



Te Kaunihera Rata
o Aotearoa

**Medical Council
of New Zealand**

Whakahaumarū i te iwi
whānui, whakaturā te
kounga o te tikanga rata.

We protect the public
and promote good
medical practice.

Recertification requirements for vocationally-registered doctors in New Zealand

November 2019



Introduction

The Medical Council of New Zealand (Council) plays a key role in ensuring public safety by putting in place mechanisms to ensure doctors are competent and safe to practice.

One of the ways we do this is by setting recertification programme requirements for doctors. Recertification programmes support doctors to maintain their competence, take responsibility for their performance and to stay current in their practice. Responsibility for determining what is appropriate for each vocational scope falls to the appropriate recertification provider – in most cases in New Zealand, this is the medical colleges.

This document outlines Council's recertification requirements for vocationally-registered doctors in New Zealand. These requirements build on existing systems, are evidence-based and aligned to the agreed vision and principles for recertification.

Medical colleges are expected to work towards the minimum requirements, with implementation completed by 1 July 2022.



Vision and principles

Council has strengthened the recertification requirements for vocationally-registered doctors in New Zealand, guided by the following vision and principles.

Vision

Recertification should ensure that each doctor is supported by education that provides for their individual professional development needs and is delivered by effective, efficient and reflective mechanisms that support maintenance of high standards and continuing improvement in performance.

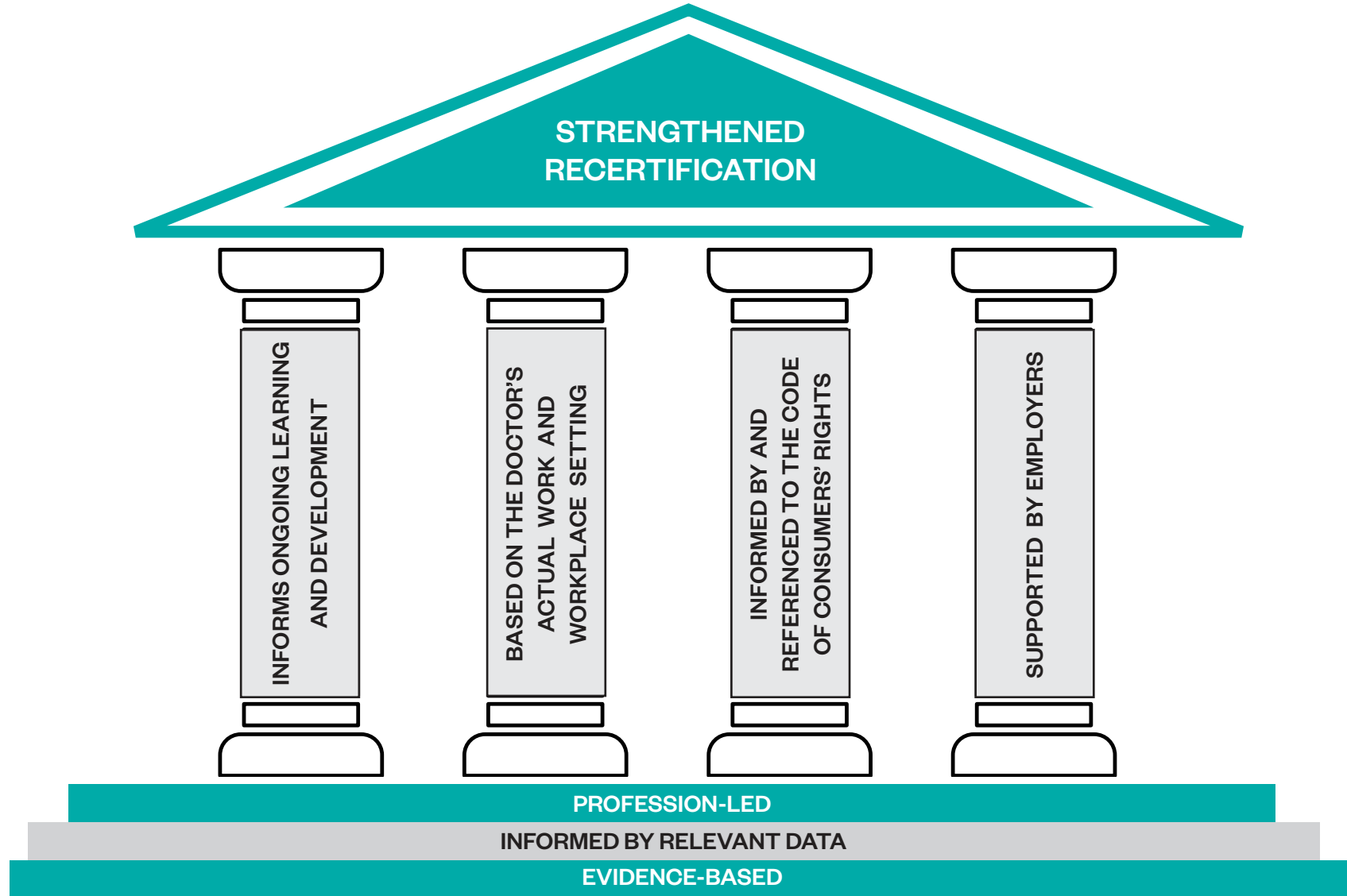
Principles

Quality recertification activities are:

- Evidence-based
- Those that inform ongoing learning and development
- Informed by relevant data
- Based on the doctor's actual work and workplace setting
- Profession-led
- Directed to clinical competencies
- Directed to cultural safety
- Informed by and referenced to the New Zealand Code of Health and Disability Services Consumers' Rights
- Supported by employers



Principles for strengthened recertification



Core elements

To reflect the agreed vision and principles for recertification, all recertification programmes for vocationally-registered doctors in New Zealand will need to include the following core elements.

- Doctors must complete a mix of activities, as prescribed by the programme provider, across all three categories of continuing professional development (CPD):
 1. Reviewing and reflecting on practice
 2. Measuring and improving outcomes
 3. Educational activities (continuing medical education – CME)
- Doctors must have a structured conversation with a peer, colleague or employer (at least annually) to discuss outcome data from activities already undertaken (e.g. CPD, educational activities, or other), the doctor's personal reflection on their practice, learning aspirations, professional development, wellbeing, and their career stage and intentions.
- Doctors should use the information gathered from undertaking activities and from their structured conversation, to inform the development and ongoing maintenance of a professional development plan (PDP).

Cultural safety and a focus on health equity must be embedded within all of the above activities.

Continuing professional development (CPD)

Cultural safety requires doctors to reflect on how their own views and biases impact on their clinical interactions and the care they provide to patients. Cultural safety and a focus on health equity must be embedded across and within all of the CPD categories below.

CPD Category 1: Reviewing and reflecting on practice

Informal or formal practice review of individuals or groups of doctors with feedback based on actual work processes. This includes activities where doctors are reviewing, reflecting and learning about their practice with colleagues, peers, co-workers and/or patients. Peer review may also include processes that accredited providers or employers may advise or mandate. The timing and frequency of undertaking certain CPD activities may vary.

CPD Category 2: Measuring and improving outcomes

This is a quality improvement process that includes review (internal or external) of a doctor's everyday work and resultant patient/health outcomes. The doctor can then analyse, reflect on and use the information gathered to develop their practice and identify professional development needs, with a view to improving patient care and health outcomes.

CPD Category 3: Educational activities (continuing medical education – CME)

Educational activities can include learning from a wide variety of resources, teaching and mentoring. All of which maintain, develop or increase medical knowledge. Ideally activities should be based on the principles of evidence-based education and ideally are guided by professional development needs, identified from Category 1 and Category 2 above.

Core elements of recertification for vocationally-registered doctors in New Zealand



Annual conversation

A structured conversation (at least annually) with a peer, colleague or employer about the doctor's clinical practice is considered an essential component of recertification programmes. The intent of this activity is to provide time for the doctor to reflect on their development needs, their goals for learning and professional activities and their intentions for the next year. Doctors are encouraged to use the information they have obtained undertaking activities across the three types of CPD to inform this conversation.

It provides an opportunity to receive constructive feedback and share best practice. It may also give doctors the opportunity to explore their satisfaction in their current role, self-care and any health and wellbeing issues so they are able to adjust their practice accordingly, set performance targets for the future, and consider longer-term career aspirations.

Professional development plan (PDP)

A PDP is a planning document that can guide a doctor's future CPD and educational activities throughout their career. It ensures a focus on those activities that will provide most benefit to a particular doctor, based on identified development needs, the identification and integration of professional and personal (non-work) objectives.

PDPs are most effective when they incorporate specific goals that are achievable, time-based and appropriate to the doctor's actual work and the setting they work in. Having a written plan helps to define and motivate achievement. The PDP is a working document that is revisited and updated regularly to reflect areas still to be addressed, and where things have been achieved. The PDP can be developed either before or after CPD activities and an annual conversation have been completed, thereby using data gathered to inform future learning and activities.



Minimum requirements for recertification programmes

Accredited recertification programme providers should design recertification programmes appropriate to the vocational scope of practice and the actual work their fellows do. Council expects providers to place emphasis on the activities that provide the most value and benefit to a doctor's practice.

Doctors registered in a vocational scope of practice must participate and satisfy all of the requirements of a recertification programme provided by an accredited medical college or other accredited organisation. Accredited providers will advise Council of any doctors who are not complying with this requirement.

Providers will need to assure Council that they are giving appropriate credit for professional development activities that are most likely to lead to improvements in practice.

Providers must meet accreditation standards for recertification programmes, which will reflect the minimum requirements. Providers will:

1. Provide access for doctors to the accredited recertification programme and continued professional development (CPD) activities appropriate to the vocational scope of practice.
2. Ensure the recertification programme includes a mix of activities across all three CPD categories:
 - a. Reviewing and reflecting on practice.
 - b. Measuring and improving outcomes.
 - c. Educational activities (continuing medical education).
3. Ensure cultural safety and a focus on health equity are embedded within all recertification activities.
4. Give greater credit and recognition for activities that evidence shows are most effective and offer the greatest value for improving a doctor's practice.
5. Provide access to processes for doctors to undertake multisource feedback.
6. Provide access to processes for doctors to participate in collegial practice visits (sometimes referred to as Regular Practice Review).
7. Provide guidance to doctors on structuring their annual conversation with a peer, colleague or employer, to ensure the greatest benefit is gained from this process.
8. Provide a facility and template for doctors to develop and maintain a PDP.
9. Have a mechanism to recognise and give credit for appropriate activities that are undertaken through other processes, such as fulfilling the requirements of another accredited recertification programme or during the course of a doctor's employment.
10. Report to Council doctors who are not meeting their recertification programme requirements.
11. Provide a method by which continuous quality improvement of the recertification programme can occur.

In addition, Council recommends that providers should offer an essentials knowledge quiz, which gives doctors the opportunity to learn more about Council's standards and statements. Providers might also like to use this as an opportunity to include vocation specific learning and topical issues.

Minimum requirements for recertification programmes for vocationally-registered doctors in New Zealand



CPD

All programmes include a mix of activities across all 3 CPD categories :

- reviewing and reflecting on practice
- measuring and improving outcomes
- educational activities



High value activities

Providers will offer processes and give appropriate credit for doctors to undertake high value activities including collegial practice visits (RPR) and multisource feedback.



Employer-led activities

Providers are expected to recognise and give credit for appropriate activities undertaken through other processes, such as fulfilling the requirements of another accredited recertification programme or during the course of a doctor's employment.



Annual conversation

Providers will give guidance to doctors on structuring their annual conversations with a peer, colleague or employer.



PDP

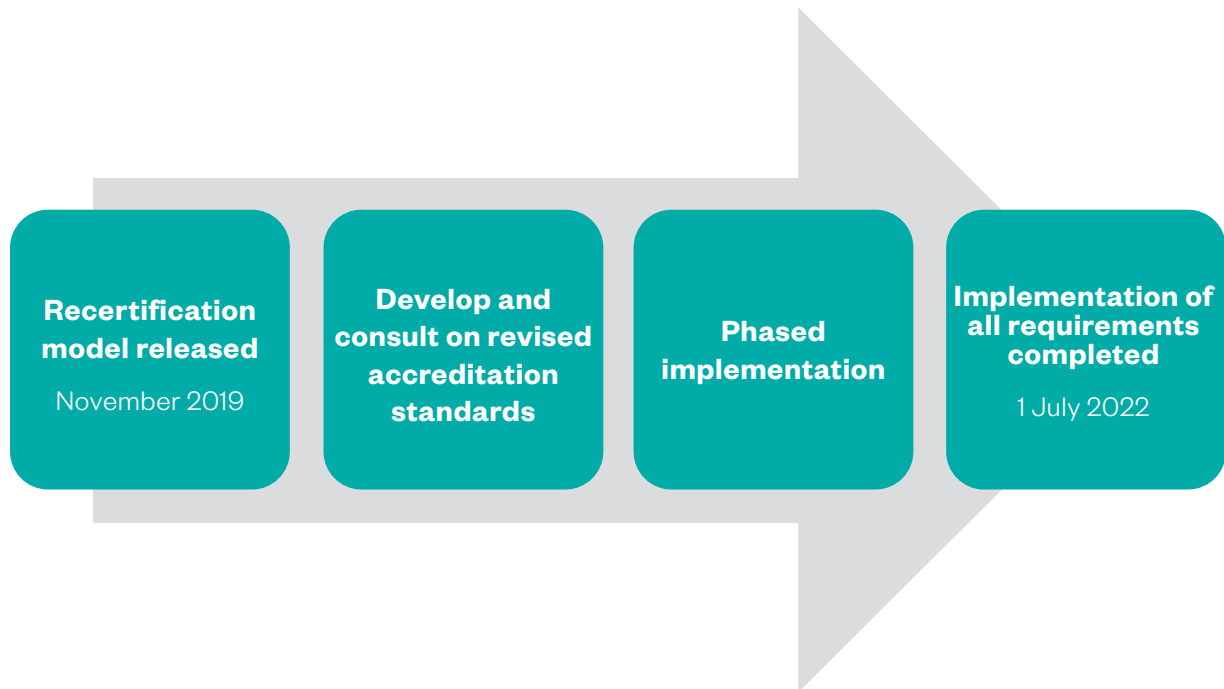
Providers will offer a facility and template for doctors to create and maintain a professional development plan.

Cultural safety and a focus on health equity

Phased implementation

Accredited recertification programme providers are expected to work towards the minimum requirements for recertification, with implementation completed by 1 July 2022.

In the interim, accredited providers who undergo an accreditation process will need to provide evidence of their progress towards implementation completed within the timeframe.





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