



COS7: Application to amend practising certificate

Special purpose scope

SECTION 1 – IMPORTANT INFORMATION

- Please use this form to apply to Council for a change in employment, work location or supervision arrangements while you are registered in a special purpose scope of practice. Our processing time is **20 working days** from receipt of a complete application.
- Council approval must be given before commencing in a different position or supervision arrangement. Commencing work before approval has been granted is considered a breach of your professional obligations as a medical practitioner. You must wait until the requested changes are approved and endorsed on your practising certificate. Your practising certificate will **not** be back dated.
- We require up to date supervision reports to be provided through our online portal.

Reminder: Registration within a special purpose scope is not a pathway to permanent registration

SECTION 2 – TO BE COMPLETED BY APPLICANT

Last name:		Registration number:	
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First name:	
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Postgraduate training pathway

Change required (tick one or more boxes)		Documents to be provided
<input type="checkbox"/>	Extension to current employment	<ul style="list-style-type: none"> • Job offer – if changing employer or extending current employment • Training objectives – if changing employer or extending current employment • CMO / practice principle confirmation of training position – if changing employer • Renewed evidence of guaranteed employment in home/sponsor country – if extending current employment • Supervision plan
<input type="checkbox"/>	Change of work location	
<input type="checkbox"/>	Change of employer	
<input type="checkbox"/>	Change of supervisor	

Locum tenens pathway

Change required (tick one or more boxes)		Documents to be provided
<input type="checkbox"/>	Extension to current employment	<ul style="list-style-type: none"> • Cover letter – outlining the proposed employment and supervision arrangements including the location(s) • Job offer – if changing employer or extending current employment • Supervision plan – if changing employer, work location or supervisor
<input type="checkbox"/>	Change of work location	
<input type="checkbox"/>	Change of employer	
<input type="checkbox"/>	Change of supervisor	

Research pathway

Change required (tick one or more boxes)		Documents to be provided
<input type="checkbox"/>	Extension to current employment	<ul style="list-style-type: none"> • Job offer – if changing employer or extending current employment • Ethic committee approval – if changing employer • Supervision plan
<input type="checkbox"/>	Change of work location	
<input type="checkbox"/>	Change of employer	
<input type="checkbox"/>	Change of supervisor	

<input type="checkbox"/> Teleradiology pathway			
Change required (tick one or more boxes)		Documents to be provided	
<input type="checkbox"/>	Change of work location	<ul style="list-style-type: none"> Cover letter – outlining the proposed employment and supervision arrangements including the location(s) Job offer – if changing employer Credentialing documents – if changing employer Supervision plan – if changing work location or supervisor 	
<input type="checkbox"/>	Change of employer		
<input type="checkbox"/>	Change of supervisor		
<p>I understand that: The Medical Council may review my registration at any time to ensure that I am practising within my scope of practice. My clinical supervisor will report to the Medical Council every three months or as requested.</p>			
Signed:		Date:	dd / mm / yyyy
SECTION 3 – TO BE COMPLETED BY EMPLOYER (OR PROPOSED EMPLOYER IF EMPLOYER IS CHANGING). DATES MUST MATCH THOSE LISTED IN THE JOB OFFER.			
Position appointed to:		Scope of practice:	
Employer:			
Work location(s) – please list all:			
Position:	<input type="checkbox"/> Full time <input type="checkbox"/> Part time	Hours per week:	
Proposed start date of change:	dd / mm / yyyy	Proposed end date of change:	dd / mm / yyyy
Name of signatory:		Position:	
Signed:		Date:	dd / mm / yyyy
SECTION 4 – TO BE COMPLETED BY CURRENT SUPERVISOR (OR PROPOSED SUPERVISOR IF SUPERVISOR IS CHANGING)			
Last name:		Registration Number:	
First name:			
Current practising certificate:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Position:	
I am currently registered within a vocational scope:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Scope:	
<ul style="list-style-type: none"> I have read Council's IMG orientation, induction and supervision guide and understand what is required of me. I agree to supervise the applicant and to complete supervision reports every three months, or as requested by the Medical Council. 			
Signed:		Date:	dd / mm / yyyy
SECTION 5 – TO BE COMPLETED BY CHIEF MEDICAL OFFICER (CMO) OR PRACTICE PRINCIPAL **			
<p>In the hospital environment, the signature of the CMO or their delegate is required. In the primary care environment, the signature of the practice manager/practice principal or their delegate is required. I understand that the applicant is under supervision and I accept responsibility for ensuring appropriate supervision is implemented. ** This section must only be completed if you are changing employers.</p>			
Name of signatory:		Position:	
Signed:		Date:	dd / mm / yyyy

Supervision Summary for Supervisors of International Medical Graduates

Supervision is a requirement for registration of all doctors registered in a provisional general, provisional vocational, or special purpose scope of practice.

What do we mean by supervision?

'Supervision is the provision of guidance and feedback on matters of personal, professional and educational development in the context of a doctor's experience of providing safe and appropriate patient care.' Good supervision should enable the doctor to review and develop their practice in a supportive environment, and enhance their knowledge, skills and professionalism. In addition, supervision encourages a culture of continuous learning and development. It will be both formal (scheduled and planned) and informal.

Why do we require supervision?

Supervision supports a doctor's practice, and enables an assessment of the doctor's performance while they become familiar with the New Zealand health system and the required standard of medical practice in New Zealand. It assures Council that a doctor is able to practise safely, with support and oversight, until the doctor is able to demonstrate that they are able to practise competently and safely independently.

Responsibilities of the supervisor, supervisee and employer

The general responsibilities of a **supervisor** will include:

- Ensuring that the IMG is participating in their orientation and induction programme.
- Providing clarity about how both parties will communicate during normal working hours and after hours (where applicable). This includes setting ground rules for communicating with other team members.
- Making sure that protected supervision time is scheduled regularly and kept free of interruptions.
- Being readily available and approachable.
- Where applicable, providing clear clinical notes and comprehensive management plans, which include parameters clarifying when specialist involvement is required for a particular patient.
- Monitoring and verifying what the IMG is doing, and that they are capable of carrying out their duties competently.
- Raising performance issues early. The sooner these are addressed, the more opportunity the IMG has to take corrective action.
- Identifying whether poor performance is caused by poor communication skills and making arrangements for communication skills tuition, when necessary.
- If the supervisor believes that the IMG's practice may put patient safety at risk, the supervisor should report concerns to their employer and to Council.
- Arranging to regularly review the IMG's understanding and knowledge of key clinical areas.
- Ensuring the IMG is working within their approved scope of practice and alerting the Council if this not the case.
- Understanding the requirements that the IMG must complete in order to gain full registration (for those on provisional scopes), and providing support, where appropriate, to help the IMG meet these requirements.

The general responsibilities of the **supervisee** will include:

- Making a commitment to engage fully in the supervision process.
- Taking responsibility for ensuring that an appropriate supervision schedule has been arranged, diarising these appointments and giving it priority.
- Working with the supervisor to set supervision and educational objectives.
- Keeping a supervision logbook, including participation in continuing medical education activities.
- Communicating clearly and responsibly with the supervisor.
- Being ready to accept constructive feedback, and being receptive to changing behaviour where necessary.
- Taking part in audit and peer review or group activities.
- Asking for advice appropriately.
- Asking for more support or mentoring, should this be necessary.
- Contacting the supervisor early on when concerns or issues arise, or when they feel out of their depth in any way.
- Recognising limits of professional competence.
- Obtaining approval from Council for any changes to supervision arrangements, registration conditions or requirements before they are implemented.

- Informing the Council if the conditions or requirements of supervision are not being met.

The general responsibilities of the **employer** will include:

- Ensuring supervision is provided according to Council's policies.
- Facilitating the provision of protected time for the IMG and supervisor.
- Ensuring the IMG is adequately oriented to organisational policies and procedures.
- Advising Council of any concerns about the IMG if they form the opinion that there is a risk to the public that cannot adequately be addressed by implementing local measures.
- Understanding the requirements that the IMG must complete in order to gain full registration (for those on provisional scopes), and providing support, where appropriate, to help the IMG meet these requirements.

Reporting requirements

While an IMG holds a provisional scope of practice, they are required to submit supervision reports to Council every three months. The reports should be completed and signed by the IMG and their supervisor. If required, the supervisor will need to be willing to discuss any concerns raised in the reports, and the measures put in place to manage issues of public health and safety with Council staff.

A comprehensive [IMG orientation, induction and supervision guide](#) is available on Council's website.