

Guide for Applicants to the New Zealand Training Network Commencing in December 2019

Introduction

Applicants are directed to the current edition of the Vocational Training Program (VTP) handbook for a general guide to the functions of The Royal Australian and New Zealand College of Ophthalmologists (RANZCO), the application process, and prerequisites.

New Zealand Training Program

The start date is typically the second Monday of December. Vocational training posts are provided for the full four years of training. In their fifth year, most New Zealand trainees get experience overseas, however, there are about eight posts suitable for fifth years in all main centres.

The New Zealand training program has developed over recent years to:

1. provide exposure to all areas of ophthalmology to be a comprehensive ophthalmologist;
2. support trainees in their preparation for exams;
3. broaden their experience, introducing them to different styles of Ophthalmic practice in the New Zealand health system (larger city teaching hospitals vs smaller centres in provincial towns).

During the first four years trainees should expect to be rotated through two of the main centres of Auckland, Hamilton, Wellington, Christchurch, and Dunedin for 12-24 months each and one or two six-month rotation at a provincial centres, including Rotorua, Tauranga, Palmerston North, Nelson, and Hawkes Bay.

Advice to prospective applicants

The selection panel is dedicated to find the most suitable doctors for training who will eventually contribute to the New Zealand ophthalmic community. There is no expectation that applicants complete higher degrees prior to applying. (For those interested, the College can advise of pathways for completing higher degrees whilst in the VTP.)

The New Zealand selection panel is made up of Ophthalmologists from all the employing District Health Boards (DHB) that have training posts. In New Zealand, the DHBs receive funding for training doctors via Health Workforce New Zealand (HWNZ). HWNZ has recently discontinued funding for trainee registrars who are not New Zealand citizens or permanent residents. Therefore, DHBs have a financial incentive to consider New Zealanders before other nationals. Exceptions are possible; the DHB must apply for this. For example, overseas-trained doctors who are working in New Zealand and have demonstrated commitment to continue their career in New Zealand at the completion of their vocational training, who have nearly completed the requisite two years of residence in New Zealand towards becoming a permanent resident, may be considered for selection into the New Zealand training network.

Key areas that continue to be an issue for DHBs, Medical Council New Zealand (MCNZ) and Ophthalmologists are the supply of Ophthalmologists to areas outside of the main cities, and the facilitation of doctors to become Ophthalmologists who are more likely to contribute to improving healthcare for Maori and Pasifika communities.

The selection process is only a part of the bigger picture, but current evidence shows that doctors that grew up in provincial New Zealand are more likely to be the ones eventually working in provincial New Zealand. Following RANZCO centralised selection process, suitable applicants may be sent a further application form prior to determining the shortlist for the New Zealand selection committee. There may be an interview process in New Zealand in June or July 2019.

Ophthalmology training is popular in New Zealand and many more applicants apply than there are positions available, competition is therefore inevitable.

The selection panel has the following considerations for applicants to New Zealand.

1. New Zealand registrars are expected to be able to manage acute and emergency ophthalmic conditions in their first year and be able to immediately start their surgical training, so prior ophthalmic experience is favourable e.g. 6-12 months of acute clinic work and hands-on supervised procedures or clinics.
2. Clinical work in other specialties, even up to registrar level, are not a disadvantage.
3. A keen interest in Ophthalmology might be expected to be evident in the CV e.g. collaborative research or audit projects that are published or presented at meetings, undergraduate electives or summer studentships.
4. Higher degrees or the Masters of Ophthalmic Science are not necessary for entry into the New Zealand program. However, their components may be considered to contribute to 1 or 3 above.

Factors assessed in order of importance are:

1. Employment history
2. References
3. Commitment to Ophthalmology evidenced by clinical and research work
4. Evidence of prior academic performance

Referees should know you well and think favourably of you. Negative comments from referees detract seriously from applications. You should approach potential referees early to discuss your career ambitions – they may have constructive advice. Referees should preferably be consultants or senior staff familiar with the requirements and demands of the VTP.

Detailed individual feedback following selection is not provided, although the Chair of the selection panel may be able to provide general advice to unsuccessful applicants as to the areas they should focus upon in the following year. The timing of the college selection process means that many of the other junior doctor posts are appointed before the outcome of RANZCO selection is known. Applicants should carefully consider their 'plan B' with this in mind should they not be successful. Repeat applications are assessed without prejudice, but the high standard of applications from year to year will mean that it will be just as competitive. The application process is not a queue. Doctors early in their career who have demonstrated great potential to be successful in the vocational training programme may be recruited ahead of very good applicants who have applied on multiple occasions.

The selection committee takes seriously its obligations to potential trainees, the College, the New Zealand healthcare system and the New Zealand public to ensure that its processes are robust and fair in seeking to appoint the most suitable candidates for specialist Ophthalmic training. Its members are acutely aware of the huge talent pool of applicants, but that unavoidably there will be disappointment for the unsuccessful applicants for what is currently a very popular program.

Dr Michael Merriman, Chair, New Zealand Qualification and Education Committee
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