1. PURPOSE AND SCOPE

This document outlines the Terms of Reference for the Professional Standards and Fellowship Services Committee (PSFS). Previously Professional Development and Standards Board (PDSB), then Professional Standards and Advocacy Committee (PSAC).

As a Fellowship based organisation, the Royal Australasian College of Surgeons commits to ensuring the highest standard of safe and comprehensive surgical care for the community we serve through excellence in surgical education, training, professional development and support.

The PSFS is accountable to Council for providing the policy framework to ensure maintenance of competence of Fellows and provision of high-quality surgical care to patients. The Committee is responsible for the provision of services and products to Fellows of RACS that are consistent with this overall aim and which represent value for money for Fellows subscriptions.

2. KEYWORDS

Terms of Reference, Professional Standards and Fellowship Services Committee

3. BODY OF POLICY

3.1. Objectives

3.1.1. To advise Council on matters pertaining to the Fellowship and surgical standards

3.1.2. To provide a Continuing Professional Development (CPD) Program and associated standards

3.1.3. To support surgical research and administer scholarships for surgeons and trainees for surgically-related research.

3.2. Duties and Responsibilities

3.2.1. To oversee all RACS fellowship activities with a focus on coordination, integration, achievement of goals and risk management.

3.2.2. To provide ongoing strategic support and oversight for policy and fellowship matters relating to surgery.

3.2.3. To collaborate with, seek advice from, and consider the interests of all Specialty Associations, Societies and special interest groups with regard to RACS fellowship activities. These include:

- Professional standards
- CPD
- Innovation and scholarship in surgical education
- Library and web-based or on-line services
- Fellowship – stages and transitions of practice – admission, re-entry, retirement etc
- Fellowship sections and interest groups
- Conference and events management
- Surgical research and scholarships

3.2.4. To oversee the RACS CPD Program and to promote compliance.

3.2.5. To set standards and provide guidelines for effective and varied methods of continuing education and professional development recognised within the RACS CPD Program.
3.2.6. To set standards for credentialing and defining scope of practice during the stages of a surgical career.

3.2.7. To set standards relating to surgical competence and performance.

3.2.8. To promote standards and participation in surgical audit and peer review.

3.2.9. To ensure that the interests of all surgeons are recognised, including specific groups such as:
- Surgeons working in rural and regional areas
- Younger Fellows
- Female surgeons
- Surgeons who are approaching retirement
- Senior surgeons
- Surgeons with special interests and areas of practice (e.g. Trauma, Medico Legal etc)
- Aboriginal and Torres Strait Islander and Māori Surgeons

3.2.10. To ensure appropriate communication channels are in place for the provision of feedback to, and discussion with the Education portfolio with respect to professional development activities.

3.2.11. To ensure appropriate engagement in the planning and review of the Annual Scientific Congress.

3.2.12. To advise on strategic alliances which RACS should pursue through its events department.

3.2.13. To ensure appropriate development of research activities of RACS, including ASERNIP-S and research scholarships.

3.2.14. To advise on strategies for research funding for the RAS Division, including ASERNIP-S.

3.2.15. To support activities in the area of Academic Surgery.

3.2.16. To support and promote Surgical Audits and the RACS MALT Program.

3.2.17. To establish priorities for the Fellowship portfolio, including budget priorities.

3.3. Powers

The Committee has such executive powers, supervisory functions and decision-making authority as the Council delegates to it from time to time.

3.4. Composition and Size

The Committee is composed of Office Bearers, Council members and the Specialty Societies and Associations.

Membership comprises:

3.4.1. Chair PSFS
- Chair Professional Standards
- Chair Fellowship Services
- Chair Research and Academic Surgery
- Chair Surgical Audit
- Chair ASC Planning and Review

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<th>Division: Fellowship Engagement</th>
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<td>Department: Professional Standards</td>
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3.4.2. Censor in Chief

3.4.3. Expert Community Advisor/s

3.4.4. Specialty Society representatives:
   - Australian and New Zealand Association of Paediatric Surgeons
   - Australian and New Zealand Society of Vascular Surgery
   - Australian Orthopaedic Association
   - Australian and New Zealand Society of Cardiac and Thoracic Surgeons
   - Australian Society of Otolaryngology – Head and Neck Surgery
   - Australian Society of Plastic Surgeons
   - General Surgery Australia
   - Neurosurgical Society of Australasia
   - New Zealand Association of General Surgeons
   - New Zealand Association of Plastic Surgeons
   - New Zealand Orthopaedic Association
   - New Zealand Society of Otolaryngology – Head and Neck Surgery
   - Urological Society of Australia and New Zealand

3.4.5. In attendance:
   - Executive Director of Surgical Affairs (Australia)
   - Surgical Advisor/s (Aotearoa New Zealand)
   - Chief Executive Officer
   - Executive General Manager, Fellowship Engagement
   - Executive General Manager, Education Development & Delivery
   - Surgical Director Research and Evaluation

3.4.6. Co-opted attendance, at the discretion of the Committee Chair and/or the President.
   (Note: co-opted attendance will be for a defined period determined by the Committee Chair)

The President, Councillors and the Chief Executive Officer are able to attend any meeting and the President may chair any meeting.

Staff of RACS shall attend Committee meetings as requested by the Chair of the Committee.

3.5. Tenure and Method of Appointment

Terms of office for Council members are reflected by appointment through Council. The Specialty Associations and Societies each appoint a representative to the Committee, normally for a three-year term.

The Chair and five Deputy Chairs will be elected by Council.
3.6. Meetings
The Committee will hold three face-to-face meetings per year. Invitees may be invited to attend all or part of a meeting but will not have any voting rights.

3.7. Quorum
A quorum shall be a majority of the membership of the Committee.

3.8. Accountability
The Committee is accountable directly to Council for fulfilment of the duties and responsibilities outlined in the terms of reference and for the fulfilment of any other matters delegated by Council.

3.9. Reporting
The Committee's proceedings will be recorded in minutes and reported to Council as Council determines.

3.10. Executive of the PSFS
The Executive of the PSFS will be responsible for governance oversight of issues that arise in the period between meetings of the PSFS and will progress important issues expeditiously. The Executive will have the same powers as the PSFS.

Minutes and relevant correspondence will be made available to the PSFS.

3.10.1. The membership of the PSFS Executive will comprise:
- Chair, PSFS
- Chair, Professional Standards
- Chair, Fellowship Services
- Chair, Research and Academic Surgery
- Chair, Surgical Audit
- Chair ASC Planning and Review
- Censor in Chief

3.10.2. In attendance:
- Executive Director of Surgical Affairs Australia
- Surgical Advisor/s (Aotearoa New Zealand)
- Chief Executive Officer
- Executive General Manager, Fellowship Engagement
- Surgical Director, Research and Evaluation

4. ASSOCIATED DOCUMENTS
No documents associated with this policy.

Approver-Authoriser Council