**Health NZ and STONZ National Manual Reimbursement List Form**

**College Request for Addition or Removal of Item**

This form is part of the Health NZ & STONZ National Manual (the Manual) and relates to training related expenses set out in clause 10 of the STONZ CA. As part of this section of the Manual a National Reimbursement List for the various prevocational and vocational specialties has been developed. The lists provide a guide on appropriate and relevant expenses that facilitate acceptance on to a training programme or are requirements for completion of vocational training.

Requests from Australasian Training Colleges to add or remove items from the reimbursement list must be completed on this form and be endorsed at a National level prior to submission to the STONZ National Engagement Forum (SNEF) for final endorsement. Requests must meet the following criteria;

* The item is a requirement of training, or an application prerequisite set by the relevant Speciality College; or
* Where the item is not a requirement of training or an application prerequisite, it must be considered generally relevant and beneficial to relevant RMOs towards completion of the vocational pathway.

Once completed, the request form should be submitted to SNEF Secretariat who will administer the process of endorsement.

Where the request is not endorsed at a National CMO level it will not be progressed to SNEF for final endorsement.

The SNEF meet quarterly and are responsible for final decisions regarding any request to add or remove an item from the Specialty Reimbursement List, having regard to whether the criteria set out in this form has been met.

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| **COLLEGE** | *College Name* | | | | | | | |
| **Requestor Name** |  | | | | | **Designation** | *Designation Details* | |
| **Requestor Email** |  | | | | | **District** | Choose an item. | |
| **Request Type** | *Add Item / Remove Item* | | | | | | | |
| **ITEM SUMMARY** | | | | | | | | |
| **Item Name** |  | | | | | | | |
| **Details of item** |  | | | | | | | |
| **Type of item** | *Choose an item.* | |  | | | | | |
| ***Courses Only***  **Is the course available in NZ or Australia** | *Provide detail on where course is held.* | | | | | | | |
| **Reason for request** | *If the item to be added is not a requirement of training or a prerequisite to enter vocational training, please provide comprehensive reasons for request to add.* | | | | | | | |
| **ITEM DETAIL** | | **Yes** | **No** | **Evidence / Documentation** | | | | |
| Is it a prerequisite to enter vocational training? | |  |  |  | | | | |
| Is it a requirement of training | |  |  |  | | | | |
| Approximate cost of item | | **$** | | |  | | | |
| Date received by SNEF Secretariat | |  | | | | | | |
| **NATIONAL CMO ENDORSEMENT** | | **Yes** | **No** | **Date** | **Comments** | | | **Signature** |
| SNEF CMO Representative | |  |  |  |  | | |  |
| Date received by SNEF Secretariat | |  | | | Complete send to SNEF  Incomplete – Returned to Requestor | | |  |
| **SNEF FINAL ENDORSEMENT** | | **Yes** | **No** | **Date** | **Comments** | | | **Signature** |
| SNEF Chair | |  |  |  |  | | |  |

# Request Process

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| Definitions | |
| CMO | Chief Medical Officer |

1. College Requestor
   * Completes the form and provides all relevant supporting documentation
   * Submits the form to STONZ or Secretariat via email: [stonzmanual@tas.health.nz](mailto:stonzmanual@tas.health.nz)
2. STONZ or SNEF Secretariat
   * If received by STONZ request is sent to SNEF Secretariat
   * SNEF Secretariat receives form and checks that all details have been completed correctly
   * If request is not complete form returned to requestor
   * Where request is complete the form is forwarded to the SNEF CMO representative for endorsement
3. SNEF CMO Representative
   * Reviews the request on behalf of the National CMO Forum and assesses whether it meets the criteria for Health NZ endorsement and submission to SNEF for final endorsement
   * Yes – complete endorsement section and send to SNEF Secretariat on email: [industrial.relations@tewhatuora.govt.nz](mailto:industrial.relations@tewhatuora.govt.nz) for submission to SNEF
   * No – complete endorsement section and send to SNEF Secretariat on email: [industrial.relations@tewhatuora.govt.nz](mailto:industrial.relations@tewhatuora.govt.nz) for return to requestor
4. SNEF Secretariat receives form from the SNEF CMO Representative
   * Following SNEF CMO approval/decline forward to STONZ for review
   * Where SNEF CMO decision is not to endorse the request STONZ provided with opportunity to provide comment/feedback on decision
   * SNEF secretariat forwards any comments/feedback from STONZ on decision to SNEF CMO representative
   * Item endorsed – submit to SNEF for final endorsement
   * Item not endorsed – return to requestor with explanation for decision
5. SNEF review
   * SNEF Secretariat lists on agenda for next SNEF meeting
   * SNEF review request and make decision on final endorsement
6. SNEF Secretariat
   * Advises requestor of outcome of request
   * Reimbursement list updated where SNEF has provided final endorsement
   * Notification sent to RMO Support Units nationally that reimbursement list has been updated