



Te Kaunihera Rata  
o Aotearoa

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**Medical Council  
of New Zealand**

# Advisory Panel Guide

& 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 each PGY1's (interns who hold a provisional general scope of practice) overall performance 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 at the end of PGY1 (between week 6 and 10 of quarter 4) when it is anticipated that the intern will satisfactorily complete four clinical attachments.

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

The Advisory Panel<sup>1</sup> will make a recommendation to the Medical Council of New Zealand (Council), who as regulator is the decision maker.

## Composition of the 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).

Multiple Advisory Panels may need to be composed by the DHB, this will depend on the number of prevocational educational supervisors at each training provider.

## ePort

The Advisory Panel assesses and makes its recommendations to Council in ePort. Please refer to the Advisory Panel ePort guide which starts on page 7.

### 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 of the Advisory Panel considerations

There may be a need for the Advisory Panel to convene on more than one occasion. Scenarios where this may happen are noted below:

### Halfway through quarter 4

The Advisory Panel will consider the majority of their intern's progress halfway through the fourth quarter of the year.

For the Advisory Panel to do this, each intern's mid attachment meeting **must** be completed for the fourth quarter. To ensure these meetings are completed in a timely way, training providers will need to liaise with their clinical supervisors to emphasise the importance of getting the mid attachment meetings completed

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<sup>1</sup> Advisory panel members are considered agents of Council.

on time. Monitoring of ePort by training providers around this time is crucial in ensuring that these meetings are taking place.

For those interns who have progressed well, assessing their progress halfway through the fourth quarter will ensure that there are no delays with processing their application for a general scope of practice at the end of their intern year. However, any recommendation made by the Advisory Panel will be subject to the end of clinical attachment assessment at the end of the fourth attachment being rated satisfactory by the clinical supervisor. Clinical supervisors will therefore need to ensure that the *end of clinical attachment assessments* are completed before the end of the fourth quarter.

It is expected that for the vast majority of interns this process will go smoothly and at the end of the clinical attachment, Council will approve a general scope of practice when notified that:

- 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**

For any interns who have had a conditional report, or have struggled, the Advisory Panel would consider these interns at the very end of the fourth quarter. It is important that this occurs at the very end of the fourth quarter to allow the Advisory Panel to have access to all of the information about the intern, including their fourth quarter end of clinical attachment assessment.

In the majority of cases where the Advisory Panel recommends that the intern has not met the requirements for a general scope of practice, the Advisory Panel will recommend that the intern completes another clinical attachment in order to attain the requirements.

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**

To assess those PGY1 interns who are not ready in the fourth quarter, the Advisory Panel will need to review progress throughout the year of any:

- NZREX doctors or interns who had a delayed start
- interns who have taken time off during the year
- interns who have 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.
- Progression in substantively<sup>2</sup> attaining the learning outcomes in the NZCF.
- A summary of areas for improvement that have been identified throughout the year and have not been achieved.
- The setting and completion of goals in the interns PDP.
- Evidence of ongoing learning and responding to feedback.
- A summary of learning activities completed.

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<sup>2</sup> Each intern is expected to make progress in attaining the learning outcomes in the NZCF. To be considered sufficient, interns should record the attainment of at least 75% (279) of the learning outcomes by the end of PGY1.

- 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 meet all** of the following requirements:

- The (satisfactory) completion of four accredited clinical attachments.
- The substantive<sup>3</sup> attainment of the learning outcomes outlined in the NZCF (prior learning will be taken into account).
- Completion of a minimum of 10 weeks full-time equivalent in each clinical attachment. Full time is equivalent to a minimum of 40 hours per week.
- Advanced cardiac life support (ACLS) certification at the standard of New Zealand Resuscitation Council CORE Advanced less than 12 months old.
- A recommendation for registration in a general scope of practice by a Council approved Advisory Panel.

In addition, interns are required to establish an acceptable PDP for PGY2, to be completed during PGY2. Interns must create goals for PGY2 ahead of the Advisory Panel meeting. Interns wishing to join a vocational training programme or to practise overseas must add information about these intentions as goals in the PDP.

Please refer to section below, 'PDP for PGY2' for further information about what to consider when reviewing a PDP for PGY2.

**Note:** Doctors who have passed NZREX Clinical prior to 30 November 2014 are eligible to complete their PGY1 requirements in a primary care setting. Please refer to Council's *Policy on prevocational medical training* for further information.

### Factors the Advisory Panel will consider

The recommendation of the Advisory Panel will take account of the following factors:

- The intern is actively engaged in ongoing learning and is responding to feedback.
- The intern has addressed sufficiently all issues arising from the 'areas to focus on for further development' sections of end of clinical attachment assessment, particularly those that have any implications on safety to practice.
- The intern has met a substantive proportion of the learning outcomes in the NZCF.
- The intern is making progress to meet all the learning outcomes in the NZCF.

### PDP for PGY2

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

The goals in the PDP should be targeted around the following:

- Outstanding learning outcomes from the NZCF that have not been completed in PGY1.
- Learning outcomes from the NZCF that are stipulated for PGY2.

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<sup>3</sup> Each intern is expected to make progress in attaining the learning outcomes in the NZCF. To be considered sufficient, interns should record the attainment of at least 75% (279) of the learning outcomes by the end of PGY1.

- Areas for further development identified on previous clinical attachments.
- Multisource feedback results (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.

The Advisory Panel will review and make its recommendation through ePort. Please refer to the attached document which provides further guidance for completing this process in ePort.

### **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.

For more information about the requirements for PGY2, please refer to our website:

<https://www.mcnz.org.nz/maintain-registration/prevocational-training-pgy1-pgy2-and-nzrex-requirements/>

### **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 would need to provide the Advisory Panel at their DHB with information about their intentions and a proposed PDP at the time the Advisory Panel are reviewing their PGY1 progress.

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:

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

If an intern wishes to practise in a setting outside of the above, they will need to submit an application to Council to have the position considered. The application form is available on our website: <https://www.mcnz.org.nz/maintain-registration/prevocational-training-pgy1-pgy2-and-nzrex-requirements/>

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 will need to continue to maintain their record of learning in their ePort and work towards attaining any remaining learning outcomes from the NZCF while practising overseas. This will include uploading supervision reports received during that time just as they would if they were in New Zealand. This is similar to UK graduates completing Foundation Year 2 while practising in New Zealand.

### **Vocational training in PGY2**

There is flexibility for interns to enter formal vocational training early. Interns entering a vocational training programme during PGY2 will need to enter a PDP goal that describes their intention to satisfactorily participate in the particular vocational training programme during PGY2. Interns should engage with their employer if they wish to complete specific accredited clinical attachments in PGY2 to ensure it meets the employer's policies for allocation.

Interns may join a vocational training programme in PGY2. Interns participating in a vocational training programme will need to undertake their training in prevocational medical training accredited clinical attachments, maintain their PDP and continue to record attainment of the remaining learning outcomes from the NZCF in ePort.

This means that all PGY2s must undertake all of the prevocational medical training requirements. That is, PGY2s must:

- satisfactorily complete four accredited clinical attachments,
- maintain their PDP, and
- continue to record attainment of the remaining learning outcomes in NZCF (95% by then end of PGY2).

The clinical supervisor on each accredited clinical attachment should be recording beginning, mid and end of attachment meetings in ePort. Council does not require their vocational training programme (medical college) supervisor to complete any assessments in ePort. Of course, if the college supervisor is the same person and is in fact their clinical supervisor then they should complete ePort as described above. **The important point is that requirements for the vocational training programme are additional to the PGY2 requirements.**

The advisory panel where the intern is employed will consider 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

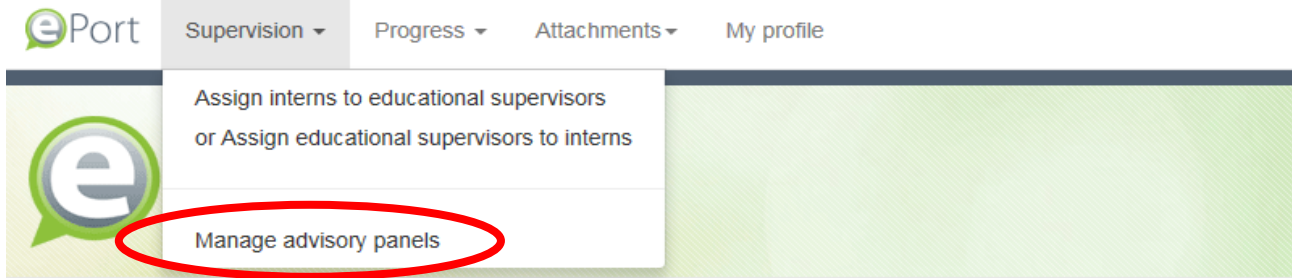
The below roles have access to Advisory Panel functionality in ePort:

- **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](http://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.

### Create Advisory Panel

Panel name (your reference)

Chief Medical Officer/ Delegate

Primary educational supervisor

Secondary educational supervisor

Lay person

Add new lay person (this will send them login credentials and your contact information in an email)

Firstname <input type="text"/>	Surname <input type="text"/>	Email <input type="text"/>	<input type="button" value="Add lay person"/>
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## Assigning eligible interns to a DHB Advisory Panel

### RMO Manager

#### 1. Select 'Assign'

➤ This will open a box where you can see a list of all of the eligible interns at your DHB.

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	<a href="#">Edit</a>	<a href="#">Assign</a>

#### 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.

**NOTE: Please refer to next page for key which explains the indicators captured in the screenshot below.**

### Select interns for advisory panel

Panel name: July 2015
Panel members: Lay p (Person)  
Ed S )  
Ed S )  
CMO. (Person) (Person)

Intern... MCNZ	Surname	ACLS	Attachment results	Assessment... Lay Person	ES 1	ES 2	CMO	Status	Action...
69321	Ankle	✗	Q1=4 Q2=3 Q3=3 Q4=N	✓	✓	✓	✓	Complete	
69384	Hovercraft	✗	Q1=4 Q2=3 Q3=Y Q4=N	✓	✓	✓	✓	Complete*	
69389	Pharmacist	✓	Q1=4 Q2=4 Q3=2 Q4=3	✓	✓*	✓	✓	Applied	
69392	Slice	✗	Q1=4 Q2=3 Q3=Y Q4=N	✗	✗*	✗	✗		<a href="#">Remove</a>
69546	Lasagna	✓	Q1=3 Q2=2 Q3=3 Q4=2	✓	✓	✓*	✓	Re-applied*	<a href="#">Add</a>

#### 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. In other cases there may be some interns that have not completed the time requirement in a clinical attachment and need to

complete extra time. In this case you can assign them to a panel, only after they have completed the extra time.

### 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:	
<b>Complete</b>	= the Advisory Panel assessment is complete.
<b>Applied</b>	= the intern has applied for a registration in a general scope of practice.
<b>Green</b>	= the panel has recommend the intern for a registration in a general scope of practice.
<b>Yellow*</b>	= 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](http://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.

MCNZ	Surname	Lay person	Ed super 1	Ed super 2	CMO	Signed off	
		Smith	Cherry	Head	Tree	25/09/2015	

- 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.

# General Registration Assessment



## General registration assessment for Philip Sm

Panel members: Lay pers (AP)  
Ed Supe  
Ed Supe  
CMO:

Review the following areas of ePort (clicking a link will open a new window/tab showing a guest view of the interns portfolio)

- [Summary page](#) - provides an overview of PDP and NZCF progress
- [Attachments](#) - end of clinical assessments and see the learning outcomes recorded on the attachment
- [PDP](#) - including areas to focus on for improvement and goals for PGY2
- [Skills log](#) - view a summary of completed learning outcomes and outstanding learning outcomes
- [CPD](#) - check CPD activities

The intern is engaged in ongoing learning and responding to feedback <a href="#">?</a>	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> No response
	Others have said: Educational supervisor 1: No response Educational supervisor 2: No response Lay person: No response		
The intern has satisfactorily completed four clinical attachments of a minimum of 10 weeks. (Includes any marginal that are followed by a satisfactory attachment)	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> No response
	Others have said: Educational supervisor 1: No response Educational supervisor 2: No response Lay person: No response		
The intern has substantively attained the learning outcomes outlined in the <i>New Zealand Curriculum Framework for Prevocational Medical Training (NZCF)</i>	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> No response
	Others have said: Educational supervisor 1: No response Educational supervisor 2: No response Lay person: No response		
The intern's PDP for PGY2 is appropriate: <a href="#">?</a>	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> No response
	Others have said: Educational supervisor 1: No response Educational supervisor 2: No response Lay person: No response		
Any comments <a href="#">?</a>	Others have said: Educational supervisor 1: No comment Educational supervisor 2: No comment Lay person: No comment		
<input type="text"/>			
<input type="radio"/> It is recommended Dr Philip Smith be eligible to apply for registration in the general scope of practice.	<input type="radio"/> It is recommended Dr Philip Smith completes additional learning before being eligible to apply for registration in the general scope of practice.		
<input type="checkbox"/> The intern holds a current ACLS L7 certificate within 12 months: No ACLS certificate uploaded			
Additional requirements: <a href="#">?</a>	<input type="text"/>		
<a href="#">Contact Dr Philip Smith</a>			

- Text in **blue** links to the appropriate area of the intern's ePort. For example: [Summary page - provides an overview of PDP and NZCF progress](#)
- By clicking on this link, you would be taken to the intern's summary page in ePort. Please see image on the following page.
- 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.

# Summary

Clinical attachments

PGY1



## Professional development plan progress

Goals set	9
Goals complete	3
Improvements set	3
Improvements started	0
Improvements complete	0

## CPD

ACLS	<input checked="" type="checkbox"/>
Professional development activities recorded	8

## NZCF progress ?

1 Professionalism	19	0
2 Communication	0	0
3 Clinical management	48	4
4 Clinical problems and conditions	0	0
5 Procedures and interventions	0	0
<b>Total learning outcomes completed</b>	<b>67</b>	<b>4</b>

Your personal statement:

**'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 interns 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.

**'NZCF Log'** allows you to view the learning outcomes from the NZCF. The intern's progress is shown on their summary page in ePort. Using the 'filter list' (pictured below), the skills can be broken down into learning outcomes which the intern has not yet started, partially completed and fully completed.

Filter list:  Found 373 Show all

**'CPD'** takes you to the log of recorded CPD 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**

**IMPORTANT:**  
**Less than 10 weeks completed on a clinical attachment**  
Where an intern has not completed the 10 week time requirement on a clinical attachment, the attachment appears as grey and the prevocational educational supervisor would have clicked the check box **'Time requirements have not been satisfactorily met.'** In this instance, the assessment would not usually count as one of the four satisfactory clinical attachments. The Advisory Panel can exercise some discretion where the intern has almost completed 10 weeks or in extenuating circumstances. If this is to be considered the intern's prevocational educational supervisor should put forward the points for consideration for the Advisory Panel.

If the Advisory Panel decides that discretion is to be applied then contact should be made with Council to allow for this to be amended in ePort.

### Substantive attainment of the learning outcomes from the NZCF

There is not a value or percentage for what is considered 'substantive'. There are 373 learning outcomes in the NZCF that are identified for PGY1 however the intern has to the end of PGY2 to complete the learning outcomes. Council's Prevocational Implementation Review group have recommended that at least 270 be achieved by the end of PGY1. This may be a helpful guide for you; however this recommendation has not yet been considered or approved by Council.

Interns also have the opportunity to attain NZCF learning outcomes through the formal teaching sessions and other professional development activities and meetings. It is expected that each intern will have recorded all learning outcomes by the end of PGY2. Learning outcomes may be achieved by interns through any of the following methods:

- \* Active participation.
- \* Self-directed learning.
- \* Assessed competence (for example, ACLS or through direct observation of a procedure by a Consultant).
- \* Formal education (for example, participation in grand rounds or in the Intern formal education programme).
- \* Informal teaching (for example, bedside clinical teaching).

### When the intern has not substantively attained the learning outcomes in the NZCF

Where an intern has a low number of learning outcomes recorded, the Advisory Panel would want to recommend that they complete additional learning 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):

It is recommended Dr Philip Smith be eligible to apply for registration in the general scope of practice.

It is recommended Dr Philip Smith completes additional learning before being eligible to apply for registration in the general scope of practice.

The intern holds a current ACLS L7 certificate within 12 months: No ACLS certificate uploaded

Additional requirements: ?

[Contact Dr Philip Smith](#)

- 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.

### IMPORTANT:

If for some reason after the Advisory Panel has met, the intern goes on leave for a period that would mean they have not met the 10 week requirement but does receive a satisfactory end of attachment assessment the system will not pick this up. In this case, the prevocational educational supervisor should not sign off the assessment as complete until they have discussed with the Advisory Panel members whether the intern has completed sufficient time for this attachment to be counted towards their general registration assessment.



## 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 reappplies for registration in a general scope of practice. If you notice the 'Reapplied' status next to any interns 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 would.

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.

### 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	CMO	Status
		✓	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		✓	✓	✓	✓	Applied
		✓	Q1=4 Q2=3 Q3=4 Q4=3 Q1=4 Q2=Y Q3=N		✓	✓	✓	✓	Complete
		✓	Q1=3 Q2=3 Q3=4 Q4=3 Q1=3 Q2=Y Q3=N		✓	✓	✓	✓	Complete
		✗	Q1=3 Q2=Y Q3=N		✗	✗	✗	✗	
		✗	Q1=4 Q2=Y Q3=N		✗	✗	✗	✗	
		✗	Q1=3 Q2=Y Q3=N		✗	✗	✗	✗	
		✓	Q1=3 Q2=Y Q3=N		✗	✗	✗	✗	
		✓	Q1=3 Q2=Y Q3=N		✗	✗	✗	✗	
		✗	Q1=4 Q2=4 Q3=N		✗	✗	✗	✗	

#### Intern status key:

<b>MCNZ</b>	=	the intern's registration number issued by Council.
<b>Surname</b>	=	the intern's surname.
<b>ACLS</b>	=	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.

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

MCNZ	Surname	ACLS	Ct	Attachment results	GenReg Applied	Granted	RemEnd Applied	Approved	Granted
		✓	7		18/05/2017	19/05/2017			
		✓	7		12/04/2017	13/04/2017			
		✓	7		21/12/2016	21/12/2016			
		✓	7		18/12/2016	19/12/2016			
		✓	7		14/12/2016	14/12/2016			
		✓	7		6/12/2016	7/12/2016			
		✓	7		2/12/2016	5/12/2016	5/12/2016		

<b>Intern status key:</b>		
<b>MCNZ</b>	=	the intern's registration number issued by Council.
<b>Surname</b>	=	the intern's surname.
<b>ACLS</b>	=	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).
<b>Ct</b>	=	the number of the clinical attachments completed by the intern.
<b>Attachment Results</b>	=	the intern's results for each meeting recorded in ePort.
<b>GenReg Applied</b>	=	the most recent date in which the intern has applied for general registration.
<b>Granted</b>	=	the date in which the intern was granted general registration by the Advisory Panel.
<b>RemEnd Applied</b>	=	the most recent date in which the intern has applied for removal of the endorsement on their practising certificate.
<b>Approved</b>	=	the date in which the interns prevocational educational supervisor approved the interns application for the removal of the endorsement on their practising certificate.
<b>Granted</b>	=	the date in which the intern was granted full general registration by the Medical Council.