



Midwifery Council

Application to Sit National Midwifery Examination and Application for Registration as Midwife (This form for New Zealand qualified midwives only)

PERSONAL DETAILS

Full Name _____ Gender: Female Male
Given/First Names Family Name

Previous Names(s) _____

Date of Birth ____/____/____ Country of Birth _____

Ethnicity _____

Is English your first language? Yes No - If no see Enclosures No.9, over page

Have you previously applied for registration as a midwife in New Zealand? Yes No - If yes what date ____/____/____

Have you previously registered with another Health Practitioner Authority? Yes No - if yes see Enclosures No.8, over page

CONTACT/ADDRESS DETAILS

Residential Address (This must be a physical (street) address)

Home Telephone _____ Mobile Phone _____

Email Address _____

Work/Business Address (if different from above – please include both street and postal address)

Work Telephone _____ Work Mobile _____

Mailing Address (if different from above) Or use my – Residential Work Address

QUALIFICATIONS/NATIONAL EXAMINATION

I have completed, or I am about to complete, a Bachelors Degree in Midwifery at:-

(Institute at which you were/are studying)

I wish to sit the National Midwifery Examination at:-

_____ on ____/____/____
(Institute where you will sit the exam) (Date of exam)

ENCLOSURES / ACTIONS (See notes - Please tick one box in each section as applicable)

1. I have enclosed a certified copy of my birth certificate or passport, and only if applicable, a certified copy of my marriage certificate or other change of name instrument.
2. I have enclosed the names and contact details (address, phone number, and email address if possible) of two character referees whom I have asked to complete the character reference forms supplied with this application pack, and to send those forms directly to the Council. One referee is a practising midwife and the other is another person of good standing in the community.
3. I have enclosed the name and full contact details of a medical practitioner whom I have asked to provide a medical certificate on the form included with this application pack, and to send this directly to the Council. This certificate should disclose any condition that the medical practitioner feels could adversely affect my ability to practise as a midwife and therefore should be considered by the Council.
4. I have completed and enclosed the Consent to Disclosure of Information form (for the purposes of Police vetting) supplied with this application pack (do not send this to the Police, do not print or put anything on the rear of this form).
5. I have enclosed payment of \$575 (GST inclusive) being \$245 to sit the Examination at one of the Midwifery School locations in New Zealand and \$330 for Registration. (Note additional fees apply to sit the examination elsewhere.)
6. **If** you have been convicted of any criminal or civil offence, other than minor traffic offences, you must provide details on a separate sheet specifying the nature of the offence, the date of conviction and the penalty, and attach it to this application with any letter of support or other documentation that you wish the Council to consider. Note: any convictions will not necessarily prevent you from being registered as a midwife but will be considered on a case-by-case basis.
 Not applicable **or** Details are enclosed.
7. **If** you have any mental or physical condition or disability that could adversely affect your ability to practise as a midwife you must provide details on a separate sheet and attach it to this application. Note: any physical or mental condition will not necessarily prevent you from being registered as a midwife but will be considered by the Council on a case-by-case basis.
 Not applicable **or** Details are enclosed.
8. **If** you have ever been registered with another Health Practitioner Authority in New Zealand or elsewhere you must provide a Certificate of Good Standing from each of those Authorities.
 Not applicable **or** I enclose a Certificate of Good Standing from each authority.
9. **If** English is not your first language then you must sit the International English Language Testing System Exam (IELTS) in the Academic Module, and achieve an overall pass rate of no less than 7.5, with no less than 7 in each band. You are exempt from this requirement if your entire midwifery education and at least four years of your secondary schooling were in New Zealand. . You can also apply for an exemption from this requirement if you can show with certainty that you are an effective communicator in English. Application for exemption will be considered on a case-by-case basis.
 Not applicable **or** I have applied for an Exemption **or** I have requested my IELTS results be sent direct Council by the IELTS testing centre.
10. Have you requested extra time to sit the examination, or requested any special facilities, through your Head of School?
 No **or** Yes (details are attached and the support of the Head of School has been requested)

DECLARATIONS / CONSENTS

I declare that the information that I have given in this application is true and correct in every respect.

I declare that I suffer from no physical or mental condition or disability that could adversely affect my ability to practise as a midwife which has not been fully disclosed to the Midwifery Council in an attachment to this application.

I declare that I have no convictions of a criminal or civil nature (other than minor traffic convictions) which have not been fully disclosed to the Midwifery Council in an attachment to this application.

I declare that I am not subject to any professional disciplinary proceeding, or under any disciplinary investigation, or subject to any professional disciplinary order.

I consent to the Head of School at the Institute where I complete my qualification supplying the Midwifery Council with a statement of her opinion as to whether I am able to communicate effectively, I have any mental or physical condition that might adversely affect my ability to practise as a midwife, I meet the competencies required for entry onto the Register of Midwives and I am a fit person to be registered as a Midwife. I further consent to the Head of School at the Institute where I complete my qualification supplying the Midwifery Council with my programme transcript and confirmation of satisfactory completion of my midwifery programme.

I consent to the Council obtaining information concerning myself from any other organisation or person where this is relevant to this application.

I understand that a pass in the National Midwifery Examination does not necessarily mean that I will meet the requirements to be registered as a midwife.

I understand that personal information collected by the Midwifery Council may be made available to the Health Practitioner Index and to HealthPAC. (See notes for an explanation.)

Signed _____

Date _____

PAYMENT FORM

Fees for: 1) Application to Sit the National Midwifery Examination (\$245), and
2) Application for Registration as a Midwife (\$330).

This form is only for persons completing a Bachelors Degree of Midwifery in New Zealand.
The registration fee only is refundable to unsuccessful Examination candidates.

To the Midwifery Council

Enclosed is my **cheque** for **\$575.00** made payable to the **Midwifery Council**

Or

Credit Card: Please debit my (tick one) Visa MasterCard (other cards not accepted)

Card Number

Expiry Date _____ Amount **\$575.00**

Cardholder's Name _____

Cardholder's Signature _____

Amount includes GST of \$63.88



midwifery council
of new zealand

CONSENT TO DISCLOSURE OF INFORMATION

Licensing & Vetting Service Centre
Office of the Commissioner of Police
PO Box 3017
WELLINGTON

I,
(Family Name) (Given/First Names)

.....
(Maiden or any other names used now or in the past)

Sex (M/F) Date and place of birth.....

Nationality Residential Address

Suburb City

NZ Drivers Licence number

hereby consent to the disclosure by the New Zealand Police of any information they may have pursuant to this application, to the Midwifery Council of New Zealand. I understand that any record of criminal convictions I might have will be automatically concealed if I meet the eligibility criteria stipulated in Section 7 of the Criminal Records (Clean Slate) Act 2004.

Signed Date

COMMENTS OF THE NEW ZEALAND POLICE



CERTIFICATE OF GOOD CHARACTER

This Form to be completed by a person of good standing in the community who has known the applicant for at least two years. It should be sent directly to the Council by the referee.

Fitness Requirements for Registration as a Midwife. Before the applicant may be entered onto the Register of Midwives in the Midwifery Scope of Practice the Midwifery Council must be satisfied that the applicant:-

- *Is able to communicate effectively*
- *Has no civil or criminal convictions which may adversely affect her/his ability to practise as a midwife*
- *Has no mental or physical condition which may adversely affect her/his ability to practise as a midwife*
- *Is not subject to any professional disciplinary proceeding, or under a disciplinary investigation, or subject to any professional disciplinary order*
- *Is a person of good character*

I hereby certify that I have known (enter applicant's name) _____

for _____ (enter number of years).

I have read the fitness requirements for registration as a midwife set out above. To my knowledge the applicant is a fit person to be registered as a Midwife.

(If you wish you may add further comments) _____

I agree to supply additional information if requested by the Council.

Signed: _____ Date: _____

Name: _____

Occupation: _____

Address: _____

Telephone – day: _____ Email Address: _____



CERTIFICATE OF GOOD CHARACTER

This Form to be completed by a registered midwife who is familiar with the applicant's midwifery practice. This form is to be sent directly to the Council by the referee.

Fitness Requirements for Registration as a Midwife. Before the applicant may be entered onto the Register of Midwives in the Midwifery Scope of Practice the Midwifery Council must be satisfied that the applicant:-

- *Is able to communicate effectively*
- *Has no civil or criminal convictions which may adversely affect her/his ability to practise as a midwife*
- *Has no mental or physical condition which may adversely affect her/his ability to practise as a midwife*
- *Is not subject to any professional disciplinary proceeding, or under a disciplinary investigation, or subject to any professional disciplinary order*
- *Is a person of good character*

I give this certificate in respect of (enter applicant's name) _____

I have read the fitness requirements for registration as a midwife above. Insofar as I know the applicant, I believe that the applicant is a fit person to be registered as a Midwife.

(If you wish you may add further comments) _____

I agree to supply additional information if requested by the Council.

Signed: _____ Date: _____

Name: _____

Relationship to Applicant: _____

Address: _____

Telephone – day: _____ Email Address: _____



MEDICAL CERTIFICATE

This form to be completed by a registered Medical Practitioner. It should be sent to the Midwifery Council direct by the Medical Practitioner.

This medical certificate is given in support of an application to be entered onto the Register of Midwives in the Midwifery Scope of Practice. Section 16(d) of the Health Practitioners Competence Assurance Act 2003 provides that the Midwifery Council shall not register any person as a midwife if it is satisfied that the person is unable to perform the functions required of a midwife because of some mental or physical condition.

Student To Complete - I (enter applicant's name) _____ declare that I suffer from no physical or mental condition or disability that could adversely affect my ability to practise as a midwife. I consent to the Medical Practitioner releasing the results of this examination to the Midwifery Council.

(signature) _____

Medical Practitioner to Complete - I have completed my examination of the above named and

My examination did not indicate any condition that I feel should be brought to the Midwifery Councils attention

Or

My examination indicated the following conditions which could have an affect on the applicant's ability to practise as a midwife:

Signed: _____ Date: _____

Name: _____

Address: _____

Telephone – day: _____ Email Address: _____



Notes for New Zealand Applicants to Sit the National Midwifery Examination and to be Registered as a Midwife

These notes form part of the Application to Sit the National Midwifery Examination - Application for Registration as a Midwife. You should read these notes in their entirety before completing the application. These notes should be retained by you. You should also retain a copy of that part of the application form that you submit to the Council, and any associated documents, for your records.

These notes give some explanation of the registration process; give some guidance to assist you to complete the application, and an explanation your privacy rights.

Contents of the Application Pack

The application pack consists of:-

- The main part of the application form – two sheets where you enter your details.
- A payment form.
- A Consent to Disclosure of Information form (for the purposes of Police vetting).
- Two character reference forms (you may wish to copy the blanks in case you need more).
- A medical certificate form
- These notes

Please make sure that you have all of these parts of the application pack.

Other Information

Considerable information concerning regulation of the midwifery profession can be found at the Midwifery Council Internet site. This includes the full text of the Midwifery Scope of Practice and the Competencies for Entry to the Register of Midwives. You can also download this application pack and other forms at this site. The address is www.midwiferycouncil.org.nz, easy to remember but note that it is 'org', not 'co'.

Copies of this application pack can also be obtained from midwifery education providers or by contacting the Midwifery Council.

Registration and the Annual Practising Certificate

This application pack is concerned only with your application to be entered onto the Register of Midwives with the Midwifery Scope of Practise. The regulation of midwives and other health practitioners is provided for in the Health Practitioners Competence Assurance Act 2003 (the Act). The Act came into force on 18 September 2004. One effect of the Act is to place greater emphasis on the distinction between the Registration process and the Practising Certificate process. It is important to understand that registration does not in itself confer any authority to practise as a midwife. For this you must hold a current Practising Certificate. If you succeed in your application to be registered you will receive an application form for an Annual Practising Certificate with the confirmation of registration.

Requirements for Registration

You must satisfy the requirements in four broad areas before the Council is able to register you as a midwife:-

- Qualifications. You must complete an approved education programme in midwifery with an accredited education provider. In New Zealand the approved education programme is a three-year bachelor's degree in midwifery. There are five accredited providers: Otago Polytechnic (Dunedin), Christchurch Polytechnic Institute of Technology, Massey University (Wellington), Waikato Institute of Technology (Hamilton), and Auckland University of Technology.
- Competencies. You must be able to meet the Competencies for Entry to the Register of Midwives. These competencies provide evidence that you are able to practise within the Midwifery Scope of Practice.
- Fitness for Registration. You must be of good character. You must not have any mental or physical condition that adversely affects your ability to practise as a midwife. You must be able to communicate effectively, and be fluent in written and spoken English.
- National Midwifery Examination. You must obtain a pass in the National Midwifery Examination.

You must meet the requirements in all four of these areas. It is not sufficient to meet some of them only. For example, you must have completed the requirements of your undergraduate programme prior to sitting the examination and your Head of School is required to supply confirmation of this direct to the Midwifery Council. Occasionally this information is not available until quite close to the examination date but unless

such confirmation is received you will not be allowed to sit the examination. In some circumstances, students who have only to facilitate a small number of births to complete their programme may be allowed to sit the examination but will not be registered until the necessary births have been facilitated.

A pass in the National Midwifery Examination does not by itself guarantee registration although the Midwifery Council makes every effort to ensure that all other requirements are met before each candidate sits the examination.

The National Midwifery Examination

The Midwifery Council conducts the National Midwifery Examination. It is an integral part of the application for registration process. The examination is held at each of the accredited midwifery education institutions listed above, but their involvement is only to provide a venue.

It is expected that students will sit the National Midwifery Examination immediately following completion of the midwifery degree programme. Details about the requirements for sitting and administration of the Examination are contained in the National Midwifery Examination Policy which is accessible from the Council's website. Applicants are urged to read this document.

The Council will send an examination admission slip and Notes for Candidates to you when your application has been received and checked. Please note that the Council may not have received some of the supporting information by the time the admission slip is posted to you. The admission slip is an administrative device, is not evidence that all requirements have been met and does not indicate permission to sit the Examination. You must keep the Council informed of your current contact details in case further information is required before the exam.

Closing Date

The closing date for the March 2008 examination is **Friday, 22 January 2010**. If you are sitting at some other time you should obtain the current version of this application pack in case there have been changes.

Contact Details

Section 140 of the Act states that a person being registered must supply their current postal address, residential address and (if applicable) their work address. This section also specifies that if these details change the Registrar (of the Midwifery Council) must be notified promptly in writing. Some of these details may not be applicable in your current situation but we must have full and current contact details and these must be kept up-to-date throughout the registration process (and beyond). Change of address forms can be obtained from the Council Internet site. A letter or email is also acceptable. Please note that we will post your examination admission slip to the address you provide.

Publication of Address Details

The Register of Midwives is a public register. It may be viewed at the Midwifery Council offices and the public details are available on the Council website. The Act provides that the Council can determine whether or not to publish the address details it holds as part of the public access to the Register. The Council has determined that it will only publish the town or city, not the street or postal addresses, and not any telephone numbers or email addresses.

Ethnicity

This is your cultural, racial, and perhaps religious grouping. For example, Maori, New Zealand European/Pakeha, Australian, Chinese, Assyrian. Please do not confuse this with your nationality which is something different. We are not asking for your nationality. Please do not put New Zealander.

The Council records your ethnicity according to New Zealand statistical classifications level 3. We can record two ethnicities if desired. Please put the one you most closely identify with first.

Birth Certificate/Passport – Evidence of Change of Name

The Council is required to confirm your identity with certainty. You must attach a **certified** copy of either your birth certificate or passport to the application form (not both). Please do not send originals.

If your current name is not the same as on your birth certificate or passport as supplied then in this situation you must also attach **certified** evidence of your legal change of name, e.g. a certified copy of your marriage certificate.

Certification of the copy can only be done by a solicitor, a Notary Public, or a Justice of the Peace. Certification by any other person will not be accepted. This requirement seems to cause problems for applicants so for clarification purposes the following are examples of persons who are not a solicitor, JP or Notary Public – Police officers, school principals, post masters, ministers of religion, court officers, Doctors, staff of midwifery schools. Certification will not be accepted from these persons.

The certifier must confirm that the copy is a true copy of the original, must sign, and must clearly print their name, the capacity under which they are signing, and their contact details.

Fitness for Registration – General Note

The Act places considerable emphasis on fitness for practice. Section 16 in particular states that the Council may not register a person as a midwife unless it is satisfied in a number of areas. Briefly the areas covered by section 16 of the Act are:-

- a) effective communication
- b) communication and comprehension of English
- c) criminal or civil convictions
- d) adverse mental or physical conditions
- e) existing or pending disciplinary proceedings
- f) under investigation in respect of disciplinary matters
- g) professional disciplinary orders
- h) danger to the health or safety of the public

There are also other general or specific requirements in other sections of the Act. The requirements of the application process relating to fitness discussed below follow from these statutory requirements.

Character References

The character referees will be asked to comment on your character in general and specifically any mental or physical conditions, any issues with honesty, and your ability to communicate effectively.

Two forms are supplied with this application pack.

- One must be completed by a registered midwife who has worked with you.
- The second must be completed by another person of good standing in the community who has known you for at least two years.

A person of good standing can be a member of the clergy, a member of a profession such as a teacher, another health professional, member of the police force, a lawyer, or a CEO or senior manager of a company or government department, or similar.

Both forms must be sent directly to the Council by the referees. You must supply contact details so that the Council may contact those persons if the forms are not received within the period required for registration. The Council may also wish to discuss an aspect of the reference with the referee.

Character references will not be accepted from fellow students, persons living with you, midwifery lecturers, or close relatives.

Declaration of Convictions

The Council would like to emphasise that any convictions you hold will not necessarily prevent you from being registered as a midwife. Each case will be considered on its merits taking into account factors such as the nature of the offence and the circumstance surrounding it, the penalty imposed, the time passed, and any discernable pattern of offending. Registration will not be refused without discussing this with you first. You will be given a reasonable opportunity to satisfy the Council of your fitness for registration.

If in doubt you should put your circumstance before the Council for its consideration. Failure to disclose any convictions is in itself grounds to question your honesty and fitness for practise.

Police Vetting

Police vetting is standard procedure for persons responsible for the care of others, particularly those in vulnerable circumstance. The Police Vetting Office processes over 8,000 requests each week.

The request must be submitted to the Police by the Council. You must complete the form included with this application pack and return it to the Council with your application. Do not send it to the Police. Do not print or write anything on the rear of this form.

The Criminal Records (Clean Slate) Act 2004 means that if you meet certain criteria and have been conviction free for at least seven years, your convictions will not be disclosed. The Act should be consulted for full information but in summary your convictions will be concealed:- if you have had no convictions in the previous seven years, have never been sentenced to a custodial sentence, have never been the subject of a court order detaining you in hospital due to a mental condition, have never been convicted of certain specified offences (for example sex or violence), have paid all court fines and reparation or costs in full, and have never been indefinitely disqualified from driving under section 65 of the Land Transport Act.

Subject to the above, the Police will carry out two checks. The first is the Ministry of Justice Court records for any convictions you may have. A copy will be printed and returned to the Midwifery Council. The Police will also check their own records for any information they hold about you. In the case of this non-Court information the Police will either return the vetting request without comment or with a red stamp. If the vetting request is red stamped the Police do not disclose the nature of their concerns to the Midwifery Council. In this situation the Council will notify you that concerns exist. You will be asked to contact the Police and obtain details of their concerns. You will then need to discuss these with the Council before your application can proceed.

Part of the vetting agreement between the Police and the Council requires that all information obtained by this process must be held securely and only be seen by those Council members and staff directly involved in this process. The information will be destroyed when no longer required.

Declaration of Mental and Physical Health

The Council is required to satisfy itself that you do not suffer from any mental or physical condition that would prevent you from performing the functions of a midwife.

The Council would like to emphasise that any mental or physical condition you hold will not necessarily prevent you from being registered as a midwife. All circumstances will be considered on a case-by case basis. Registration will not be refused without discussing this with you. You will be given a reasonable opportunity to satisfy the Council of your fitness for registration.

If in doubt you should put your circumstances before the Council for its consideration. Failure to disclose any condition you have may call into question your honesty and fitness to practise.

Medical Certificate

A form is included with this application pack. You should arrange for a check-up with your GP for this purpose. The form must be completed by your doctor and be sent directly to the Midwifery Council. It will indicate if the medical practitioner has any concerns about a physical or mental condition that could adversely affect your ability to practise as a midwife.

You must supply details of the doctor's name and address with your application. This is so that the Council may contact the doctor if the form is not received within the period required for registration.

Registrations with Other Health Practitioner Authorities

If you are registered with any other regulatory authorities, e.g. Nursing Council, you are required to provide a Certificate of Good Standing from those authorities with your application. Those authorities will have standard procedures for the supply of this information.

IELTS Requirement

The ability to communicate in and comprehend the English language is a specific requirement of the Act. You will appreciate that there is some risk associated with midwifery practice if communication is poor. The safety of the mother and baby may depend on effective communication with the mother and with other health service providers, in both directions. This applies in any situation, including but not limited to emergencies. If English is not your first language then you will be required to demonstrate a reasonable level of proficiency before you can be registered by sitting the Academic Module of the International English Language Testing System (IELTS).

Note - 'First language' means the language you spoke first. It does not mean your primary language or the language you now speak the most.

The IELTS is a world-wide and generally accepted system of testing proficiency in the English language. A listing of test centres can be found at the IELTS website (<http://www.ielts.org>). The individual testing centre sites (links at IELTS) give test dates. You must achieve an overall pass rate of no less than 7.5, with no less than 7 in each of the 4 bands. You should instruct the testing centre to send a copy of your results direct to the Midwifery Council.

If English is not your first language you are exempt from the requirement to sit the IELTS test if at least four years of your secondary schooling and your entire midwifery education programme was in New Zealand or another English speaking country. You will need to provide the Council with evidence of the secondary schooling.

If English is not your first language the Council will accept applications for exemption from the requirement to sit the IELTS if you have convincing evidence of your proficiency. This is an opportunity to provide alternative evidence, not an application for exemption from the standard of proficiency required. The Council will need to be very certain of your proficiency in English before granting an exemption. Applications for exemption must be in writing and must set down your circumstances in detail. Your application must be supported by a letter from your Head of School. You should also include references from two other persons in a position to judge your fluency. You should include any old IELTS results you may have.

Applications for Extra Time or for Special Facilities for the Examination

You can apply for extra time to complete the exam or for special facilities. Your application must be supported by your Head of School. Please provide full details with your application and arrange for your Head of School to send a letter of support.

Payment

Payment of the combined examination fee and registration fee should accompany your application. A payment form is included in this application pack. You can pay by cheque or credit card (Visa or MasterCard only). The combined fee is \$575. This includes GST. If your midwifery school is paying some or all of the fee you should note this on the payment form.

The Examination fee is not refundable if for any reason you do not sit the exam or are not registered. If you fail the exam a re-sit fee is payable to sit the exam again. You may re-sit only once. If you fail the Examination the Registration fee is refundable. The Registrar will contact you to discuss whether you wish to have it refunded immediately or wait until you have re-sat the Examination.

You should note that a separate fee is payable for your annual practising certificate. This is discounted when you apply for your annual practising certificate immediately following confirmation of registration. The amount will depend on the timing of the application. The reduction is partly because the period is less than a full year (if applicable) and partly because some of the work required to issue an annual practising certificate is not applicable the first time or has already been done as part of the registration process. In some circumstances the fee for the first full year practising certificate is also at the discounted rate. Annual practising certificates expire on 31 March each year and a new application and fee is payable before that date if you wish to continue in practice.

Head of School

Concurrent with this application, the Head of School where you are completing/have completed your midwifery education programme will be asked to give her opinion, as far as she is able, as to your good character, your ability to communicate effectively and any mental or physical condition that could adversely affect your ability to practise as a midwife. About two weeks after you have sat the National Midwifery Examination the Head of School will provide the Council with written confirmation of your satisfactory completion of your qualification, details of your programme including content, hours, and birth numbers, and confirmation that you meet the Competencies for Entry to the Register of Midwives.

Privacy

The information collected by the Council about you is governed by the Health Practitioners Competence Assurance Act and the Privacy Act. It can only be used for the purposes for which it is collected. You can ask to inspect this information at any time and correct it if necessary.

The Council collects personal information needed in order to perform its functions under the Act. This is to assess your suitability to sit the national exam and be entered onto the Register of Midwives, to assess your ongoing competency and suitability for the grant of an annual practising certificate, and to support the Council's duties in respect of any disciplinary matters. Personal information may also be used for analysis of work force and other midwifery issues but only in a summary form and without identifying you.

The Council will provide some of the personal information it collects to the Health Practitioner Index (HPI). The information sought by the HPI includes personal details, contact details, ethnicity, and date of birth. See below for a brief description of the HPI.

Some personal information is also given to HealthPAC who validate payment claims associated with maternity services, and act as agents of District Health Boards for payment.

The Health Practitioner Index (HPI)

A national index of health practitioners is administered by the Ministry of Health.

The principal purpose of the HPI is to uniquely identify health practitioners and to hold that information in a central, national database. It will eventually also hold details of some non-practitioners (e.g., hospital admission clerk, medical centre practice manager), healthcare organisations, and health delivery facilities. The purpose of the HPI is to reduce the proliferation of identifiers used throughout the health sector, thus reducing administrative effort, and the risk of errors. It may form a basis for future e-commerce and electronic data sharing, for example for claiming subsidised healthcare payments, and access to patient health information.

At present the HPI holds only information sourced from public registers provided by registration authorities. This includes practitioner name, qualifications, practising status, and scope of practice. The HPI also holds some non-public information such as date of birth which is needed to authenticate entries and avoid duplications. Over time, the HPI may hold more information about practitioners, but this will be only be collected and disclosed where agreed with each registration authority.

More Information can be found at the HPI web site - <http://www.nzhis.govt.nz/hpi/index.html>.

Flow Chart

The Final page of these notes is a flow chart showing the process for the registration of a New Zealand qualified midwife.

Flow Chart – Training and Registration Process for New Zealand Qualified Midwives

