



Policy on changing the scope of practice for doctors registered within a provisional general scope to registration within a general scope of practice without limitations

Policy Statement

The Medical Council of New Zealand has set requirements for doctors to meet before they may be registered to work in New Zealand within a general scope of practice.

Doctors will work on a provisional general scope for up to two years, subject to conditions to satisfy the Council that all requirements for registration in a general scope are met.

Council may propose to put limitations on a doctor's general scope of practice if this is considered necessary in the interests of public health and safety.

However, Council may consider the approval of a doctor's general scope of practice without conditions limiting their general scope to a particular branch of medicine, if the doctor can demonstrate to Council that they have adequate skill and knowledge to practise medicine within a general scope of practice without conditions.

This policy must be read with reference to Council's *Policy on registration in New Zealand* and *Policy on registration within a general scope of practice*.

Notes

This policy will apply only to doctors who have:

1. Obtained registration within a provisional general scope of practice through the comparable health system pathway.
2. Satisfied the requirements for registration in a general scope of practice.
3. Satisfactorily completed a minimum of 12 months full time or equivalent experience under supervision in New Zealand on a provisional general scope.
4. Satisfactorily completed six months surgery and 6 months medicine under supervision during their provisional general scope. The 6

months medicine must not include more than 3 months emergency medicine. There is no requirement for the doctor to work in Council accredited category A or B medical or surgical runs.

OR

Satisfactorily completed 12 months on a provisional general scope, of which at least 6 months was spent practising in a Council approved general practice position. The doctor is only able to work in general practice if there has been sufficient previous general practice experience in the comparable health system on which the doctor's application for a provisional general scope was based.

5. Doctors who have worked in any area of medicine in a hospital environment for at least 6 months of their 12 months under supervision will be limited to 'hospital based practice'.
6. Conditions limiting the doctor to one area of medicine will apply in all cases where the doctor has not worked in hospital based practice and has not worked in general practice for a minimum of 6 months. For example, doctors who have worked only in accident and medical practice will remain limited to accident and medical practice.
7. Received satisfactory reports for the three runs completed (or nine months worked) immediately prior to applying for registration within a general scope.
8. Been recommended for registration within a general scope of practice without limitations by his or her supervisor.

A doctor who was approved registration within a provisional scope of practice limiting the scope to one area of practice may not be considered for a general scope without limitations, unless the doctor has been working in general practice.

A doctor whose scope is limited to one area of practice, may apply for a broad general scope of practice if they have completed Council accredited runs including one A medical and one A surgical run under the supervision of an Intern Supervisor so that the Intern Supervisor has adequate information to be able to recommend the doctor for registration in a general scope without limitations.

Process

9. The applicant will complete the application form (COS4), supply the documentation listed on the form and forward the completed application to the Council office.
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10. Depending on the doctor's individual circumstances, additional information may be obtained either from the applicant or from another source eg, employer or supervisor before the application is considered by Council.
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Recommended on:	25 May 2005
Approved by Council:	22 June 2005
Amendment to the comparable health system pathway approved by Council:	October 2011