



# Vocational Practice Assessments

This policy must be read with reference to Te Kaunihera Rata o Aotearoa | Medical Council of New Zealand (Council) *Policy on registration within a vocational scope of practice - Doctors who do not hold the approved New Zealand or Australasian postgraduate qualification.*

This policy applies to specialist international medical graduates (IMGs) who have a combination of training, qualifications and experience determined by Council to be *as satisfactory as* a New Zealand-vocationally trained doctor registered in the same vocational scope and have been granted eligibility for registration within a provisional vocational scope of practice (**assessment pathway**).

The vocational practice assessment (VPA) is used by Council to assess the IMG's eligibility for vocational registration.

## Purpose

1. To determine eligibility for vocational registration, the VPA is Council's preferred method of assessing whether an IMG is practising at the level of a doctor holding the prescribed Fellowship, Diploma or Certificate of the relevant medical College and is registered in the same vocational scope.
2. The VPA is designed to assess the IMG's competence to practise independently and unsupervised across all domains of competence including:
  - medical care
  - communication
  - collaboration
  - management
  - scholarship
  - professionalism.

## Who needs a VPA?

3. An IMG deemed eligible for provisional vocational registration (**assessment pathway**) is usually required to undergo a VPA when:
  - The assessment of their qualifications, training and experience has identified deficiencies.
  - Their training programme did not include regular in-training assessments.
  - They have not completed any clinical examinations (e.g. assessment and observation of the doctor undertaking clinical tasks at their place of employment or role playing with actors portraying patients).
  - They have not completed any external examinations (e.g. national or regional level examinations).
  - They have not completed any exit or final examinations at the conclusion of their postgraduate training.
  - They have not completed an objective and independent accredited postgraduate training programme.
  - They have not been working in a health system comparable to New Zealand.

### **What is a VPA?**

4. A VPA is a workplace-based assessment. It is generally a one-day assessment, where two assessors (doctors registered within the same vocational scope in which the IMG has applied) are onsite, observing and interacting with the doctor and their colleagues using a set of assessment tools.

### **Standard Tools**

5. The VPA typically includes the following tools:
  - Opening interview
  - Observation of procedures (where appropriate)
  - Observations of interactions with patients in an outpatient setting (where appropriate)
  - Observations of interaction with patients during a ward round (where appropriate)
  - Review of 20 consecutive patient records from their caseload
  - Case-based oral assessment, based on the knowledge and competencies required for the specific scope of practice, records selected for records review and observation of IMG with patients
  - Interview with colleagues
  - Peer ratings from medical and non-medical colleagues using the peer ratings tool (completed prior to the day of assessment)
  - Closing interview.

### **Alternative VPA tools**

6. If Council determines that the tools typically included in a VPA are not suitable for the vocational scope being assessed, alternative tools will be included in the VPA *terms of reference*.

### **Supervision reports**

7. Council's supervision reports are another form of competence assessment required from all doctors registered in a provisional scope of practice. Supervision reports must be completed and submitted at 3-monthly intervals (quarterly) to Council, during the supervised period. These reports are in addition to a VPA and other types of reports.  
Copies of the reports are provided to VPA assessors for assessment purposes.

### **Procedural reports**

8. Council may also require procedural reports to be completed specific to a particular vocational scope. These are in addition to a VPA and Council's supervision reports.

### **VPA procedure**

9. On completion of the supervision period, arrangements for the VPA will commence. This includes contacting the IMG and the assessors to identify a date for the VPA to take place.

### **Terms of reference**

10. Once a date is agreed, the IMG is sent *terms of reference* outlining:
  - what happens on the day of the VPA;
  - the proposed assessors;
  - the tools used in the VPA; and
  - where the VPA takes place.
11. The IMG is given the opportunity to comment on the *terms of reference* and raise any concerns, such as conflicts of interest with the assessors. If any concerns are raised, Council considers them and may alter the *terms of reference* and/or select alternative assessors. If the IMG is satisfied with the arrangements, they sign and return the *terms of reference*.

12. Council is unable to progress the VPA until the *terms of reference* are signed by the IMG.

### **Selecting VPA assessors**

13. Council liaises with the medical College regarding potential assessors. Council's current criteria for selecting assessors are whether the assessor is:

- in good standing with the Council and the relevant medical College (if applicable);
- vocationally registered in the same scope in which the IMG has applied to be registered;
- experienced in practising in a sub-specialty area (if applicable);
- experienced in assessment methodology (if applicable).

14. If there are delays in receiving the medical College's advice on potential assessors, Council may identify assessors by alternative means, to ensure the VPA is completed in a reasonable timeframe.

### **VPA venue**

15. The VPA is usually held at the IMG's place of employment or at the tertiary centre where they are undertaking their tertiary centre experience.

16. Discretion may be used for where the VPA should be held in particular circumstances (taking into account the advice of the medical College and/or the VPA assessors and/or Council's medical adviser(s)).

### **Timing of the VPA**

17. The VPA is organised to occur after completion of the full supervised period and the IMG must have been practising continuously for at least 3 months.

18. If there is a break of 1 month or more in the IMG's employment in New Zealand during this time, the IMG is required to return to work for at least 3 months of continuous supervised practice (one block of time) before the VPA is undertaken.

19. If the IMG leaves New Zealand to practise abroad and does not complete their full period of supervised practice, or the required VPA, and then returns to New Zealand, they need to meet the following requirements before the VPA:

- complete at least 3 months of continuous satisfactory supervised practice under assessment or satisfactorily complete the remaining period of their supervised practice (whichever is the longer); and
- fulfil any outstanding assessment requirements.

### **Outcome of the VPA**

20. Once the VPA has been completed, the assessors send their report to Council staff with a recommendation. This is usually 3 weeks after the VPA. The assessors will advise whether the IMG is:

- practising at the level of a doctor holding the prescribed qualification (Fellowship, Diploma or Certificate of the relevant medical College)
- practising at the level of a doctor registered in the same vocational scope of practice
- competent to practise independently and unsupervised across the broad vocational scope of practice.

### **Council Decision**

21. The assessors' report is considered by Council. Council will resolve whether the VPA is *satisfactory* or *not satisfactory*.

22. If Council resolves it is *not satisfactory*, the doctor must successfully undergo a further vocational practice assessment to be eligible to apply for registration in a vocational scope of practice.

23. If Council resolves it is *satisfactory*, then Council will invite the applicant to apply for a change of scope from provisional vocational to a vocational scope of practice.

**Concerns identified in the report**

24. If the VPA assessors identify concerns about a doctor’s competence (beyond whether the doctor is competent to practice in the vocational scope), conduct or health, they will be considered by the Registrar and referred as appropriate.

**Reviewing this decision**

25. If Council has resolved the VPA was *not satisfactory*, the doctor may request a review of this decision in accordance with the Health Practitioners Competence Assurance Act 2003 (HPCAA).

**Related legislation and policy**

- Vocational practice assessments are authorised under section 19(5) of the HPCAA.
- Council’s *Policy on registration within a vocational scope of practice - Doctors who do not hold the approved New Zealand or Australasian postgraduate qualification* must be read in conjunction with this policy.

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