

**Medical Council of New Zealand, Faculty of Medical and Health Sciences,
University of Auckland and Otago Medical School, University of Otago**

Memorandum of Understanding

Section 1 – Introduction

The parties

This Memorandum of Understanding (MoU) is between the Medical Council of New Zealand (**the Council**), the Faculty of Medical and Health Sciences, University of Auckland (**the FMHS**) and the Otago Medical School, University of Otago (**the Medical School**).

Introduction

This section of the MoU is intended to assist with the interpretation and implementation of other parts of the MoU by:

- providing the context for the operation of the MoU
- clarifying the objectives and intentions of the parties, and
- describing how the FMHS/Medical School and the Council intend to interact with each other.

Purpose

The objective of the MoU is to enable the parties, working in a collaborative and equal relationship, to clarify their respective roles and responsibilities related to the evaluation and reporting of fitness to practise issues, including concerns over competence, conduct and health, that may affect a medical student's fitness for registration or ability to perform the functions required for the practice of medicine.

The MoU does not provide a definitive legal interpretation of the Health Practitioners Competence Assurance Act 2003 (HPCAA).

The parties will use all reasonable endeavours to meet the obligations under this memorandum. Each party will hold other parties accountable for their performance under the memorandum.

Values and principles

As an accredited medical programme, the fundamental purpose of the FMHS and the Medical School is to provide a course of study and training resulting in a qualification recognised by the Council for the purposes of registration as a medical practitioner.

The FMHS and the Medical School have responsibility, in delivering an undergraduate medical programme, to ensure that students are aware of, and meet, high standards of professionalism and conduct.

The Council has a responsibility to ensure that doctors granted registration are competent to practice and are fit for registration and to practise.

The parties recognise that early and timely engagement with a student who falls below expected standards of competence or conduct, or who has health concerns, will ultimately assist that student upon registration to commence medical practice with appropriate support, assistance and monitoring.

It is agreed that it is important that students understand early-on the expectations of them and that at a certain point Council will be notified of any issues.

Recognising the shared goal, the FMHS and the Medical School wish to communicate and share information with the Council, and the Council wishes to communicate and share information with the FMHS and the Medical School, in a timely way to effectively manage situations where there may be specific risks to the health and safety of the public or doctors may need additional support upon registration and commencement of their first prevocational year.

The parties wish to work cooperatively to ensure the timely registration of graduating students, to facilitate their entry to practise.

We agree to foster a long-term collaborative relationship to enable us both to meet our responsibilities and manage potential risks to the health and safety of the public. The following relationship principles will guide each of us in our mutual dealings:

- a) We will communicate with each other in an open and timely manner (including in relation to any request to review any aspect of this MoU).
- b) We will work in a collaborative and constructive manner that enables each party to fulfil its obligations
- c) We will comply with the provisions of legislation relevant to respective roles and responsibilities.
- d) We acknowledge that each party has its own respective strategic and policy directions.
- e) We will work in good faith to resolve any disagreements in a timely fashion.
- f) We will recognise and value each other's skills, expertise and commitment to ensure high quality medical practise and patient safety in New Zealand.

Meetings

The parties will meet jointly at least once a year. Topics will include reviewing the operation of the MoU, how our mutual roles and responsibilities are being delivered, and areas for improvement in the functioning of our business and relationship.

Review

A 3-yearly review will be scheduled but may be deferred if the parties agree a review is not required.

Section 2 - Roles and responsibilities

The parties recognise that health, competence and/or conduct issues prior to graduation may have an impact on the medical students' fitness for registration or their ability to perform the functions required for the practice of medicine.

The Council has stated that the functions required for the practice of medicine include:

- the ability to make safe judgements

- the ability to demonstrate the level of skill and knowledge required for safe practice
- behaving appropriately
- not risking infecting patients with whom the doctor comes in contact and
- not acting in ways that impact adversely on patient safety.

In addition, both medical programmes have placed an increasing emphasis on students taking responsibility for their own health and wellbeing. This is actioned through the Code of Conduct (section 10), the curriculum, and the graduation oath.

The respective roles and responsibilities of the parties are outlined below:

Medical Council of New Zealand

The Council's purpose is to ensure that medical practitioners are competent and fit to practise medicine, in order to protect and promote public health and safety as required by the Health Practitioners Competence Assurance Act 2003 (HPCAA).

Under section 16 of the HPCAA, the Council must ensure that no person is registered as a doctor in New Zealand whose previous or current competence, health or conduct may pose a risk to public health and safety. The Council's registration application form will require all applicants to declare any disciplinary activity related to fitness to practise, including convictions, and/or conduct issues noted while they were a medical student at any university attended or prior. Applicants are also asked to declare health issues.

The Council requires declarations from all graduating students seeking registration, asking them to declare 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.
- are, or have ever been, the subject of university disciplinary proceedings, or
- have been involved with the university's fitness to practice committee for any matter (health, competence or conduct) which remains unresolved and/or requires ongoing monitoring and/or support.

Council will present annually to medical students about the Council's role and explain that a supporting approach is taken when considering disclosures (and possibly provide case studies to illustrate this point). This will occur within the year or years of the programme, agreed between the Council and the FHMS/medical school.

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The parties recognise that a responsibility falls on the FMHS and the Medical School to notify Council of competence and conduct concerns and that this includes concerns that are identified in advance of students making application for registration.

The FMHS and the Medical School will, as early in the final year as possible, advise Council if it has reason to believe that a medical student has health conditions, conduct, or competence concerns that may have an impact on their ability to practise safely.

The FMHS and the Medical School will provide the necessary details to assist the Council's Health Committee to undertake a fitness for registration assessment and to determine what requirements to put in place, if any.

Promoting professionalism

The FMHS and the Medical School will provide a professionalism curriculum to ensure that medical students learn expected standards of professionalism. The FMHS and the Medical School will ensure that medical students are familiar with Council's standards and statements.

Identifying and managing fitness to practise matters

The FMHS and the Medical School will each maintain a Fitness to Practise policy that it considers appropriate to managing fitness to practise concerns.

The policy will include remedial and supportive mechanisms that enable medical students to remain in the undergraduate programme wherever possible, providing the proposed remedial action does not place the public, the medical student or the University at risk before or after graduation. As far as possible, the FMHS and the Medical School will endeavour to resolve the concerns at an early stage, with the medical student's cooperation.

At a minimum, the policy will outline three areas of concern which may affect fitness to practise:

Health or personal Issues

Section 45 (5) of the HPCAA requires the FMHS and the Medical School to notify the Council if there is "reason to believe a student who is completing a course would be unable to perform the functions required for the practice of medicine because of some mental or physical condition".

Issues that may affect the medical student's future ability to practise medicine, including but not limited to:

- Mental health conditions
- Physical impairment
- Infectious diseases including transmissible blood-borne viral infections
- Drug and alcohol issues.

These are likely to:

- affect a medical student's studies, progression or career pathways
- expose the medical student, patients or staff members to potential risk
- expose the FMHS and the Medical School or partner organisation to potential risk.

Professional attitudes and behaviours

Issues of concern regarding professional attitudes and behaviours during the programme including:

- Failure to develop and maintain attitudes and behaviours which are expected of medical professionals in their conduct towards patients and colleagues, including honesty, reliability, responsibility, accountability
- Academic misconduct

- Poor attendance
- Inappropriate behaviour where this is in breach of or judged to be below minimally accepted standards
- Contravention of significant aspects of ethical codes or policy, eg. Sensitive examinations.

Issues external to the programme

Issues regarding the actions of medical students occurring outside the programme, such as any offence which is potentially punishable by imprisonment (for example traffic offences, alcohol/ drug-related offences and more serious criminal offences). Where a student is granted a discharge without conviction or is granted diversion by the police with regard to such an offence, the student must disclose this information to the head of programme.

Classification of issues

Any concerns raised are classified as follows:

Non-critical

An issue that raises concerns about future fitness to practise, that would best be dealt with through support and counselling. Examples would include poor attendance, or relatively minor inappropriate behaviour.

Critical

Issues that raise much more significant concerns in regards to future fitness to practice issues or career options. Examples would include dishonesty, serious health issues, and significant contraventions of a policy or drug and alcohol abuse. Repeated non-critical concerns may escalate to this category.

Extraordinarily critical

An event giving rise to the need for immediate action because of the likelihood of significant harm, either involving a medical student, or resulting from the action of a medical student.

Section 3 - Competence/conduct/health and fitness to practice – Preparing for registration with the Council

The FMHS and the Medical School consider that if a student is not fit for registration / practice in New Zealand, the medical student will not satisfy the degree requirements.

The FMHS and the Medical School will notify the Council during a medical student's 6th year, if a medical student has been referred to the FMHS or the Medical School's fitness to practise committee and the issue remains unresolved and/or requires ongoing monitoring or support. The notification is made so the Council can put in place any additional arrangements or support that may be required to ensure, once the medical student is registered, that he or she, and the public are safe.

The FMHS and the Medical School will require any enrolling medical student to sign a declaration that they understand that the Council will be notified of any issues before a Fitness to Practise Committee in the medical student's final year that remain unresolved (and therefore requiring ongoing monitoring or support) relating to the health, competence or conduct of a graduating medical student.

The Council will maintain a template notification form to assist the FMHS and the Medical School to provide key information to Council. (refer Appendix 3).

For this purpose, the Council will

- Nominate a member of the Health team to liaise
- Ensure assessment are completed to ascertain if a medical student is fit to practise
- Transition the student from FMHS or Medical School oversight to Health Committee oversight upon registration.

The FMHS and the Medical School acknowledge the need to provide Council with both fitness to practise information and graduation lists as early as possible. As far as practicable the FMHS and the Medical School will each develop with Council an agreed timeframe for providing Council with this information.

Signatures



21st July 2021

Date signed

Date signed



27 July 2021

Joan Simeon

Date signed

CEO, Medical Council of New Zealand

Appendices

- **Appendix 1** (references to relevant sections of HPCAA) – *this is still current*
- **Appendix 2** (Council statements) – *this needs updating*
- **Appendix 3** (Medical Council Notification Form)

