



# Te Tatau o te Whare Kahu Midwifery Council

## **Re-entry into New Zealand practice for midwives who have worked overseas Policy**

Refers to the following key legislation:

Health Practitioners Competence Assurance Act 2003 Section 27 and 29

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## **1.0 Policy Statement**

All New Zealand-registered midwives who have held a midwifery practising certificate in a country outside of New Zealand who are now seeking a New Zealand practising certificate must demonstrate evidence of good character and ongoing midwifery practice and will be required to complete a Reentry to New Zealand Competence Programme.

## **1.1 Introduction**

The Health Practitioners Competence Assurance Act 2003 (HPCAA) requires the Council<sup>11</sup> to satisfy itself that a midwife is competent to practise midwifery before it issues an APC.

Section 27 of the HPCAA states that when the applicant has not held an annual practising certificate of a kind sought by the applicant within the 3 years immediately preceding the date of the application, the Council may decline to issue an APC or include varying conditions on the midwife's scope of practice.

Section 29 of the HPCAA enables the Council to consider what conditions it may impose or vary before it issues an APC.

## **1.2 Purpose**

The purpose of this policy is to:

- provide a formal framework for midwives re-entering New Zealand practice; and
- ensure that the Council staff and midwives have the background, knowledge, and ability to approve and monitor midwives re-entering Midwifery in New Zealand via the Return to New Zealand Practise (RTNZP) programme.

## **1.3 Scope**

This policy applies to:

- Midwives re-entering New Zealand after practising overseas; and
- Council secretariat staff

## **1.4 References**

This policy should be read in conjunction with:

1. Re-entry to New Zealand procedures and flowchart
2. Annual Practising Certificate policy
3. Midwifery Council Scope of Practice statement and Competencies for Entry to the Register of Midwives

<sup>1</sup> "Council" refers to the Midwifery Council throughout this document

## **1.5 Review**

This policy and all other referenced re-entry to New Zealand documents will be reviewed biennially or sooner if operations or risk dictate.

## **2.0 Standard of competence expected of registered midwives**

### **2.1 Midwifery Scope of Practice**

The Midwifery Scope of Practice provides a broad statement on the boundaries of the care that a NZ midwife can provide on their own as an autonomous practitioner. As required under the HPCAA, the Council has defined the scope of practice for registered midwives and published this in the [NZ Gazette](#).

### **2.2 Competencies for Registration as a Midwife**

Under the HPCAA, the Council is required to determine the level of competence required for a midwife to work within the Midwifery Scope of Practice. That level of competence is defined in the Council's Competencies for Entry to the Register of Midwives. The Competencies for Entry to the Register of Midwives provides detail of the skills, knowledge, and attitudes expected of a midwife to work within the NZ Midwifery Scope of Practice.

Where the Midwifery Scope of Practice provides the broad boundaries of midwifery practice, the competencies provide the detail of how a registered midwife is expected to practise and what they are expected to be capable of doing. By defining the minimum competence standards for registration as a midwife in NZ, the Council has established the minimum standard that all midwives are expected to maintain in their ongoing midwifery practice.

The [Competencies for Entry to the Register of Midwives](#) are available on line.

### **2.3 Competence to practise**

New graduates and internationally qualified midwives seeking registration in NZ are assessed against the Competencies for Entry to the Register of Midwives before being granted registration as a midwife. In order to be issued with a practising certificate, registered midwives must provide evidence that they are practising within the Midwifery Scope of Practice and whether they are maintaining or how they will maintain their competence to practise.

The Council defines 'maintaining competence to practise' for registered midwives as *"the ongoing capacity to integrate knowledge, skills, understanding, attitudes and values within the professional framework of the Midwifery Scope of Practice"* (Recertification Programme: competence-based practising certificates for midwives Policy Document, 2020).

### 3.0 Classification of Re-Entry to New Zealand

<b>Category A</b>	Midwives who have practised midwifery overseas for less than three years and who now wish to re-enter NZ midwifery practice.
<b>Category B</b>	Midwives who have practised overseas for between three and five years and who now wish to re-enter NZ midwifery practice.
<b>Category C</b>	Midwives who have practised overseas for more than five full years and who now wish to re-enter NZ midwifery practice.

### 3.1 Supervision

Each midwife in Category C will have a supervisor. That appointment is for the duration of the Return to New Zealand Practice (RTNZP) Programme. Supervisors are expected to meet with the midwife every four weeks.

The supervisor will be required to provide reports at the end of every month and the end of the RTNZP programme, and at any other time should they have concerns regarding the midwife's practice. Supervisors will be provided with a report template at time of appointment.

The midwife may be required to self-fund the cost of having a supervisor.

While the midwife is undertaking the RTNZP programme, they may have student midwives observe them. However, the midwife cannot be involved in any formal assessment of the student. Before the midwife can provide preceptorship, they must have completed their RTNZP requirements and the required preceptorship course.

### 3.2 Monitoring

All midwives will have their progress through the RTNZP programme monitored. Midwives will be advised if their progression through the plan is not at the required level, for example when they fall behind with any requirements.

### 3.3 Completion of Requirements

Once the requirements have been successfully completed in any of the categories, the midwife will need to provide evidence of completion to the Council.

### 3.4 Previously approved Return to New Zealand Practice Programmes

Those midwives on RTNZ programmes at the time of any change to this policy can complete the programme as approved.

## Appendix A: Competence Programme Requirements

### Category A

Education	Timeframe
*Midwifery Emergency Skills Refresher (MESR)	Within (<) 6 months
Electronic fetal monitoring	< 6 months
Growth Assessment Protocol (GAP)	< 6 months
Other requirements	
Continuing midwifery education	12 months
Midwifery Standards Review (MSR)	Two years from APC application

\* PROMPT + NNR can be accepted in place of ME

## Categories B and C

Education	Timeframe	
	Category B	Category C
*Midwifery Emergency Skills Refresher (MESR)	< 6 months	< 6 months
Growth Assessment Protocol (GAP)	< 6 months	< 6 months
Electronic fetal monitoring	< 6 months	< 6 months
Intimate Partner Violence Workshop (also called VIP)	< 12 months	< 12 months
Smoking cessation course	< 12 months	< 12 months
National Screening Unit 4 on-line courses plus, HIV education (Positive Speakers Bureau)	<12 months	< 12 months
Examination of the Newborn-theory (including update knowledge on WellChild Schedule)		< 6 months
Examination of the Newborn-practical	< 6 months	< 6 months
Update on Immunisation Schedule including Hepatitis B programme	<12 months	< 12 months
<b>Review:</b> HQSC, NMMG, MQSP, PMMRC and processes. Local policy development and processes. Role of MC, recertification	< 6 months	
NZ Maternity and Midwifery Systems		<18 months
Pharmacology and Prescribing		< 18 months
Cultural Competence for Midwives		< 18 months
Abortion Legislation and Midwifery Roles and Responsibilities	<12 months	<12 months
<b>Other requirements</b>		
Practice under supervision until requirements completed		< 18 months
Midwifery Standards Review (MSR)	< 2 years from APC	< 2 years from APC

\* PROMPT + NNR can be accepted in place of MESR

## Appendix B: Process-Return to New Zealand Practice

### Requirements for demonstration of competence to practise and good character

No matter which category, all midwives must provide the following documents at time of APC application. Any midwife who has not practised across the full scope of midwifery (demonstrated in CV) will have an individualised requirement which will include clinical placement and assessment.

Requirements	Specification
Police Vetting	1) From any country where the midwife has lived for 12 months or more. This must be: a) not older than 6 months b) Police certificate from the national police organisation c) an original sent directly to the Council
Health certificate	Sent directly from the medical practitioner
Certificate of good standing	Sent directly to the Council
Curriculum Vitae (CV)	Current and include evidence of ongoing continuing midwifery education
Name and contact details for two professional referees. Midwife May be asked to provide verification of employment.	References will be obtained by the Council

Once it is agreed that the midwife is fit and able to commence a Return to New Zealand Practice programme, she will be advised to apply for a practising certificate. The midwife will be required to practise under appropriate supervision and only as part of a return to New Zealand practice programme for the duration of the programme:

1. undertake courses and complete clinical practice requirements
2. provide required evidence (using Appendix A as a checklist) to the Council within ten days of completing course
3. Once the RTNZP programme is completed, the midwife will be advised