

Advisory Panel Guide

and ePort guide for Advisory Panel members

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Advisory Panel Guide

Role of the Advisory Panel

The role of the Advisory Panel is to assess the overall performance of interns at the end of their postgraduate year 1 (PGY1) and decide whether they have met the required standard to be registered in a general scope of practice and proceed to the next stage of training.

This assessment takes place once the intern is nearing the end of what is expected to be their fourth satisfactorily completed clinical attachment.

The use of an Advisory Panel adds further robustness to the assessment of interns and ensures that prevocational educational supervisors are better supported, and not placed in the role of advocate and judge.

The Advisory Panel¹ makes a recommendation to the Medical Council of New Zealand (Council), who as regulator is the decision maker.

Who is on an Advisory Panel

The panel will comprise of the following four members:

- a CMO or CMO delegate who will Chair the panel
- the intern's own prevocational educational supervisor
- a second prevocational educational supervisor
- a lay person (the lay person must not be a registered health professional, nor should they be an employee of any DHB).

DHBs may need to establish multiple Advisory Panels depending on how many interns and prevocational educational supervisors they have.

How the Advisory Panel makes recommendations

The Advisory Panel assesses and makes its recommendations to Council in ePort. See pages 7-17 for more information on using ePort.

Important to note:

As the Advisory Panel processes happens within ePort, the Advisory Panel does not need to meet in person to make their recommendations. Many training providers find meeting in person beneficial, however this is not a requirement.

Timing for the Advisory Panel

Advisory Panels may need to consider information about an intern more than once. For the majority of PGY1 interns, Advisory Panel assessments will take place halfway through their fourth satisfactory attachment.

Before this can happen the mid-attachment meeting (between the clinical supervisor and intern) must be completed. It is the role of the training provider to monitor ePort and ensure clinical supervisors are completing their mid-attachment meetings on time.

¹ Advisory panel members are considered agents of Council.

Halfway through quarter 4

For interns who have progressed well, assessing their progress halfway through their fourth attachment will ensure that there are no delays with processing their application for a general scope of practice at the end of their PGY1 year. An Advisory Panel's recommendation is subject to the intern receiving a satisfactory End of clinical attachment assessment in their current (fourth) attachment.

Council can approve a general scope of practice with endorsement once:

- the Advisory Panel has made a recommendation for a general scope of practice for that intern
- the fourth clinical attachment has been completed satisfactorily
- the intern has applied for a general scope of practice.

End of quarter 4

The Advisory Panel considers interns who have had a conditional report, or have struggled, at the very end of their fourth attachment. It is important that this occurs at the very end to allow the Advisory Panel to consider their fourth End of clinical attachment assessment.

If the Advisory Panel believes the intern has not met the requirements for a general scope of practice they will recommend the intern completes another clinical attachment or completes additional learning before they can be reassessed by the panel.

If the intern insists the Advisory Panel make a recommendation to Council, the Advisory Panel would need to advise in its recommendation that the intern has not met the requirements for a general scope of practice. Council's process would then be initiated and the intern would be advised of the process and provided an opportunity to respond.

Council will be responsible for ensuring the consistency and adequacy of recommendations made by the Advisory Panels. The training provider will be responsible for ensuring their Advisory Panel follow good process.

Additional meetings

The Advisory Panel will need to convene at other times throughout the year to consider interns who have:

- had a delayed start
- taken time off during their training
- or had an unsatisfactory clinical attachment.

Information that the Advisory Panel reviews

The Advisory Panel will review and use all available relevant information from ePort which could include:

- End of clinical attachment assessments.
- Progress in attaining the required skills and competencies across the 14 learning activities.
- A summary of areas for further development that have been identified throughout the year and have not yet been achieved.
- The setting and completion of goals in the intern's Professional Development Plan (PDP).
- Evidence of ongoing learning and responding to feedback.
- Additional learning completed.
- Amount of community based experience completed.
- Advanced cardiac life support (ACLS) certification at the standard of New Zealand Resuscitation Council CORE Advanced less than 12 months old.
- The proposed PDP and intentions for PGY2.

Requirements for registration in a general scope of practice

To be eligible to apply for registration within a general scope of practice at the end of PGY1, an intern must:

- Satisfactorily complete four accredited clinical attachments.
- Substantively attain the learning outcomes outlined in the 14 learning activities of the curriculum.
- Achieve certification for advanced cardiac life support (ACLS) at the standard of New Zealand Resuscitation Council CORE Advanced (within the past 12 months).
- Be granted a recommendation for registration in a general scope of practice by a Council approved Advisory Panel.

Factors the Advisory Panel will consider

The recommendation of the Advisory Panel will take into account whether the intern has:

- actively engaged in ongoing learning and responded to feedback
- recorded self-reflections on each of the 14 learning activities (individual self-reflections will not be visible to the Advisory Panel)
- sufficiently addressed all issues arising from the 'areas for improvement' sections of the End of clinical attachment assessments, particularly those that have any implications on safety to practice.

PDP for PGY2

In addition to reviewing progress that the intern has made in PGY1, the Advisory Panel will also review the intern's goals set in their PDP to be completed during PGY2. The Advisory Panel needs to be assured that the goals set for PGY2 are appropriate. PGY2s have an endorsement on their practising certificate which states that they are required to work in accredited clinical attachments and to maintain a PDP.

The goals in the PDP should be targeted around the intern's:

- Level of proficiency against the learning activities.
- Areas for further development identified on previous clinical attachments.
- Areas for development identified through the MSF process (if completed).
- Community-based experience.
- Vocational aspirations.

The Advisory Panel is responsible for endorsing the PDP as appropriate for PGY2 when they make the overall assessment of the intern's performance and whether to recommend a general scope of practice.

Flexibility for PGY2

The intention behind the PGY2 year is to provide a greater degree of flexibility, including entering a vocational training programme or practising overseas.

Working overseas in PGY2

There is flexibility for interns to practise overseas during PGY2 and the time practised overseas may be able to be counted towards the PGY2 requirements. Interns need to provide the Advisory Panel information about their intentions and include goals around this is their proposed PDP.

The Advisory Panel may approve all or part of PGY2 requirements to be completed in Australia, UK or Ireland subject to one of the following conditions:

- Within Australia a prevocational training position under the supervision of a vocationally (specialist) registered doctor in a position approved for prevocational medical training.
- Within the UK a position in an approved practice setting that has been recognised by the General Medical Council (GMC) for prevocational medical training in the UK.
- Within Ireland a supervised position approved by the Irish Medical Council (IMC) for prevocational training.

If an intern wishes to practise in a setting outside of the above specified criteria, they will need to submit an application to Council **before they go overseas**. The application form is available <u>on Council's website</u>.

The Advisory Panel will need to consider whether the proposed PDP is appropriate for the individual intern and will allow for continued structured learning and assessment similar to New Zealand clinical attachments.

Interns need to maintain their record of learning in their ePort, make progress towards the required skills and competencies across the 14 learning activities, and continue to upload supervision reports, while practising overseas.

Vocational training in PGY2

There is flexibility for interns to enter a formal vocational training programme during PGY2. Interns that wish to do this are still required to complete their training in prevocational medical training accredited clinical attachments, maintain their PDP and continue to record self-reflections on the 14 learning activities in ePort. All requirements for the vocational training programme are in addition to Council's requirements.

Interns need to enter a PDP goal that describes their intention to participate in the particular vocational training programme during PGY2.

The Advisory Panel considers the intern's intention to enter vocational training in PGY2 at the time they endorse the PDP for PGY2 as being acceptable.

Additional information:

End of clinical attachment assessment outcomes

Conditional pass

Requires development to be demonstrated on the next clinical attachment to be considered satisfactory.

Conditional Pass. Identified areas for improvement need to be described in the PDP which needs to be agreed to by the prevocational educational supervisor, clinical supervisor and intern. Improvements must be observed on the next clinical attachment in all areas identified and overall performance must be considered satisfactory for the conditional pass to be considered a satisfactory attachment.

An End of clinical attachment assessment that is marked as a conditional pass will require identified areas for improvement to be detailed in the PDP section of ePort. The areas identified in the PDP must be agreed to by the prevocational educational supervisor, clinical supervisor, and the intern. Areas for improvement must be observed on the next clinical attachment, with an overall rating of satisfactory. This will allow for the conditional attachment to be considered as satisfactory.

If a clinical attachment rated as conditional is followed by another attachment rated as conditional then the first clinical attachment with a conditional rating may not be counted as satisfactory. However the second conditional clinical attachment may be counted, as long as improvement is demonstrated on the attachment immediate following, as described in the process above.

Unsatisfactory clinical attachment

Does not meet standards required of a registered medical practitioner.

Performs significantly below that generally observed for this level of experience. Requires the prevocational educational supervisor, clinical supervisor and the intern to meet to identify goals addressing the competency deficiencies identified above, and update the PDP to reflect these.

Interns who receive an unsatisfactory assessment will need to complete an additional clinical attachment to meet the requirement of satisfactory completion of four accredited clinical attachments.

Advisory Panel – ePort guide

Advisory Panel roles in ePort

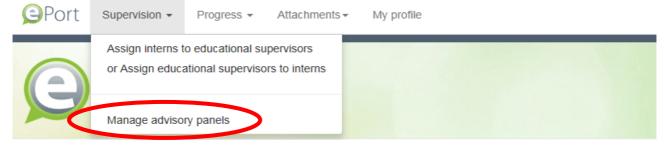
The below roles have access to Advisory Panel functionality in ePort:

- RMO Manager to Establish Advisory Panels and to assign interns to Advisory Panels.
- Prevocational Educational Supervisor to complete the Advisory Panel Assessment.
- Lay member to complete the Advisory Panel Assessment.
- **CMO** or delegate as notified by the CMO to complete the *Advisory Panel Assessment*. The CMO or delegate also has the functionality of an RMO Manager which allows them to establish advisory panels and monitor and assign the interns employed at their DHB to the panels if required. It is the CMO or delegate who has final sign off for each intern. The assessment is not regarded as complete until final sign off by the CMO or delegate has occurred.
- Interns to apply for general registration through their summary page in ePort.

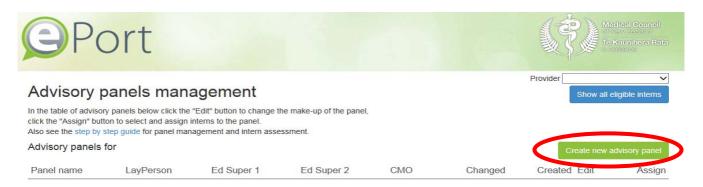
Establishing an Advisory Panel in ePort

RMO Manager

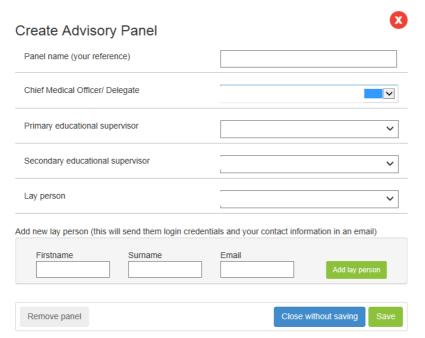
- 1. Log into ePort www.eport.nz
- 2. Select 'Manage Advisory Panels' under the 'Supervision' tab at the top of the page.



- 3. Create the Advisory Panel.
- 4. Select the green box to the right of your screen 'Create new advisory panel'.
 - This will open the box pictured in the second image below and allows you to assign members to your panel.
 - The drop down boxes will only allow you to assign people who are set up in ePort in the associated role. If you need to add a lay member you can enter their name and email address. This will send a notification to MCNZ. MCNZ will then arrange login details to be sent via email.



- 5. **'Save'** the Advisory Panel.
 - You can complete this process for the number of Advisory Panels required.



Assigning eligible interns to a DHB Advisory Panel

RMO Manager

1. Select 'Assign'

| \triangleright | This will open | a box where y | ou can see a | list of all of | the eligible in | terns at your DF | ŀΒ. |
|------------------|----------------|---------------|--------------|----------------|-----------------|------------------|--------|
| Panel name | LayPerson | Ed Super 1 | Ed Super 2 | CMO | Changed | Created Edit | Assign |
| July 2015 | Smith | Cherry | Head | Tree | 5/08/2015 | 16/07/2015 Edit | Assign |

- 2. Click 'add' or 'remove' to assign or un-assign an intern on a selected panel.
 - At the top of the screen you will see a list of the members assigned on the Advisory Panel.
 - For each eligible intern you can see their MCNZ number, surname and whether or not they have completed their ACLS (CORE Advanced). If there is a 'tick' for ACLS you can click on the tick to view the file.
 - **'Attachment results'** this relates to the outcomes achieved on each clinical attachment completed by the intern.



Attachment results key:

1 = Unsatisfactory.

2 = Marginal.

3 = Meets expectation.

4 = Above expectation or exceptional.

NB: If you are assigning interns midway through Q4 you will see a **Y** or **N** instead:

Y = Mid-attachment meeting recorded.

N = Mid-attachment meeting not recorded.

NOTE: Clinical attachment results will not indicate when an intern has completed less than 10 weeks. This is only visible to the Advisory Panel by viewing the interns summary page and in the interns 'Attachments' page (a grey box indicates an incomplete clinical attachment). If an intern has completed slightly less than the 10 weeks minimum it is possible for the Advisory Panel to apply discretion taking into account the interns overall progress. In this case the intern will need to be assigned to a panel. Where an intern needs to complete extra time you would wait until they have completed the extra time before assigning them to a panel.

Assessment

The assessment side of the screen shows when each member of the Advisory Panel has completed their assessment. Where there is an * next to the tick or cross under ES1 column this indicates the prevocational educational supervisor is the interns own.

| Assessment results key: | | | | | |
|-------------------------|---|--|--|--|--|
| Complete | = | the Advisory Panel assessment is complete. | | | |
| Applied | = | the intern has applied for a registration in a general scope of practice. | | | |
| Green | = | the panel has recommend the intern for a registration in a general scope of practice. | | | |
| Yellow* | = | additional requirements have been identified by the Advisory Panel. These must be addressed before the intern can be recommended to apply for registration in a general scope of practice. | | | |

Advisory Panel assessment

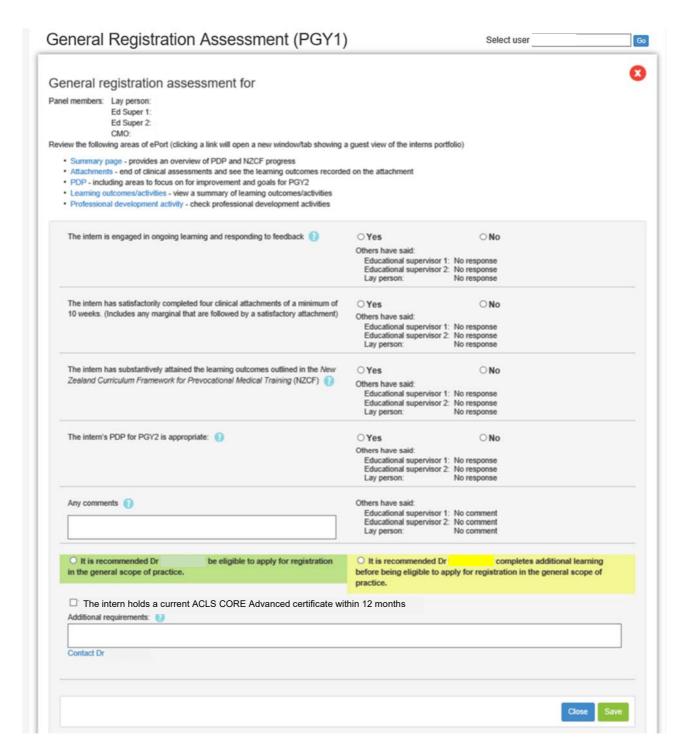
CMO/Delegate/Prevocational educational supervisor/Lay member

Each member of the Advisory Panel will need to complete the following steps in ePort.

- 1. Login to ePort www.eport.nz
- 2. Select 'General Registration Assessment' under the 'Supervision' tab (or under the 'Other' tab if you are logged in as a CMO or delegate).
 - Each Advisory Panel member will see a list of all of the interns that have been assigned to an Advisory Panel that they are a member of. They will also see the names of the other Advisory Panel members.
- 3. To review each intern's progress select the 'Assess' tab.

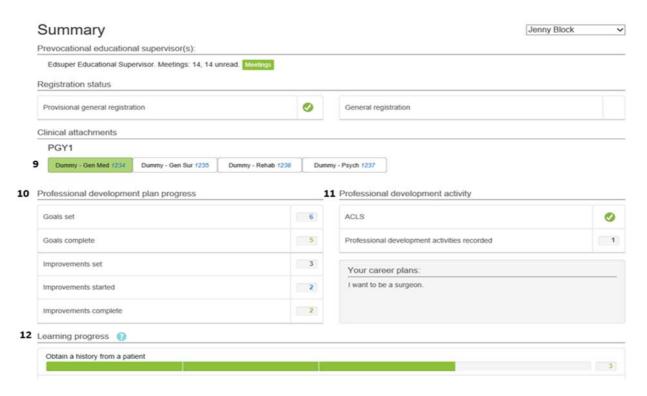


- This will open the screen pictured on the following page.
- Each Advisory Panel member must answer a series of **yes** or **no** questions that relate to the requirements for registration in a general scope of practice.



- Text in **blue** links to the appropriate area of the intern's ePort. For example, clicking on the **Summary page** will take you to a page that looks like the one on page 12 of this guide.
- Comments can be recorded in the 'Any comments' box and these are visible to all of the Advisory Panel members.

NOTE: Clicking on the provides you with some additional information and guidance.



'Attachments' takes you to the clinical attachments that have been allocated to the intern and clicking on each attachment will show the assessment form and comments from the beginning, mid and end of clinical attachment assessments.

'PDP' takes you to the intern's PDP where you can view all of the intern's goals and areas to focus on for improvement. PGY2 goals are identified by a tick box.

'Learning outcomes/activities' allows you to see a snapshot of the intern's level of progression recorded as part of their self-reflection.

'Professional development activity' takes you to the log of recorded professional development activities in ePort.

'ACLS' takes you to where the intern has uploaded their evidence file for ACLS (CORE Advanced). You would expect to see a copy of the intern's certificate of completion dated within the last 12 months. If the intern has not uploaded the ACLS certificate it will be noted. Please see below.

ACLS certificate: editUserProfileDates.pdf OR No ACLS certificate

Time requirements

Where an intern has not completed the time requirement on a clinical attachment, the attachment appears as grey and the prevocational educational supervisor would have checked the box 'Time requirements have not been satisfactorily met.'

It is the intention that interns should complete at least 10 weeks in an attachment, however the individual circumstances for each intern must be taken into account. For example, if an intern has demonstrated good progress across all the aspects of the prevocational medical education programme, it is possible that as few as 8 weeks in an attachment could allow an intern to achieve the necessary learning outcomes. In addition, if an intern is, for example, undertaking study, research, or other medical education activities or duties outside of the formal attachment, and this still contributes to their overall prevocational learning, then this should count towards meeting clinical attachment time considerations.

The Advisory Panel may exercise some discretion when the intern has almost completed 10 weeks or in extenuating circumstances. In such cases, the intern's prevocational educational supervisor should put forward points for the Advisory Panel to consider.

Substantive attainment of the learning outcomes outlined in the 14 learning activities of the curriculum The range of essential skills and competencies an intern needs to attain by the end of prevocational medical training is described in 14 learning activities.

Interns record their learning through self-reflection on the following levels of proficiency against each activity:

- Level 1: I know about this activity and have watched others undertake it
- Level 2: I have undertaken this activity with support and guidance from a supervisor or other senior colleague.
- Level 3: I feel confident to undertake this activity without assistance from a supervisor or other senior colleague over a range of patients.
- Level 4: I can undertake this activity independently and can assist other learners.

By the end of PGY1, interns are expected to have recorded reflections against all 14 learning activities. Substantive attainment of the required learning will be based on interns recording reflections that demonstrate progress and attainment of the required skills and competencies.

When the intern has not substantively attained the learning outcomes outlined in the 14 learning activities of the curriculum

Where an intern has a low number of self-reflections on the learning activities recorded, the Advisory Panel should recommend that the intern complete the requirements before being eligible to apply for registration in a general scope of practice.

- 4. When the Advisory Panel member has completed their review and assessment they should **'save'** the record.
 - As the Advisory Panel process happens within ePort, the Advisory Panel does not need to meet in person to make their recommendations. Many training providers find meeting in person beneficial, however this is not a requirement.
 - The CMO or their delegate will be the Chair of the Advisory Panel and make the final recommendation taking into consideration the opinions and feedback from the other panel members.
 - The CMO or delegate will select the appropriate recommendation which applies to the intern being assessed (please refer to green and yellow boxes shown below):



If the CMO or delegate selects the yellow box they must record comments in the box of what the intern needs to complete, for example ACLS (CORE Advanced). The intern will receive notification of what additional learning they need to complete or record.

- If it is something that can be addressed quickly the CMO or delegate can email the intern from the system by clicking 'Contact Dr X' to allow the intern to update their ePort so they can be recommended for registration in a general scope of practice.
- 5. When the CMO or delegate completes the assessment they should select 'Save'.
 - If the CMO recommends the intern is eligible to apply for registration in a general scope, an 'Apply' button will then appear on the intern's summary page once their quarter four attachment has been completed satisfactorily. This enables them to register their application with Council who is the final decision maker in the process.

Following the Advisory Panel assessment

NOTE: The below information refers to the actions that the intern will need to complete. You are not required to complete the steps below, however this information is provided for your reference.

Interns

- There is an area on the intern's summary page that notes their registration status. PGY1 interns have a 'tick' next to **Provisional general registration**.
- When the Advisory Panel has made their assessment the intern will be able to see a comment next to **General registration.** This comment will state either:
 - That once the intern has satisfactorily completed their current attachment they can apply through ePort for registration in a general scope of practice. OR
 - That additional requirements need to be completed with details of these requirements.
- 1. Once the intern has been recommended by the Advisory Panel and they have satisfactorily completed their current attachment a button will appear on their summary page to 'Apply' for general registration. They need to click the 'Apply' button to trigger the notification which is sent to Council for final approval.



Interns who need to complete additional requirements will need to go back to the Advisory Panel for a recommendation to be made. Once they have completed the necessary requirements, they need to click the 'Advise complete' button on their summary page (see below). The RMO manager can reassign these interns to the Advisory Panel and the Advisory Panel can review the previous assessment.



If an intern has been recommended by the Advisory Panel and they are assessed as marginal or unsatisfactory on their current attachment a notification will be sent to the CMO or Delegate and RMO Manager and these will need to be reviewed and some additional requirements identified.

Intern reapplying for registration in the general scope of practice

RMO Manager

Note: An email notification is received by the 'Creator' of the Advisory Panel when an intern reapplies for registration in a general scope of practice. If you notice the 'Reapplied' status next to any intern's name, it is important that you let the members of the Advisory Panel know that the intern's application is ready to be reassessed. A new form will appear for each panel member to complete their assessment of the intern. Once all assessments are complete, the application will continue to be processed as a straight-forward application.

The creator of the Advisory Panel is able to monitor interns assigned to the panel and monitor their assessments.

- 1. Select 'Manage advisory panels PGY1 interns' under the 'Supervision' tab at the top of the page.
- 2. Select 'Show all eligible interns', circled in red below.



Show all eligible interns

Advisory panels management (PGY1)

In the table of advisory panels below click the "Edit" button to change the make-up of the panel, click the "Assign" button to select and assign interns to the panel.

Also see the step by step guide for panel management and intern assessment.

3. The below screen will appear, which lists all interns assigned to an Advisory Panel at the DHB.

| Intern MCNZ | Surname | ACLS | Attachment results | Assessment Panel name | Lay | Person | ES 1 | ES 2 | СМО | Status |
|----------------|---------|------|------------------------------------|-----------------------|-----|--------------|--------------|--------------|--------------|-----------|
| | | V | Q1=4 Q2=4 Q3=N Q4=3 Q1=4 Q2=Y Q3=N | | | € | € | ⊘ | € | Reapplied |
| | | × | Q1=4 Q2=4 Q3=4 Q4=3 Q1=N Q2=N Q3=N | | | ⊘ | € | ⋖ | V | Applied |
| | | ~ | Q1=4 Q2=3 Q3=4 Q4=3 Q1=4 Q2=Y Q3=N | | | € | € | \checkmark | V | Complete |
| | | V | Q1=3 Q2=3 Q3=4 Q4=3 Q1=3 Q2=Y Q3=N | | | \checkmark | \checkmark | \checkmark | \checkmark | Complete |
| | | × | Q1=3 Q2=Y Q3=N | | | X | X | X | X | |
| | | × | Q1=4 Q2=Y Q3=N | | | X | X | X | X | |
| | | × | Q1=3 Q2=Y Q3=N | | | X | X | X | X | |
| | | ~ | Q1=3 Q2=Y Q3=N | | | X | X | X | X | |
| | | ~ | Q1=3 Q2=Y Q3=N | | | X | × | X | X | |
| | | × | Q1=4 Q2=4 Q3=N | | | X | X | X | X | |

Intern status key:

MCNZ = the intern's registration number issued by Council.

Surname = the intern's surname.

ACLS = Advanced cardiac life support (ACLS) certification at the standard of New Zealand Resuscitation Council CORE Advanced less than 12 months old. A tick will appear if the intern has recorded this as completed.

| Attachment Results | = | the intern's results for each meeting recorded in ePort by the clinical supervisor. |
|--------------------|---|--|
| Panel name | = | the name of the Advisory Panel that the intern has been assigned to. |
| Lay person | = | the assessment outcome of the lay person on the panel. |
| ES 1 | = | the assessment outcome of the first prevocational educational supervisor on the Advisory Panel. |
| ES 2 | = | the assessment outcome of the second prevocational educational supervisor on the Advisory Panel. |
| СМО | = | the assessment outcome of the CMO assigned to the Advisory Panel. |
| Status | = | current status of the intern in ePort: |
| | | Applied – when the intern has submitted an application for general registration in ePort. |
| | | Complete – when the application process is complete and ready to be reviewed by Council. |
| | | Reapplied – when the intern has completed additional learning as recommended by the Advisory Panel and has resubmitted their application for general registration in ePort. |

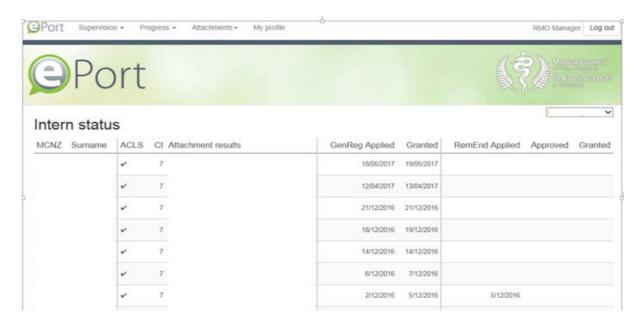
Monitoring the intern status in ePort – PGY1 and PGY2

RMO Manager

The Advisory Panel creator has the functionality to monitor each intern's progress and status at their DHB. This is particularly helpful when monitoring progress at the end of PGY1 and also removal of the endorsement on the practising certificate at the end of PGY2*. To track how the interns are progressing at your DHB, please follow the steps below.

*Please note: PGY2 interns apply to have the endorsement on their practising certificate removed at the end of the PGY2 year. This application is considered by their prevocational educational supervisor rather than a DHB Advisory Panel.

- 1. Select 'Intern status' under the 'Progress' tab at the top of the page.
 - This will open a box where you can see a list of all PGY1 and PGY2 interns at your DHB. This screen allows you to monitor each intern and their overall progress in ePort.



| Intern status key: | | |
|--------------------|----|---|
| MCNZ | = | the intern's registration number issued by Council. |
| Surname | = | the intern's surname. |
| ACLS | = | Advanced Cardiac Life Support (ACLS) certification at the standard of New Zealand Resuscitation Council CORE Advanced less than 12 months old. A tick will appear if the intern has recorded this as complete (this is not a requirement for PGY2 interns). |
| Ct | = | the number of the clinical attachments completed by the intern. |
| Attachment | = | the intern's results for each meeting recorded in ePort. |
| Results | | |
| GenReg Applied | = | the most recent date in which the intern has applied for general registration. |
| Granted | = | the date in which the intern was granted general registration by the Advisory Panel. |
| RemEnd Applied | = | the most recent date in which the intern has applied for removal of the endorsement on their practising certificate. |
| Approved | = | the date in which the interns prevocational educational supervisor approved the interns application for the removal of the endorsement on their practising certificate. |
| Granted | =, | the date in which the intern was granted full general registration by the Medical Council. |