1. **PURPOSE AND SCOPE**

International Medical Graduates (IMGs) who have been assessed by the Medical Council of New Zealand (MCNZ) and granted vocational registration may seek Fellowship of the Royal Australasian College of Surgeons (RACS).

This policy details the process for assessing Vocationally Registered Doctors (VRDs) for Fellowship of RACS.

2. **KEYWORDS**

Medical Council of New Zealand, Vocational Assessment, Vocationally Registered Doctor, Fellowship

3. **VOCATIONALLY REGISTERED DOCTORS ASSESSMENT**

3.1. **Application for Assessment**

3.1.1. IMGs who hold vocational registration in New Zealand may apply to RACS for consideration of award of Fellowship. Decisions on the award of Fellowship are the sole responsibility of RACS.

3.1.2. VRDs will be assessed on the basis of documentation submitted, the original Vocational Education Advisory Body (formerly Branch Advisory Board) recommendation and an interview.

3.1.3. Applications must be received in the format specified by RACS. In addition to the requirements specified in policy ETA-IMG-038 Assessing an IMG’s Comparability to an Australian and New Zealand Trained Surgical Specialist, the application will include:

   a. Evidence of current vocational registration in New Zealand in one of the nine RACS surgical specialties; and
   b. Information on any restrictions that may be linked to the VRD’s vocational registration; and
   c. A copy of the recommendation made by RACS to the MCNZ following the VRD’s vocational assessment interview in New Zealand; and
   d. Evidence of completion of the vocational assessment recommendation; and
   e. Evidence of Continuing Professional Development (CPD) undertaken for the previous two years; and
   f. Current Curriculum Vitae; and
   g. Logbook of operative practice for the previous two years.

3.2. **Referee Reports**

3.2.1. Applicants are required to submit referee reports from at least three (3) Fellows of RACS who have in the two (2) years prior to application had the opportunity to observe the applicant’s current practice. Referees must include:

   a. At least two (2) referees from the same surgical specialty the applicant is seeking Fellowship in; and
b. Two (2) surgical colleagues who have worked with the applicant within the District Health Board within the last two years.

3.2.2. RACS may contact the applicant's referees as part of the assessment process.

3.2.3. Referees must have considered and commented on the following matters:

a. The nature and duration of the professional relationship; and

b. The applicant's clinical skills, clinical judgment, and professional communication skills; and

c. Any aspect of the applicant's surgical practice that is considered relevant to the application.

3.3. Assessment Standards

3.3.1. From the documentation provided and the applicant's interview performance RACS determines a pathway to Fellowship based on a comparison to the education and training of an Australian and New Zealand trained surgeon. The factors considered are outlined in policy ETA-IMG-038 Assessing an IMG's Comparability to an Australian and New Zealand Trained Surgical Specialist.

3.4. Assessment Outcomes

3.4.1. The possible assessment outcomes are outlined in policy ETA-IMG-038 Assessing an IMG's Comparability to an Australian and New Zealand Trained Surgical Specialist.

3.5. Pathways to Fellowship

3.5.1. A VRD assessed as not comparable to an Australian and New Zealand trained surgeon may only progress to Fellowship by completion of RACS Surgical Education and Training (SET) program. Entry to the SET program is by competitive selection.

3.5.2. A partially comparable VRD may progress to Fellowship by the satisfactory completion of:

a. RACS supervision for a period of up to 24 months; and

b. Specified skills courses and activities; and

C. Continuing Professional Development activities; and

d. The Fellowship Examination.

3.5.3. A substantially comparable VRD (including a VRD substantially comparable within a defined scope of practice) may progress to Fellowship by the satisfactory completion of:

a. RACS supervision for a period of up to 12 months; and

b. Specified skills courses and activities; and

c. Continuing Professional Development activities.

3.5.4. RACS will note supervised clinical practice previously assessed by the MCNZ in the current post when determining the need or otherwise for a further period of supervision.
3.6. Notification and Acceptance of Recommendation

3.6.1. Notification of the recommended pathway to Fellowship, including reasons for the outcome, will be sent to the applicant.

3.6.2. A VRD is not on a pathway to Fellowship until he or she has accepted the recommendation. A recommendation cannot be accepted in part. All requirements of a recommendation are accepted by accepting the recommendation. Once a recommendation has been accepted, a VRD cannot reject the recommendation, but can withdraw from the pathway to Fellowship.

3.6.3. A VRD assessed as partially or substantially comparable has 28 days from the date of notification to accept the recommendation in writing (either by mail or electronically).

3.6.4. Where a VRD is notified of a recommended pathway to Fellowship, and RACS receives no response within 28 days, the VRD will be adjudged to have rejected the recommendation.

3.6.5. Where RACS receives no response within 28 days of notice that the VRD is not eligible for Fellowship by Assessment or Examination the VRD will be adjudged to have accepted the recommendation.

3.7. Assessment Timeframe

3.7.1. A VRD who accepts a recommended pathway to must commence supervision in a RACS approved post within 24 months of the recommendation date otherwise the recommendation expires and the VRD will no longer be on a pathway to Fellowship.

3.7.2. Supervision cannot commence prior to acceptance of a recommended pathway to Fellowship, the signing of a Fellowship Pathway agreement, approval of a supervision post, appointment of IMG Supervisors and payment of required fees.

3.7.3. A VRD assessed as partially comparable must complete all mandated requirements for the pathway to Fellowship within 4 years from the date that the first supervision period commences otherwise the recommendation expires and the VRD will no longer be on a pathway to Fellowship.

3.7.4. A VRD assessed as substantially comparable must complete all mandated requirements for the pathway to Fellowship within 2 years from the date that the first supervision period commences otherwise the recommendation expires and the VRD will no longer be on a pathway to Fellowship.

3.7.5. A VRD who ceases supervision (e.g. by resignation of employment) without prior consent of RACS will thereby be treated as withdrawn from their pathway to Fellowship.

3.7.6. A VRD may apply for family or medical leave at any time after the commencement of supervision. This will extend the recommendation expiry date by the period of leave granted up to a maximum of 12 months.

3.7.7. On the recommendation of the relevant Specialty Training Board, the recommendation expiry date may be extended by an additional 12 months.
3.7.8. With the exception of 3.7.5 and 3.7.6 no other extensions to the recommendation expiry date are available.

3.8. Subsequent Assessments

3.8.1. A VRD who has accepted a recommendation pathway to Fellowship and commenced supervision cannot apply for further Fellowship assessment within that surgical specialty.

3.8.2. A VRD who has previously been assessed by RACS as not eligible for Fellowship by Assessment or Examination can only apply for a subsequent assessment if it can be demonstrated that further training in a formal postgraduate specialist training program has been completed subsequent to the original assessment.

3.8.3. A VRD who has rejected a recommendation of partially comparable may apply for a new assessment if new/additional information can be provided.

3.9. Fees

3.9.1. A fee is payable for a Fellowship assessment.

3.9.2. Supervision of clinical practice incurs a fee.

3.9.3. Fees are approved by Council in October each year and published on the RACS website.

3.10. Educational Support

3.10.1. A VRD who has undergone a Fellowship assessment and who is recommended for Fellowship by Examination will have equal access to all educational opportunities that are currently offered to Australian and New Zealand trainees preparing for the Fellowship Examination. Fees may be payable for these services.

4. ASSOCIATED DOCUMENTATION

Assessing an IMG's Comparability to an Australian and New Zealand Trained Surgical Specialist Policy
IMGs Assessed with a Defined Scope of Practice Policy
Supervisors of International Medical Graduates Policy
Vocationally Registered Doctors Fellowship Assessment Panel Terms of Reference Policy

Approver: Education Board
Authoriser: Council