

<b>Division:</b>	<b>Education and Training Administration</b>	<b>Ref. No.</b>	<b>ETA-SET-021</b>
<b>Department:</b>	<b>Surgical Training</b>		
<b>Title:</b>	<b>Jurisdictional Representatives</b>		

## 1. PURPOSE AND SCOPE

Following the review of the activities of RACS by the Australian Competition and Consumer Commission, and the subsequent authorisation by that body, the RACS accepted the recommendation to invite greater participation from the Health Jurisdictions, including on education portfolio boards. In 2008 the Health Workforce Principal Committee (HWPC) withdrew support for Australian jurisdictional representative on RACS Boards.

While the RACS invites participation in educational activities, jurisdictions retain the right to choose their level of participation.

## 2. KEYWORDS

Jurisdiction, education, assessment, accreditation, International Medical Graduates

## 3. BODY OF POLICY

### 3.1. Participation in RACS Activities

Jurisdictional representatives are invited for the following activities:

- 3.1.1. Site visits for the accreditation of hospital training posts
- 3.1.2. Interview panels for the assessment of International Medical Graduates (IMGs)

The RACS will accept nominations for Jurisdiction Representatives for Specialty Training Boards should the HWPC decide to reengage in that activity.

### 3.2. Regional Committees of the College

Jurisdictional representatives are not sought for the national, state and territory committees of RACS. From time to time representatives of government are invited to attend meetings to discuss specific issues.

### 3.3. Nomination of Jurisdictional Representatives

- 3.3.1. In Australia the Health Workforce Principal Committee (HWPC) is the body authorised to coordinate Jurisdictional Representation in RACS activities. HWPC will ensure that Jurisdictional Representatives are aware of their rights and duties, and will liaise with the RACS nominated Jurisdictional Representative Coordinator in Australia, who is the single point of contact for all Boards.
- 3.3.2. In New Zealand the Ministry of Health and District Health Boards New Zealand share the responsibility for deciding the level of participation, and the subsequent nomination and coordination of Jurisdictional Representation. They will ensure that Jurisdictional Representatives are aware of their rights and duties, and will liaise with the RACS nominated Jurisdictional Representative Coordinator in New Zealand, who is the single point of contact for all Boards.
- 3.3.3. Jurisdictions may delegate their right of representation to any other jurisdiction.
- 3.3.4. Where RACS Fellows are required to undertake specific training to enable participation in RACS activities Jurisdictional Representatives are also required to undertake that training to enable their participation.

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### 3.4. IMG Assessment Participation

- 3.4.1. The Jurisdictional Representatives is a full participating member of the assessment panel and will contribute to the assessment process in terms of their relevant knowledge and skills. The Jurisdictional Representatives should be provided with information about the criteria to be applied in the assessment, available details of any position for which the applicant is seeking assessment and any pre-screening of applications, and receive the same documentation as other members of the assessment panel.

### 3.5. Hospital Training Post Accreditation Participation

- 3.5.1. The Jurisdictional Representatives is a full participating member of the accreditation team and will contribute to the assessment process in terms of their relevant knowledge and skills. The Jurisdictional Representatives should be provided with the same documentation as other members of the team.

## 4. ASSOCIATED DOCUMENTS

Accreditation of Hospitals and Posts for Surgical Education and Training

Terms of Reference for International Medical Graduate Assessment Interview Panels in Australia

**Approver:** Education Board

**Authoriser:** Council

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