of public safety.</li> </ul> |  |
|  | _  | 'Practice' in this context goes wider than clinical medicine to include<br>teaching, research, medical or health management, in hospitals,<br>clinics, general practices and community and institutional contexts,<br>whether paid or voluntary.   |  |
|  | Requ   | uirements of application for PC  |  |
|  | 3.   | The information required for an application for a PC is set out by the Council (which may take the form of either hard copy or on-line   |  |

Disclosure of this information is required to enable the Registrar to consider if there are grounds on which to submit an application to Council or for the Registrar or Health Committee to consider the application under delegation. In the absence of such grounds, the Registrar must issue a PC.

#### Council or Registrar may decline application in specific cases

- 4. The Council or the Registrar may propose to decline to issue a PC if satisfied that any information included in the application is false or misleading. Before the Registrar or Council decides to decline a PC on these grounds, Council must:
  - inform the applicant in writing why they believe the information is false or misleading; and
  - give the applicant a reasonable opportunity to make written submissions to be heard on the question.
- 5. Any person making a false declaration or representation in an application commits an offence and is liable on summary conviction to a fine not exceeding \$10,000.
- 6. If any fines, costs or expenses that the applicant has been ordered by the Health Practitioners Disciplinary Tribunal to pay remain unpaid, the Registrar may decline to issue a PC until the fine, costs or expenses are paid. The applicant may request the Council to review any such decision to decline an application.

### Consideration of application and procedures for dealing with disclosures made in application for PC

7. The following paragraphs describe the process for processing applications and considering disclosures. Upon receipt of an application, the Registrar and staff acting under delegation, must consider each of the grounds under s 27. (These are discussed below, with relevant questions from the PC application included).

### Has the doctor at any time failed to maintain the required standard of competence (s27(1)(a))?

Acknowledging the breath of what might constitute a finding relevant to competence and the health and safety of patients, Council requires information from applicants about current or previous competence and professional disciplinary processes.

Applicants are required to advise if they have been subject to:

a formal competence inquiry or a restriction or withdrawal of credentials based on performance or conduct, undertaken by an

*employer or complaints, licensing, or professional body (other than the Medical Council)* 

an adverse finding in any discipline action by an employer, complaints body, licensing body, or professional body (other than the Medical Council itself and the Health Practitioners Disciplinary Tribunal).

The Registrar considers any disclosures or other information provided as part of the application and takes advice from Council's medical advisers. Where there has been a formal competence inquiry or related disciplinary finding, Council will obtain copies of the relevant findings and decisions and make endorsements on registration or PCs.

### Has the doctor failed to fulfil, or failed to comply with, a condition included in the doctor's scope of practice (s27(1)(b))??

A doctor's compliance with any condition is confirmed at the time of application. This may require contact with Council agents, organisations, employers or others who are able to provide authorative, informed comment on compliance with conditions. .This is identified and signed off by the relevant staff member. An instance of apparent failure to comply with a condition is reported to the Registrar.

# Has the doctor failed to satisfactorily complete the requirements of a competence programme that he or she has been ordered to complete (s27(1)(c))?

A doctor's compliance with the requirements of an educational programme is confirmed at the time of application. This may require contact with Council agents, organisations, employers or others who are able to provide authorative, informed comment on whether the programme requirements have been satisfied.

This is identified and signed off by the relevant staff member. An instance of apparent failure to satisfy a competence programme is reported to the Registrar.

#### Has the doctor, within the three years immediately preceding the date of the application either (a) not held a PC in New Zealand or (b) not engaged in the practice of medicine (ss27(1)(d) and (f) HPCAA).

This will be identified by the staff member processing the application. When this is identified, the 3-year policies are implemented and the doctor is informed of the relevant forms that need completing. *See* <u>policy</u> on doctors returning to medical practice in New Zealand after an absence of 3 or more years working overseas and <u>policy on doctors</u> <u>returning from an absence of practice of 3 years or more</u>.

The Registrar may approve the issuing of a PC if the doctor agrees to any

conditions proposed by the Registrar to give effect to these policies.

A minimum requirement for a doctor who has not practised medicine for 3 years or more is a supervision and induction plan.

Is the doctor unable to perform the functions required to practise medicine because of some mental or physical condition (s27(1)(e))?

Applicants are required to advise if they have:

... been affected by, diagnosed with, or assessed as having, a mental or physical condition with the capacity to affect the applicant's ability to perform the functions required for the current or future practice of medicine. These include neurological, psychiatric or addictive (drug or alcohol) conditions, including physical deterioration due to injury, disease, or degeneration.

Applications containing relevant disclosures and information are referred to the Council's Health Committee for consideration. Applicants may be required to provide further information to the Health Committee as part of this.

The Health Committee has delegated authority to advise the Registrar on whether he or she can be satisfied that a practising certificate, with or without agreed conditions, can be issued.

If the Health Committee is unable to advice the Registrar that a PC can be issued, the application will be submitted to Council for consideration.

#### Other required disclosures - including investigations and convictions

Council has authority to determine what information it requires to be provided in a completed application. This includes disclosure of previous investigations or convictions.

Applicants are asked to disclose if they have been subject to: A police investigation, and/or a criminal charge being laid by the police, and/or a guilty finding in a criminal proceeding including traffic offences involving alcohol or illegal substances? Disclosure is required even if the criminal proceedings resulted in discharge without conviction or a similar finding.

New Zealand applicants are advised to note their rights under the Criminal Records (Clean Slate) Act 2004 before providing details of any criminal record). Information about the Criminal Records Act 2004 is found at <u>http://justice.govt.nz/services/criminal-records/about-the-criminal-records-clean-slate-act-2004</u>.

These disclosures are considered on a case by case basis. The Registrar

may, if he or she considers that information disclosed requires consideration by Council, submit the application to Council.

- 8. After considering all the relevant information, and any submissions made, the Council may decide to issue the certificate, to issue the certificate subject to conditions, or to decline the application. If an application for a PC is declined, the Council may authorise the Registrar to issue an interim PC for a period, up to 12 months, determined by the Council. Alternatively the Council may decide not to issue the certificate until the applicant has fulfilled certain conditions determined by Council.
- 9. Council issues, and seeks renewal of, PCs on a cyclical basis to allow better monitoring of fitness to practise, competence and to monitor recertification and oversight requirements. Council has a follow up process to ensure doctors are aware that a PC renewal is due. However, it remains the doctor's professional responsibility to ensure that they never practise without a valid PC.
- 10. Practising without a practising certificate is not only a breach of legal requirements, but is a breach of a doctor's ethical and professional obligations. Instances of practising without a practising certificate will be reported to the Registrar and may result in a notification to the Ministry of Health and/or consideration of the referral of the issue to a professional conduct committee.
- 11. A doctor may apply for a refund of up to 50 percent of the PC fee and disciplinary levy (in the year following payment) if their total taxable income from medicine (in New Zealand or overseas) is no more than \$20,000. This request for a refund must to be supported by a taxation statement or other proof of earnings.
- 12. When doctors request duplicate PCs or notify changes of addresses, checks of birth dates, name and registration numbers will be made to minimise the possibility of a person fraudulently obtaining a PC.

Updated for HPCAA 2003: Update approved by Registrar (including new name) June 2004 July 2016