

## ALTERNATIVE CLINICAL RECERTIFICATION PATHWAY

There will be Fellows who are still working clinically but in a scope that is outside urgent care. These Fellows may want to maintain standing with RNZCUC, retain access to College resources and continue to use their post-nominal letters. An example would be those on another training programme. During this period of alternative training, acquiring the necessary hours for UC recertification might be difficult. However, after completing that programme, they may choose to re-commence urgent care practice.

These Fellows may apply for the alternate clinical recertification pathway. The MCNZ will be advised that you are working exclusively outside the clinical scope of urgent care. Our understanding is that doctors should participate in the recertification programmes of all vocational scopes that they are registered and practising in. Fellows should consult with MCNZ for guidance on this.

The DPD will work with you to specify your particular requirements. You may, in some cases, cross-claim CPD completed for the other scopes that you are training or recertifying in.

- No [Clinical hours](#) requirement.
- The [structured annual conversation](#) should be with an urgent care Fellow.
- The [professional development plan](#) (PDP) may focus on non-urgent care items.
- [Peer group](#) activities of 6 hours per year remain.
- No [resuscitation](#) requirement.
- Audit and other tools to [measure and improve patient outcomes](#) of one per year remains, but audits should be appropriate to your clinical practice.
- Completion of the [essential knowledge quiz](#) each year.
- [Educational activities](#) relevant to your practice of 9 hours per year.

### Returning

An up-to-date resuscitation course should be completed within 3 months of return to the main recertification pathway (this will be a full resus course if the previous full course was more than 2 years ago).

If the Fellow has been on the alternative pathway for more than three years, the Fellow:

- Will require 6 months of supervision, with a supervisor report submitted to the College at the 6-month point.
- Should submit and pass a clinical notes audit within the first 6 months of return.
- Will be required to have completed the NZRC Core Advanced resuscitation course within the year prior to return.
- Additional return to scope requirements may be recommended by the Board of Censors.

### Reasoning for the alternate clinical pathway

It is felt that, in addition to regular CPD activities, maintaining clinical experience within the scope of urgent care contributes significantly to the development and maintenance of urgent care relevant skills and knowledge. Hence the clinical hour requirement of the standard recertification pathway. 600 hours per triennium is a relatively small requirement but it is felt to be enough to enable consolidation of knowledge within active clinical practice. It also enables enough hours working within a clinic alongside other UC clinicians, nurses, reception staff and ancillary staff.

However, if clinical hours are not able to be maintained, but a Fellow is still working clinically in another sphere of medicine, maintaining the rest of the CPD requirements will enable the Fellow to still recertify within the scope of urgent care. Upon returning to clinical practice within urgent care, a brief period of supervision and a clinical notes audit, will allow for adequate oversight during the return to working clinically within urgent care.

Ultimately, recertification is about ensuring patient safety. This variation allows Fellows who are pursuing other training avenues to remain engaged in urgent care recertification during this period. In the past, the only alternative was cancelling membership, which is not conducive to patient safety or the maintenance of urgent care skills and knowledge.