

12 July 2024

Simon Dalton  
[fyi-request-26710-c13a40bb@requests.fyi.org.nz](mailto:fyi-request-26710-c13a40bb@requests.fyi.org.nz)

Tēnā koe Simon,

### Your request for official information, reference: HNZ00047563

Thank you for your email on 10 May 2024, which was subsequently refined on 17 May 2024. You requested Health New Zealand | Te Whatu Ora (Health NZ) for the following under the Official Information Act 1982 (the Act):

*“Part A*

*For context the current Association of Salaried Medical Specialists (ASMS) SECA with Te Whatu Ora (Health NZ) states: “The date an employee met the requirements for vocational registration (or its overseas equivalent) will be used to assess when an employee would have been first placed on the specialist scale (not the date when the employee was vocationally registered).” This clause was added to the most recent ASMS SECA.*

*Please provide copies of all communication (email or formal letter) within the last 2 years regarding the starting or initial salary step placement for Senior Medical Officers (SMO's) from Te Whatu Ora senior staff (eg Margie Apa and Andrew Slater) to and from ASMS (email domain "asms.org.nz" will allow easier searching). Emails that discuss salary step placement issues for existing SMO staff should also be included.*

*Essentially a keyword search "salary scale" or "salary step" where the sender or receiver is "asms.org.nz" should make this quick and simple.*

*Any internal policy document or guidelines that relate to this subject ie to the placement of new or existing SMO's on the ASMS SECA salary steps should be included.*

*Part B*

*In how many cases in the last 10 years have SMO's been found to have been placed incorrectly on the salary scale and subsequently had this amended?”*

### Response

Please find our response to each part of your request below.

*“Part A: Please provide copies of all communication (email or formal letter) within the last 2 years regarding the starting or initial salary step placement for Senior Medical Officers (SMO's) from Te Whatu Ora senior staff (eg Margie Apa and Andrew Slater) to and from ASMS (email domain "asms.org.nz" will allow easier searching). Emails that discuss salary step placement issues for existing SMO staff should also be included.”*

Please see attached **Appendix 1-A** for emails in scope of your request. Note that some information is withheld under section 9(2)(a) of the Act to protect privacy. The need to protect the privacy of individuals is not outweighed by the public interest in the release of this information.

*“Any internal policy document or guidelines that relate to this subject ie to the placement of new or existing SMO's on the ASMS SECA salary steps should be included.”*

Please refer to the table below, which sets out the general guidelines used by the National Office and district areas for determining Senior Medical Officer (SMO) salaries.

Area	Guidelines for determining SMO salaries
National Enabling Office and Waitematā	Refer to the ASMS Multi-Employer Collective Agreement (MECA) (refer to <b>Appendix 1-B</b> ).
Bay of Plenty	<p>For permanent appointments, the salary is driven by the SMO MECA (refer to <b>Appendix 1-B</b>)</p> <ul style="list-style-type: none"> <li>• To determine step and increment date, work out when consultant received their specialist registration and count years worked going forward.</li> <li>• For those SMOs newly qualified and trained in New Zealand and have completed their fellowship, count the fellowship year as one year as specialist and place them on Step 2.</li> </ul>
Capital and Coast	<p>The district uses the ASMS Single Employer Collective Agreement (SECA) for guidance.  <a href="https://asms.org.nz/employment-advice/meca/">https://asms.org.nz/employment-advice/meca/</a></p>
MidCentral/Taranaki	<p>The district uses the ASMS Single Employer Collective Agreement (SECA) for guidance (i.e. when a consultant becomes eligible for vocational registration).  <a href="https://asms.org.nz/employment-advice/meca/">https://asms.org.nz/employment-advice/meca/</a></p> <ul style="list-style-type: none"> <li>• For Australasian trained SMOs, it will be when they gained fellowship with the relevant college.</li> <li>• For International Medical Graduates (IMGs), it is usually based on when they obtained their specialist qualification in the respective country.</li> </ul> <p>Step 1 is counted from the date they obtained fellowship or specialist qualification.</p>
Northland	<p>The district uses the <i>National District Health Boards' Principle Application of the MECA Salary Scale</i> (refer to <b>Appendix 1-C</b>).</p> <ul style="list-style-type: none"> <li>• For the Medical Officer step placement, the district counts the number of years worked as a registrar and Medical Officer, in a relevant area of medicine, less 3 years, to determine the correct step.</li> <li>• For the new Fellow salary scale in the SECA, the district places Fellows/Medical officers on this scale once they have received their fellowship, and before they receive vocational registration.</li> <li>• For the Specialist step placement, the district bases this off the date vocational registration was achieved and how many years of experience they have had as a specialist. Since the new SECA has been implemented, there are now different rulings. The placement of a SMO on the specialist scale will be the date they became eligible for vocational</li> </ul>

Area	Guidelines for determining SMO salaries
	registration (when they became a Fellow), this will also be used as their increment date.
Southern	It is based on the date of their fellowship for the New Zealand/Australian-trained SMOs or Board Certification (including those issued by overseas equivalent professional registration bodies) and the date when they become a specialist. (refer to attached <b>Appendix 1-D</b> )
Waikato	<p>Medical Officers (general registration)</p> <ul style="list-style-type: none"> <li>years of relevant experience as a medical officer, usually excludes 2 years house officer.</li> </ul> <p>Specialists</p> <ul style="list-style-type: none"> <li>years of relevant experience as a specialist (vocational registration in the branch of medicine employed).</li> <li>internal relativities also considered alongside the salary steps of existing SMOs of similar qualifications and experience.</li> </ul> <p>From the 2023 Collective Agreement</p> <ul style="list-style-type: none"> <li>step placement now counts from the time they met the requirements for vocational registration (rather than actual date of vocational registration) as does the date for the first step progression, then annual (cl 12.2(a)).</li> </ul>
Whanganui	The district counts the number of years since vocationally registered/board certified, i.e. Step 1 from first year as consultant.

*“Part B: In how many cases in the last 10 years have SMO's been found to have been placed incorrectly on the salary scale and subsequently had this amended?”*

This information is not tracked in existing Health NZ systems. This part of your request is therefore refused under section 18(e) of the Act as this information does not exist.

## How to get in touch

If you have any questions, you can contact us at [hnzOIA@tewhatuora.govt.nz](mailto:hnzOIA@tewhatuora.govt.nz).

If you are not happy with this response, you have the right to make a complaint to the Ombudsman. Information about how to do this is available at [www.ombudsman.parliament.nz](http://www.ombudsman.parliament.nz) or by phoning 0800 802 602.

As this information may be of interest to other members of the public, Health NZ may proactively release a copy of this response on our website. All requester data, including your name and contact details, will be removed prior to release.

Nāku iti noa, nā



**Andrew Slater**  
Chief People Officer  
People and Communications

**From:** [Laila Harre](#)  
**To:** [Dinah Nicholas](#)  
**Cc:** S9(2)(a)  
**Subject:** RE: Salary step placements  
**Date:** Friday, 17 May 2024 5:21:00 pm  
**Attachments:** [image001.png](#)  
[image002.png](#)

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Kia ora, S9(2)(a)

I am replying in Margie's absence.

You have identified a new clause that was agreed to in ASMS bargaining last year and is effective from 1 September 2023. I am afraid that such changes only apply from the date of the new agreement and are not retrospective.

I am sure ASMS will be able to explain further should you remain unsure about this.

Ngā mihi

**Laila Harré**

**Head of Industrial Workplace Relations & Remuneration  
People and Communications**

S9(2)(a) | [laila.harre@tewhatuora.govt.nz](mailto:laila.harre@tewhatuora.govt.nz)



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**From:** Dinah Nicholas <Dinah.Nicholas@TeWhatuOra.govt.nz>  
**Sent:** Friday, May 17, 2024 3:54 PM  
**To:** Laila Harre <Laila.Harre@TeWhatuOra.govt.nz>  
**Cc:** S9(2)(a)  
**Subject:** FW: Salary step placements

Hi Laila

Can you please answer S9(2)(a) queries below in Margie's absence.

S9(2)(a) Margie is currently overseas. I'm sure Laila will be able to answer your questions.

Nga mihi  
Dinah

**Dinah Nicholas**

**Executive Assistant to Margie Apa, Tumu Whakarae (Chief Executive)**

S9(2)(a) | imēra: [dinah.nicholas@tewhatuora.govt.nz](mailto:dinah.nicholas@tewhatuora.govt.nz)



**Health New Zealand | Te Whatu Ora**

*At Health New Zealand we value flexible working. Regardless of when you receive this email, I do not expect a response outside of your normal working hours.*

**From:** S9(2)(a)  
**Sent:** Friday, May 17, 2024 3:46 PM  
**To:** Margie Apa <[Margie.Apa@TeWhatuOra.govt.nz](mailto:Margie.Apa@TeWhatuOra.govt.nz)>  
**Subject:** Salary step placements

You don't often get email from S9(2)(a). [Learn why this is important](#)

Tālofa lava Margie,

I am hoping you will be able to answer this question for me.

The recent ASMS SECA has some changes to this section below:

**12.2 Advancement through Salary Scales**

(a) The initial placement of an employee on the applicable salary scale shall be negotiated between the prospective employee and employer, in consultation with the clinical director (or equivalent) of the applicable service. To ensure maintenance of internal equity, placement of new employees shall take into account years of relevant experience and relevant qualifications, and align with the placement of the existing employed workforce with similar qualifications and experience.

The date an employee met the requirements for vocational registration (or its overseas equivalent) will be used to assess when an employee would have been first placed on the specialist scale (not the date when the employee was vocationally registered).

(b) Thereafter, advancement through the salary scales shall be annual, subject to satisfactory performance of the employee's agreed duties and responsibilities.

For specialists the annual anniversary date shall reflect the anniversary of when the employee first met the requirements for vocational registration (or its overseas equivalent).

Where does that leave those of us who started a few years before this? I.e. in my case the date I met the requirement for vocational registration was not used at all to assess where I would be first placed on the salary scale and as a result I am 20 months behind where I would be under today's SECA due to undertaking different forms of training/work etc before returning to New Zealand.

I would like to think that there is a fair and uniform/equal standard of assessment applied and those of us who had our time since meeting eligibility for vocational registration ignored in the past could have this righted. Do you agree?

Kind regards,

S9(2)(a)

S9(2)(a)

Christchurch Hospital, Christchurch | PO Box 4710, Christchurch 8140, New Zealand



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## ASMS MECA Step Placement Principles (Reviewed August 2021)

### 1. CRITICAL REQUIREMENTS

- a. In order to ensure that Auckland DHB is applying a consistent and compliant approach to step placement for all SMOs, it is critical that:
- All decision-makers are familiar with these principles and apply them to all step placement decisions
  - All required approvals are confirmed before any offer is communicated, and a record of those approvals is kept on the SMO's file for future reference
    - Requests for such approvals must be made in writing and must provide all relevant information – including information regarding internal relativities for the Directorate and in other comparable services across Auckland DHB
  - The key considerations and rationale for **all** decisions made regarding placement on the Specialist Salary Scale must be recorded and kept on the SMO's file, together with a record of negotiations with an SMO over their step placement on commencement of employment (e.g. emails exchanged/proposals/responses)
  - For Medical Officers and Fellows, where a decision departs from the formula/guidance below, the key considerations and rationale must be recorded on the SMO's file.
  - These Placement Principles will be reviewed everytime the MECA is re-negotiated or prior as appropriate, by ER/IR Manager, HR Director – Partnering and Management, Chief Medical Officer and SMO Subject Matter Expert from the Recruitment Team, to ensure that they are still valid and consistent with any changes to the MECA.

### 2. MEDICAL OFFICERS (MOs) and FELLOWS

#### a. Medical Officers

Step placement for Medical Officers (MO) will depend on their qualifications and experience and will be determined on a case by case basis in accordance with Clauses 11.4 and 12.2(a) of the [ASMS Collective Agreement \(MECA\)](#).

Auckland DHB applies the following formula to guide decisions about placement on the Medical Officer Scale:

***Total of Registrar years and Medical Officer years worked (excluding years worked as a House Officer), less three years  
= Relevant year on the Medical Officer Scale = Salary Step***

Notes:

- If application of this formula produces a result that is significantly less than remuneration as an RMO (for an equivalent job size) then the HR Director – Partnering and Management may approve a higher step.
- If there are other reasons why the Head of Department and/or Service Clinical Director does not wish to apply the formula and/or believes the outcome of applying the formula is unsuitable, approval for a different approach may be given by the Chief Medical Officer.

#### b. Fellows

As Fellowship roles are training positions, Fellows are generally appointed on Step 1 of the Medical Officer scale regardless of their background, experience or registration status, but may also be appointed on terms and conditions applicable to a Registered Medical Officer (RMO) if they are working an RMO roster. Any deviation should be approved by the Chief Medical Officer.

## Notes:

- If a specialist with vocational registration currently employed with Auckland DHB takes up Fellowship training in another specialty, they will be moved from the Specialist scale and placed on the relevant step of the MO scale for the duration of the training. The move from one scale to the other will be approved by the HR Manager for the Directorate.
- However, a specialist undertaking a Fellowship training role within a sub-speciality (of the specialty in which they are employed to work) will continue on the Specialist scale. Also, some specialties like Radiology may employ newly qualified specialists in a Junior Specialist role as a Fellow for sub speciality training. These doctors, if registered as a specialist, will be placed on the SMO scale.
- A Fellow currently or previously employed on Step 1 moving/coming back to another Fellowship role after 1 year will progress to Step 2.

### 3. SENIOR MEDICAL OFFICERS (SMOs)

Step placement for SMOs will depend on the SMO's qualifications and experience and will be determined on a case by case basis in accordance with Clauses 11.3 and 12.2(a) of the MECA.

Clause 11.3 defines a Medical Specialist to mean any medical practitioner:

- Who is vocationally registered by the Medical Council;
- In one of the approved branches of medicine;
- Employed in that branch of medicine; and
- Has minimal oversight.

SMOs who meet the above definition are eligible to be placed on the Specialist Salary Scale.

The following principles apply when deciding where to place the SMO on the Specialist Salary Scale:

- Under the MECA, placement on the salary scale is by negotiation.
- Any negotiation must be in consultation with the Service Clinical Director and the HR Manager for the Directorate.
- In negotiating the appropriate step placement, regard should be had to:
  - Relevant experience
  - Qualifications
  - Alignment with the placement of existing employees with similar qualifications and experience.

Salary step is determined with reference to the [National DHBs Principle – Application of the MECA Salary Scale \(updated 2020\)](#)

### 4. NEW ZEALAND GRADUATES

For New Zealand qualified doctors to be placed on the Specialist Salary Scale, they must have Vocational Registration (VR) with the Medical Council of New Zealand.

To determine their position on the Specialist Salary Scale (if they have VR), SMO experience includes **all** experience since the date of VR and may also include **relevant** experience prior to attaining VR – e.g. any fellowship in a relevant discipline.

Because an SMO cannot be placed on the Specialist Salary Scale until they have attained VR, they should be aware of the following:

- a. The time period between Fellowship being awarded and VR is a process of verifying documents and can take 3-6 months once the VR application has been lodged. In most cases this period will not be more than 6 months.



- b. When a doctor applies for VR on achievement of the Fellowship, the doctor may not be employed in the role of an SMO on Step 1 of the SMO scale until they have provided Payroll with a copy of the VR APC. Their date of commencement in the role following receipt of the VR APC becomes their anniversary date. A clause to this effect must be included in their employment agreement.

Other considerations for New Zealand medical graduates are as follows:

- a. . When a doctor has attained VR during Fellowship training, they remain on the Medical Officers scale until this training period has been completed. If they are offered a role as an SMO they will be paid on the Specialist scale from their date of commencement in the SMO role. Their anniversary date is the date on which they commence in the SMO role.
- b. In some cases, the doctor may go overseas soon after gaining Fellowship and defer their VR until they return. Reasons for this could be to obtain further training or to gain specialist registration and employment in another country for a period of time. Relevant experience in such cases may include the time spent on the overseas fellowship, but they will not be eligible to be placed on the Specialist scale until they have attained VR. If experience gained on any fellowship prior to attaining VR (whether undertaken overseas or not) is to be taken into account for the purposes of negotiating step placement, one or more of the following should generally apply:
- The fellowship was undertaken in the same discipline in which the SMO is going to be working at Auckland DHB, or, in Auckland DHB's assessment, a closely related discipline
  - The experience gained on the fellowship has been a key factor in Auckland DHB's decision to offer employment to the SMO
  - The knowledge gained during the fellowship will add other demonstrable value to the Service or Directorate such that it should be recognised in the SMO's remuneration.
- c. VR in one speciality will count towards experience for determining salary step for appointment as a Specialist in a new speciality. However, VR in one speciality will not entitle the doctor to be placed on the SMO scale if they undertake Fellowship training in another speciality – see above.
- d. Where the SMO has an additional 'super' speciality qualification within the speciality, there may be provision for an additional step to be awarded after considering internal relativities. This decision will be approved by the HR Manager for the Directorate.

## 5. INTERNATIONAL MEDICAL GRADUATES (IMG)

### UK and IRISH DOCTORS

SMO experience is counted from Certificate of Completion (CCT) date (and not VR in NZ). CCT is issued by the General Medical Council (GMC) of the UK and the Fellowship equivalent, which allows the doctor to go on the GMC Specialist Register. This date is available on the [GMC Website](#).

### USA DOCTORS

SMO experience is counted from the date they became Board Certified.

### OTHER COMPARABLE HEALTH SYSTEM DOCTORS (including Australia)

SMO experience is counted from the date they started working in a specialist role and/or qualified to be a specialist.

## 6. GENERAL NOTES

### **Annual Practice Certificate (APC)**

Doctors must not start in the role until they have gained the APC for the relevant registration in New Zealand for their applicable scope of practice i.e. General registration for appointment on Medical Officer Scale and Vocational/Locum Tenens for the Specialist scale.

### **Anniversary Date**

For all IMG doctors joining Auckland DHB from overseas, date of commencement in an SMO role is the anniversary date for Step increases.

All NZ registered specialists coming to us from another DHB or returning to NZ can use the VR date as their anniversary date if approved at a Service level. Otherwise, anniversary dates for NZ registered specialists will be as provided for above

**SMO Workbooks** are required for all doctors appointed under the ASMS MECA.

**Credentialing** is required for all appointments on the Specialist scale.

**Allowances** must be included in the SMO workbook and all allowances, other than on call and availability must be detailed in the SMO's offer letter.

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## NATIONAL DISTRICT HEALTH BOARDS' PRINCIPLE APPLICATION OF THE MECA SALARY SCALE

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The national DHB MECA clauses 12.2 (a) and (b) state:

*“(a) The initial placement of an employee on the applicable salary scale shall be negotiated between the prospective employee and employer, in consultation with the clinical director (or equivalent) of the applicable service and taking into account 12.2 (b) below and factors such as years of relevant experience and qualifications.*

*“(b) The parties recognise that the new salary scales introduced from 1 January 2012 for Medical and Dental Specialists and Medical and Dental Officers have removed the bottom three steps of the previous scales. To avoid potential inequities in placement of new employees it is agreed that initial placement should take into account relevant years of experience and relevant qualifications, and align with step placement of the existing employed workforce with similar levels of qualification and experience.”*

This Principle should be read in conjunction with the Senior Medical and Dental Officers Collective Agreement (MECA) and the Regional Operational Protocols for Senior Medical and Senior Dental Officers – Job Size and Remuneration January 2006.

### DEFINITIONS

“Medical Specialist” means any medical practitioner who is vocationally registered by the Medical Council under the Health Practitioners Competence Assurance Act 2003 in one of the approved branches of medicine and who is employed in either that branch of medicine or in a similar capacity with minimal oversight.

“Fellow” means any medical practitioner that meets the definition of “Medical Officer” as per the MECA, and who is appointed to a Fellowship role. A medical practitioner appointed to a Fellow role may or may not be vocationally registered. They will have completed all training requirements but may not have completed enough time within the training programme to be vocationally registered. The role is likely to require a degree of oversight.

“Medical Officer” means any medical practitioner who is registered under the Health Practitioners Competence Assurance Act 2003 and who falls within the coverage clause of the MECA Agreement and who is not a medical specialist. Therefore Fellows are considered to be Medical Officers within this definition.

“Dental Specialist” means any dental practitioner who is registered by the Dental Council under the Health Practitioners Competence Assurance Act 2003 as a dental specialist in one of the approved branches of dentistry and who is employed in that branch of dentistry or in a similar capacity with minimal oversight.

“Dental Officer” means any dental practitioner who is registered under the Health Practitioners Competence Assurance Act 2003 and who falls within the coverage clause of the MECA Agreement and who is not a dental specialist.

### BACKGROUND

In regard to the employment offer, the appropriate scale must be determined ((a) Medical and Dental Specialists or (b) Medical and Dental Officers). Then the appropriate step must be determined, taking into account DHB MECA clauses 12.2(a) & (b) and the following principles.

## PRINCIPLES

### SPECIALISTS

- **Medical or Dental Specialists** should be placed on the step commensurate with their years of relevant experience since vocational registration, and relevant qualifications and align with step placement of existing workforce with a similar level of qualification and experience.
- To maintain relativity with employed Specialists, placement on the MECA step will be based on the current to new step translation as stated in the MECA clause 12.4(a), therefore for all appointments in 2012, the benchmark for step one for a Medical or Dental Specialist is up to four years of experience since becoming eligible for vocational registration. (NB given the translation retained the original service date for those on Step 4, a Specialist with 4 years' experience who translated to Step 1 will have incremented to Step 2 during the 2012 calendar year, those Specialists on Steps 1 to 3 had their increment dates reset to 1 January).
- In alignment with the MECA, five years of experience will equate to Step 2 with each additional year of experience being placed on the next step accordingly.
- As the original cohort affected by the changes progresses through the scale (based on accumulation of service) this 'benchmark' will move with them. For example, SMOs with 1 to 4 years' experience who translated to Step 1 in the new scale on 1 January 2012, will have accrued 2 to 5 years' experience and progressed to Step 2 by 1 January 2013, so this would become the benchmark. See below for complete table.
- Where vocationally registered preceding a Fellowship appointment, the time spent in that Fellowship role, will be recognised upon subsequent appointment to a Medical or Dental Specialist role.

### FELLOWS & MEDICAL OFFICERS

- Appointment to a **Fellow** role will be on a step commensurate with the years of relevant experience within the employing specialty and align with step placement of existing workforce with a similar level of qualification and experience.
- To maintain relativity with employed Fellows, placement on the MECA step will be based on the current to new step translation as stated in the MECA clause 12.4(c) noting that placement on Step 1 is based on up to four years of experience for all appointments in 2012. This benchmark will shift over time in the same manner as for Specialists.
- Appointment to a **Medical or Dental Officer** role will be on a step commensurate with the years of relevant experience within the employing specialty as per the following formula. This is calculated as the aggregate of worked Registrar years and Medical Officer years, less three years (steps). This formula maps the step that will equate the base step remuneration at a level relative to the RMO scale. If this produces a result that is significantly less than remuneration as an RMO (for an equivalent job size) then the GM-HR may approve a higher step.

### GENERAL

- Time spent not practicing as an SMO is not counted as part of "years of relevant experience" subject to Clause 12.5, below:

*Clause 12.5 Absence due to Approved Unpaid Leave*

- a) *Notwithstanding any of the provisions of this clause, an employee on approved parental leave under Clause 28 of this Agreement shall receive their annual salary advancement on the due date when it falls during the period of leave.*

- b) *Subject to meeting the threshold of satisfactory performance an employee is entitled to receive their annual salary advancement unless they have had more than six months of approved unpaid leave in the period under review*
  - c) *Employees who have had more than six months approved unpaid leave shall be paid a pro rata lump sum payment on their advancement date subject to satisfactory performance in the period worked.*
  - d) *The pro rata payment will be calculated on the difference between their current salary step and the next step on the salary scale.*
  - e) *Notwithstanding this provision, however, subject to meeting the threshold of satisfactory performance, employees are entitled to receive their full annual salary advancement if their unpaid approved leave is for the purpose of gaining further experience or professional development relevant to their duties and responsibilities.*
- SMOs who have not trained in an Australasian training programme or have worked overseas prior to their New Zealand employment, for purposes of step and scale (specialist or medical officer) placement, will generally be recognised for “years of relevant experience” worked in their overseas position, even though they may not be vocationally registered at time of appointment and are required to be supervised for a period before vocational registration is granted.
  - Recognition of PhD and MD qualifications may be taken into account for step placement. Other training qualifications are generally considered part of professional development for SMOs and shall not be taken into account. Final approval shall rest with the GM-HR.
  - Annual increments should be one step only. However, recognition of PhD and MD qualifications once employed within the DHB may occur through step increase only where the SMO has taken leave and has materially forfeited their annual step increment. Any other remuneration enhancement should not be by way of advancement of steps.
  - Each SMO appointment and remuneration offer shall be approved by the GM-HR (or their delegate) and CMO. If an SMO Appointments Committee is active then the CMO may delegate this responsibility to the committee who shall maintain oversight of SMO remuneration components (i.e. step placement and any enhancement).
  - Application of the SMO Scale is as per the following table which also includes the basis of placement

**TABLE ONE: APPLICATION OF MECA SALARY SCALE**

	SPECIALIST	FELLOW	MEDICAL OFFICER (MO)
Definition	“Specialist” per the MECA is defined as any medical practitioner who is vocationally registered by the Medical Council under the Health Practitioners Competence Assurance Act 2003 in one of the approved branches of medicine and who is employed in either that branch of medicine or in a similar capacity with minimal oversight.	“Fellow” means any medical practitioner that meets the definition of “Medical Officer” as per the MECA, and is appointed to a Fellow role. A medical practitioner appointed to a Fellow role may or may not be vocationally registered. They will have completed all training requirements but may not have completed enough time within the training programme to be vocationally registered. The role is likely to require a degree of oversight.	“Medical Officer” per the MECA is defined as any medical practitioner who is registered under the Health Practitioners Competence Assurance Act 2003 and who falls within the coverage clause of the MECA Agreement and who is not a medical specialist.
Criteria	<ul style="list-style-type: none"> <li>• Appointment to a specialist role</li> <li>• SMO is vocationally registered</li> </ul>	<ul style="list-style-type: none"> <li>• Appointment to a Fellow role</li> <li>• Completion of all training requirements for specialist</li> </ul>	<ul style="list-style-type: none"> <li>• NOT appointed to a role as Medical Specialist</li> <li>• MO is NOT in a registrar role (neither training nor</li> </ul>

	<p style="text-align: center;"><b>OR</b></p> <ul style="list-style-type: none"> <li>International Medical Graduates (IMGs) may not be vocationally registered but are under supervision for a period pending vocational registration.</li> <li>SMO meets any additional employment criteria e.g. may be required to have completed a Fellowship</li> </ul>	<p>role</p> <ul style="list-style-type: none"> <li>Does not require vocational registration</li> </ul>	<p>non-training)</p> <ul style="list-style-type: none"> <li>MO is NOT vocationally registered</li> </ul>																																																																																
Scale	Medical and Dental Specialists	Medical and Dental Officers	Medical and Dental Officers																																																																																
Step	Based on number of relevant (worked) years experience since eligible for vocational registration – including years worked as a Fellow.	Based on the number of years relevant experience on the Medical Officer scale. Generally a fellow will be appointed to step one on the MO scale, taking into consideration step placement of employed Fellows. Note some Fellowships run for more than one year.	Based on the number of years experience on the Medical Officer/Registrar scale (less 3 years). If this produces a result that is significantly less than remuneration as an RMO (for an equivalent job size) then the GM-HR may approve a higher step.																																																																																
	<table border="1"> <thead> <tr> <th>Step on Scale</th> <th>Expected years' experience as at 1 January 2012</th> <th>Expected years' experience as at 1 January 2013</th> <th>Expected years' experience as at 1 January 2014</th> <th>Expected years' experience as at 1 January 2015</th> <th>Expected years' experience as at 1 January 2016</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>1<sup>st</sup> – 4<sup>th</sup> year</td> <td>1<sup>st</sup> year</td> <td>1<sup>st</sup> year</td> <td>1<sup>st</sup> year</td> <td>1<sup>st</sup> year</td> </tr> <tr> <td>2</td> <td>5<sup>th</sup> year</td> <td>2<sup>nd</sup> – 5<sup>th</sup> year</td> <td>2<sup>nd</sup> year</td> <td>2<sup>nd</sup> year</td> <td>2<sup>nd</sup> year</td> </tr> <tr> <td>3</td> <td>6<sup>th</sup> year</td> <td>6<sup>th</sup> year</td> <td>3<sup>rd</sup> – 6<sup>th</sup> year</td> <td>3<sup>rd</sup> year</td> <td>3<sup>rd</sup> year</td> </tr> <tr> <td>4</td> <td>7<sup>th</sup> year</td> <td>7<sup>th</sup> year</td> <td>7<sup>th</sup> year</td> <td>4<sup>th</sup> – 7<sup>th</sup> year</td> <td>4<sup>th</sup> year</td> </tr> <tr> <td>5</td> <td>8<sup>th</sup> year</td> <td>8<sup>th</sup> year</td> <td>8<sup>th</sup> year</td> <td>8<sup>th</sup> year</td> <td>5<sup>th</sup> – 8<sup>th</sup> year</td> </tr> <tr> <td>6</td> <td>9<sup>th</sup> year</td> <td>9<sup>th</sup> year</td> <td>9<sup>th</sup> year</td> <td>9<sup>th</sup> year</td> <td>9<sup>th</sup> year</td> </tr> <tr> <td>7</td> <td>10<sup>th</sup> year</td> <td>10<sup>th</sup> year</td> <td>10<sup>th</sup> year</td> <td>10<sup>th</sup> year</td> <td>10<sup>th</sup> year</td> </tr> <tr> <td>8</td> <td>11<sup>th</sup> year</td> <td>11<sup>th</sup> year</td> <td>11<sup>th</sup> year</td> <td>11<sup>th</sup> year</td> <td>11<sup>th</sup> year</td> </tr> <tr> <td>9</td> <td>12<sup>th</sup> year</td> <td>12<sup>th</sup> year</td> <td>12<sup>th</sup> year</td> <td>12<sup>th</sup> year</td> <td>12<sup>th</sup> year</td> </tr> <tr> <td>10</td> <td>13<sup>th</sup> year</td> <td>13<sup>th</sup> year</td> <td>13<sup>th</sup> year</td> <td>13<sup>th</sup> year</td> <td>13<sup>th</sup> year</td> </tr> <tr> <td>11</td> <td>14<sup>th</sup> year</td> <td>14<sup>th</sup> year</td> <td>14<sup>th</sup> year</td> <td>14<sup>th</sup> year</td> <td>14<sup>th</sup> year</td> </tr> <tr> <td>12</td> <td>15<sup>th</sup>+ year</td> <td>15<sup>th</sup>+ year</td> <td>15<sup>th</sup>+ year</td> <td>15<sup>th</sup>+ year</td> <td>15<sup>th</sup>+ year</td> </tr> </tbody> </table> <p><i>The highlighted cell reflects the "bubble" created by the compression of the bottom steps of the SMO scale in the 2011 settlement.</i></p>					Step on Scale	Expected years' experience as at 1 January 2012	Expected years' experience as at 1 January 2013	Expected years' experience as at 1 January 2014	Expected years' experience as at 1 January 2015	Expected years' experience as at 1 January 2016	1	1 <sup>st</sup> – 4 <sup>th</sup> year	1 <sup>st</sup> year	1 <sup>st</sup> year	1 <sup>st</sup> year	1 <sup>st</sup> year	2	5 <sup>th</sup> year	2 <sup>nd</sup> – 5 <sup>th</sup> year	2 <sup>nd</sup> year	2 <sup>nd</sup> year	2 <sup>nd</sup> year	3	6 <sup>th</sup> year	6 <sup>th</sup> year	3 <sup>rd</sup> – 6 <sup>th</sup> year	3 <sup>rd</sup> year	3 <sup>rd</sup> year	4	7 <sup>th</sup> year	7 <sup>th</sup> year	7 <sup>th</sup> year	4 <sup>th</sup> – 7 <sup>th</sup> year	4 <sup>th</sup> year	5	8 <sup>th</sup> year	8 <sup>th</sup> year	8 <sup>th</sup> year	8 <sup>th</sup> year	5 <sup>th</sup> – 8 <sup>th</sup> year	6	9 <sup>th</sup> year	9 <sup>th</sup> year	9 <sup>th</sup> year	9 <sup>th</sup> year	9 <sup>th</sup> year	7	10 <sup>th</sup> year	10 <sup>th</sup> year	10 <sup>th</sup> year	10 <sup>th</sup> year	10 <sup>th</sup> year	8	11 <sup>th</sup> year	11 <sup>th</sup> year	11 <sup>th</sup> year	11 <sup>th</sup> year	11 <sup>th</sup> year	9	12 <sup>th</sup> year	12 <sup>th</sup> year	12 <sup>th</sup> year	12 <sup>th</sup> year	12 <sup>th</sup> year	10	13 <sup>th</sup> year	13 <sup>th</sup> year	13 <sup>th</sup> year	13 <sup>th</sup> year	13 <sup>th</sup> year	11	14 <sup>th</sup> year	14 <sup>th</sup> year	14 <sup>th</sup> year	14 <sup>th</sup> year	14 <sup>th</sup> year	12	15 <sup>th</sup> + year	15 <sup>th</sup> + year	15 <sup>th</sup> + year	15 <sup>th</sup> + year	15 <sup>th</sup> + year
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2	5 <sup>th</sup> year	2 <sup>nd</sup> – 5 <sup>th</sup> year	2 <sup>nd</sup> year	2 <sup>nd</sup> year	2 <sup>nd</sup> year																																																																														
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4	7 <sup>th</sup> year	7 <sup>th</sup> year	7 <sup>th</sup> year	4 <sup>th</sup> – 7 <sup>th</sup> year	4 <sup>th</sup> year																																																																														
5	8 <sup>th</sup> year	8 <sup>th</sup> year	8 <sup>th</sup> year	8 <sup>th</sup> year	5 <sup>th</sup> – 8 <sup>th</sup> year																																																																														
6	9 <sup>th</sup> year	9 <sup>th</sup> year	9 <sup>th</sup> year	9 <sup>th</sup> year	9 <sup>th</sup> year																																																																														
7	10 <sup>th</sup> year	10 <sup>th</sup> year	10 <sup>th</sup> year	10 <sup>th</sup> year	10 <sup>th</sup> year																																																																														
8	11 <sup>th</sup> year	11 <sup>th</sup> year	11 <sup>th</sup> year	11 <sup>th</sup> year	11 <sup>th</sup> year																																																																														
9	12 <sup>th</sup> year	12 <sup>th</sup> year	12 <sup>th</sup> year	12 <sup>th</sup> year	12 <sup>th</sup> year																																																																														
10	13 <sup>th</sup> year	13 <sup>th</sup> year	13 <sup>th</sup> year	13 <sup>th</sup> year	13 <sup>th</sup> year																																																																														
11	14 <sup>th</sup> year	14 <sup>th</sup> year	14 <sup>th</sup> year	14 <sup>th</sup> year	14 <sup>th</sup> year																																																																														
12	15 <sup>th</sup> + year	15 <sup>th</sup> + year	15 <sup>th</sup> + year	15 <sup>th</sup> + year	15 <sup>th</sup> + year																																																																														

Step on Scale	Application of MECA Salary Scale – Expected years' experience as at:									
	1 Jan 2012	1 Jan 2013	1 Jan 2014	1 Jan 2015	1 Jan 2016	1 Jan 2017	1 Jan 2018	1 Jan 2019	1 Jan 2020	1 Jan 2021
1	1 <sup>st</sup> – 4 <sup>th</sup> year	1 <sup>st</sup> year	1 <sup>st</sup> year	1 <sup>st</sup> year	1 <sup>st</sup> year	1 <sup>st</sup> year	1 <sup>st</sup> year	1 <sup>st</sup> year	1 <sup>st</sup> year	1 <sup>st</sup> year
2	5 <sup>th</sup> year	2 <sup>nd</sup> – 5 <sup>th</sup> year	2 <sup>nd</sup> year	2 <sup>nd</sup> year	2 <sup>nd</sup> year	2 <sup>nd</sup> year	2 <sup>nd</sup> year	2 <sup>nd</sup> year	2 <sup>nd</sup> year	2 <sup>nd</sup> year
3	6 <sup>th</sup> year	6 <sup>th</sup> year	3 <sup>rd</sup> – 6 <sup>th</sup> year	3 <sup>rd</sup> year	3 <sup>rd</sup> year	3 <sup>rd</sup> year	3 <sup>rd</sup> year	3 <sup>rd</sup> year	3 <sup>rd</sup> year	3 <sup>rd</sup> year
4	7 <sup>th</sup> year	7 <sup>th</sup> year	7 <sup>th</sup> year	4 <sup>th</sup> – 7 <sup>th</sup> year	4 <sup>th</sup> year	4 <sup>th</sup> year	4 <sup>th</sup> year	4 <sup>th</sup> year	4 <sup>th</sup> year	4 <sup>th</sup> year
5	8 <sup>th</sup> year	8 <sup>th</sup> year	8 <sup>th</sup> year	8 <sup>th</sup> year	5 <sup>th</sup> – 8 <sup>th</sup> year	5 <sup>th</sup> year	5 <sup>th</sup> year	5 <sup>th</sup> year	5 <sup>th</sup> year	5 <sup>th</sup> year
6	9 <sup>th</sup> year	9 <sup>th</sup> year	9 <sup>th</sup> year	9 <sup>th</sup> year	9 <sup>th</sup> year	6 <sup>th</sup> – 9 <sup>th</sup> year	6 <sup>th</sup> year	6 <sup>th</sup> year	6 <sup>th</sup> year	6 <sup>th</sup> year
7	10 <sup>th</sup> year	10 <sup>th</sup> year	10 <sup>th</sup> year	10 <sup>th</sup> year	10 <sup>th</sup> year	10 <sup>th</sup> year	7 <sup>th</sup> – 10 <sup>th</sup> year	7 <sup>th</sup> year	7 <sup>th</sup> year	7 <sup>th</sup> year
8	11 <sup>th</sup> year	11 <sup>th</sup> year	11 <sup>th</sup> year	11 <sup>th</sup> year	11 <sup>th</sup> year	11 <sup>th</sup> year	11 <sup>th</sup> year	8 <sup>th</sup> – 11 <sup>th</sup> year	8 <sup>th</sup> year	8 <sup>th</sup> year
9	12 <sup>th</sup> year	12 <sup>th</sup> year	12 <sup>th</sup> year	12 <sup>th</sup> year	12 <sup>th</sup> year	12 <sup>th</sup> year	12 <sup>th</sup> year	12 <sup>th</sup> year	9 <sup>th</sup> – 12 <sup>th</sup> year	9 <sup>th</sup> year
10	13 <sup>th</sup> year	13 <sup>th</sup> year	13 <sup>th</sup> year	13 <sup>th</sup> year	13 <sup>th</sup> year	13 <sup>th</sup> year	13 <sup>th</sup> year	13 <sup>th</sup> year	13 <sup>th</sup> year	10 <sup>th</sup> – 13 <sup>th</sup> year
11	14 <sup>th</sup> year	14 <sup>th</sup> year	14 <sup>th</sup> year	14 <sup>th</sup> year	14 <sup>th</sup> year	14 <sup>th</sup> year	14 <sup>th</sup> year	14 <sup>th</sup> year	14 <sup>th</sup> year	14 <sup>th</sup> year
12	15 <sup>th</sup> + year	15 <sup>th</sup> year	15 <sup>th</sup> year	15 <sup>th</sup> year	15 <sup>th</sup> year	15 <sup>th</sup> year	15 <sup>th</sup> year	15 <sup>th</sup> year	15 <sup>th</sup> year	15 <sup>th</sup> year
13		16 <sup>th</sup> + year <sup>1</sup>	16 <sup>th</sup> + year	16 <sup>th</sup> + year	16 <sup>th</sup> + year	16 <sup>th</sup> + year	16 <sup>th</sup> year	16 <sup>th</sup> year	16 <sup>th</sup> year	16 <sup>th</sup> year
14							17 <sup>th</sup> + year <sup>2</sup>	17 <sup>th</sup> year	17 <sup>th</sup> year	17 <sup>th</sup> year
15								18 <sup>th</sup> + year <sup>3</sup>	18 <sup>th</sup> + year	18 <sup>th</sup> + year

<sup>1</sup> As at **1 October 2013**, all specialists who have been on Step 12 for 1 year or more move to Step 13 and **new staff** with 16+ years' experience are placed on Step 13

<sup>2</sup> As at **5 March 2018**, all specialists who have been on Step 13 for 1 year or more move to Step 14 and **new staff** with 17+ years' experience are placed on Step 14

<sup>3</sup> As at **1 April 2019**, all specialists who have been on Step 14 for 1 year or more move to Step 15 and **new staff** with 18+ years' experience are placed on Step 15

Released under the Official Information Act 1982

**APPENDIX 1-D**

**SENIOR MEDICAL OFFICERS**

For the ASMS Collective 1 April 2020 – 31 March 2021 got their reg as per left column

**Step relevant from 1 January 2024**

<b>Years of Experience since Registration</b>	<b>Step</b>	
1	1	
2	2	
3	3	
4	4	
5	5	
6	6	
7	7	
8	8	
9	9	
10	10	
11	11	
12	12	
13	13	
14	13	
15	13	
16	13	
17	14	
18	15	

Released under the Official Information Act 1982