



Policy on recertification programmes for doctors – August 2021

Te Kaunihera Rata o Aotearoa Medical Council of New Zealand (Council) sets and recognises recertification programmes for doctors under section 41 of the Health Practitioners Competence Assurance Act 2003 (HPCAA).

The purpose of recertification is to ensure that doctors are competent to practise within their scope(s) of practice and should ensure that each doctor is supported by education that provides for their individual professional development needs.

This policy is about recertification requirements for doctors practising in New Zealand in a vocational scope or the General scope (excluding PGY2 doctors).

All doctors must fully participate in the required recertification programme or programmes and participation is audited.

Who is required to be in a recertification programme?

Council requires all doctors registered and practising in either the General scope of practice (excluding doctors in their second postgraduate year (PGY2)), or in a vocational scope of practice, to participate in the appropriate recertification programme or programmes, unless otherwise exempt.

The required recertification programme depends on the doctor's scope of practice.

Recertification requirements take into account the level of potential risk of harm the doctor's practice poses to the health and safety of the public.

Recertification requirements for doctors practising clinically in their vocational scope of practice

*Doctors practising **only** in their vocational scope*

A doctor practising only in their vocational scope must participate in a Council-approved recertification provider programme.

*Doctors practising in a vocational scope **and** the General scope*

A doctor practising within a vocational scope may also choose to work in another area of medicine under their General scope of practice. A doctor practising in their vocational scope and in another area of medicine in their General scope, must participate in a Council-approved recertification provider programme and must also establish a collegial relationship with a doctor who is registered and practising in the relevant vocational scope for that area of medicine.

Alternatively, the doctor must provide Council with evidence that the recertification programme they participate in for their vocational scope, also adequately covers the breadth of their work under the General scope.

Doctors practising in two or more vocational scopes

A doctor practising in two or more vocational scopes must participate in all required approved recertification programmes. The recertification providers may have an agreement in place to recognise certain recertification activities, however the doctor must check with each recertification provider for guidance to ensure they are complying with all the requirements for each programme.

Recertification requirements for doctors practising clinically in the General scope of practice

Doctors practising in a single area of medicine

A doctor practising in a single area of medicine must either participate in:

- an accredited vocational training programme for the relevant area of medicine; or
- *Inpractice*, administered by bpac^{nz}.

Doctors practising in an accredited vocational training programme and in another area of medicine under the General scope

A doctor practising in an area of medicine in an accredited vocational training programme and in another area of medicine (under their general scope) must establish a collegial relationship with a doctor who has registration in the relevant vocational scope for the second area of medicine.

Doctors practising in the General scope, and registered in a vocational scope, but who are not practising in their vocational scope

A doctor who is not practising in their vocational scope may practise in the General scope, and will be required to participate in an approved recertification programme for doctors in the General scope of practice (that is, either an accredited vocational training programme, or *Inpractice*).

Recertification requirements for doctors practising in non-clinical practice

Doctors whose practice of medicine does not relate to the care of individual patients may have different recertification requirements if their practice is assessed as posing a low risk of harm to the health and safety of the public. Council may impose conditions to have these doctors' scopes limited to non-clinical practice.

Doctors practising non-clinically in their vocational scope and in the non-clinical recertification programme of their recertification provider

A doctor must participate in their recertification provider programme (if the provider offers a recertification programme for members in non-clinical practice).

Doctors practising non-clinically in the General scope or in a vocational scope, and where there is no non-clinical recertification programme offered by their recertification provider

Council will make an assessment of the level of risk of harm to the health and safety of the public posed by such a doctor. The recertification requirements will be set accordingly. A doctor who has had their risk of harm assessed as low will ordinarily be required to establish a collegial relationship or a relationship with a CPD Associate.

Council will only approve a CPD Associate relationship if it is satisfied a collegial relationship cannot be formed.

Exemptions

Council currently exempts doctors who are usually based abroad and travel to practise in New Zealand for no more than 2 months per year (cumulatively). This will apply only if the doctor lives and practises abroad and is enrolled and actively participating in a recertification programme recognised by the relevant overseas authority, and can provide supporting evidence.

Council can consider exemptions from the requirement to participate in a recertification programme, on a case-by-case basis. Council has to consider, in making an exemption, how it can ensure that the medical practitioner is competent to practise within the relevant scopes of practice despite not participating in the required recertification programme.

Collegial relationships

In cases where a doctor is required to practise within a collegial relationship, they must establish this relationship with a doctor who is registered in the relevant vocational scope of practice for that area of medicine.

The objective of the relationship is to ensure that the doctor's professional development plan (PDP) and continuing professional development (CPD) activities are appropriate for the area of medicine they are working in.

A collegial relationship must be formally agreed. The purpose of the collegial relationship agreement is to set out the terms of reference for the collegial relationship and clarify the objectives and responsibilities of each colleague.

Responsibilities of the doctor

The doctor must:

- organise meetings with their collegial relationship provider, lasting at least one hour, initially six times a year, and at least four times a year in subsequent years
- provide materials for discussion and review (for example multisource feedback)
- make a record of all collegial relationship meetings
- record all details of CPD activities completed
- update their PDP following collegial relationship meetings as appropriate.

Responsibilities of the collegial relationship provider:

The collegial relationship provider must:

- be available for meetings
- ensure the doctor makes an adequate record of the meetings
- review feedback and other educational and quality assurance material and support the doctor to reflect on their PDP utilising feedback to inform their learning needs
- take appropriate action if concerns arise about the doctor's fitness to practise.

CPD Associates

The role of a CPD Associate is to guide the doctor to ensure their competence is maintained in the area the doctor is working in.

A CPD Associate does not need to be a doctor.

Responsibility of the doctor working with a CPD associate

The doctor must:

- arrange to see their CPD associate as agreed during the year.
- undertake to do what is necessary to ensure their knowledge and skills relevant to the work they are doing is maintained to the required standard. This is necessary to protect the health and safety of the public.

Responsibility of the CPD associate

- be available for meetings
- support the doctor to reflect on their PDP utilising feedback to inform their learning needs
- assist the doctor to undertake educational activity to ensure the doctor's knowledge is kept up to date and is relevant to the type of work they are doing.
- remain sufficiently aware of the doctor's practice to be able to provide guidance and support to the doctor in identifying appropriate educational activity.

Non-compliance with recertification

If a doctor does not satisfy the requirements of their recertification programme, Council has authority to order changes to the health services a doctor is permitted to perform, or include conditions on the doctor's scope of practice.

What does a recertification programme involve?

Accredited providers determine the activities that are appropriate for each scope of practice. Council's website has a [list of accredited recertification providers](#) who can be contacted for further information on their programmes.

Links to other policies, guidance and related documents

[Strengthening recertification requirements for vocationally registered doctors – November 2019](#)

[Collegial relationship guide](#)

[Policy on practising certificates](#)

Date	Details
August 2021	Approved by Registrar
	<i>Replaces DM#11167025 Policy on Recertification (2017)</i>
Mar 2026	Scheduled for review