



Regulations Handbook Post Fellowship Education and Training

Neurosurgical Society of Australasia ABN 50 283 605 657 ACN 167 861 805

REGULATIONS HANDBOOK

POST FELLOWSHIP EDUCATION AND TRAINING PROGRAMS IN NEUROSURGERY SUB-SPECIALTIES

The Regulations Handbook encompasses the rules, procedures, policies, administrative processes and principles for the control and conduct of the Post Fellowship Education and Training Programs in Neurosurgery Sub-Specialties. The information is as accurate as possible at the time of printing. As the Regulations can change during the year the latest version will always be available on the NSA website at www.nsa.org.au. All persons are advised to ensure they are consulting the most current version.

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SECTION 1: ADMINISTRATION OF THE PFET PROGRAMS

1.1 Overview

- 1.1.1 The Neurosurgical Society of Australasia Post Fellowship Education and Training (PFET) Programs provide the opportunity for suitably qualified independent specialist neurosurgeons to undertake extensive education and training to achieve advanced proficiency, knowledge and skills in a specific sub-specialty area of neurosurgical practice.
- 1.1.2 Each PFET Program will have clearly stated objectives for the sub-specialty expertise based on achieving a level of competence above that of a generalist neurosurgeon. The PFET Programs complement the Surgical Education and Training (SET) Program in Neurosurgery.
- 1.1.3 The PFET Program in Spinal Surgery is a joint program governed by the Neurosurgical Society of Australasia and Australian Orthopaedic Association. Please refer to the Post Fellowship Education and Training Program in Spinal Surgery Regulations, available on www.nsa.org.au, for further information.

1.2 Terminology

In these Regulations, the following terminology shall have the following meanings:

- 1.2.1 **Committee** is the NSA Post Fellowship Education and Training Committee.
- 1.2.2 **Business Days** means Monday to Friday excluding public holidays.
- 1.2.3 **Regulations** are the rules, procedures, policies, administrative processes and principles for the control and conduct of the PFET Program only.
- 1.2.4 **PFET Programs** are the Post Fellowship Education and Training Programs offered by the Neurosurgical Society of Australasia in sub-specialty areas relevant to neurosurgery.
- 1.2.5 **NSA** is the Neurosurgical Society of Australasia.
- 1.2.6 **NSA Board** is the Board of the Neurosurgical Society of Australasia.
- 1.2.7 **Supervisor** is a surgical supervisor of an accredited PFET Program position.
- 1.2.8 **SET Program** is the Surgical Education and Training Program in Neurosurgery of the Royal Australasian College of Surgeons.
- 1.2.9 **Fellow** is a registrant in a PFET Program.

1.3 Overview of the Regulations

- 1.3.1 These Regulations encompass the rules, procedures, policies, administrative processes and principles for the control and conduct of the PFET Programs.



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- 1.3.2 All fellows, supervisors, units with accredited training positions and Committee members are required to comply with the Regulations at all time.
- 1.3.3 The information in these Regulations is as accurate as possible at the time of printing. The NSA reserves the right to make reasonable changes to these Regulations at any time. As the Regulations can change during the year the latest version will always be available on the training website www.nsa.org.au. All persons are advised to ensure they are consulting the most current version.
- 1.3.4 In the event of any discrepancy or inconsistency between these Regulations and other information from any source, written, verbal or otherwise, these Regulations shall prevail.

1.4 Duration and Structure

- 1.4.1 PFET Programs must be a minimum of twelve (12) months full time or the part-time equivalent. There is no maximum duration.
- 1.4.2 The PFET Programs are designed to facilitate the cumulative acquisition of the experience, knowledge, skills and attributes aligned with the overall objective.
- 1.4.3 The PFET Programs will include clinical, research, educational and administrative experience in the sub-specialty focus. It is expected that the duties assigned to the fellow will increase in complexity as the fellow assumes more responsibly and builds on their generalist experience, knowledge, skills and attributes.

1.5 Eligibility to apply for the PFET Programs

- 1.5.1 All applicants must have satisfactorily obtained employment in a position accredited for a PFET Program. Applications for employment in accredited PFET Program positions must be made directly to the institutions in which the positions are located. A list of accredited positions will be available on the NSA website www.nsa.org.au.
- 1.5.2 All applicants must be an Australian or New Zealand citizen or have an appropriate visa to work in Australia or New Zealand as a specialist neurosurgeon in a supervised fellowship position.
- 1.5.3 All applicants must have current and valid medical registration necessary to practice in the position accredited for the PFET Program.
- 1.5.4 Applicants must satisfy one of the following:
 - (a) Satisfactorily completed the FRACS Examination in Neurosurgery; or
 - (b) Completed the FRACS Examination in a related discipline and have the requisite base experience and scope of practice; or
 - (c) Completed the Australian Medical Council (AMC) or Medical Council of New Zealand (MCNZ) specialist assessment process resulting in formal recognition as a specialist neurosurgeon; or
 - (d) Have a specialist training qualification in neurosurgery from a designated competent authority being one of the following:



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- Royal College of Surgeons of England (United Kingdom) FRCS; or
- Royal College of Physicians and Surgeons (Canada) FRCSC; or
- American College of Surgeons (United States of America) FACS; or
- Medical Council of Ireland (FRCSI).

1.6 Application for Registration into a PFET Program

- 1.6.1 Eligible fellows must apply prior to the commencement of their PFET Program on the prescribed application form available from NSA website www.nsa.org.au.
- 1.6.2 Applications from eligible fellows can be made at any time during the year. An application fee is payable at the time of application. Application fees are revised annually and will be published on the NSA website www.nsa.org.au. The application fee for applicants is currently \$AUD 660 including GST.
- 1.6.3 Applications are considered by the Committee for registration. In considering applications, the Committee will review eligibility and confirm the applicants' appointment to an accredited position for a PFET Program. If an applicant is deemed ineligible for registration the applicant will be refunded 50% of the application fee paid in accordance with 1.6.2.
- 1.6.4 If an applicant is deemed eligible for registration the applicant will be registered in the PFET Program relevant to their accredited sub-specialty position for an initial twelve (12) month duration. The application fee paid in accordance with 1.6.2 is non-refundable for applicants deemed eligible for registration.
- 1.6.5 The annual registration fee for the first twelve (12) month period is complimentary. Subsequent renewal of registration is available on an annual basis thereafter for PFET Programs running longer than twelve (12) months. Automatic renewal notices will be issued thirty (30) days prior to the registration expiry date. The registration fee is revised annually and will be published on the NSA website www.nsa.org.au. The registration fee is currently \$AUD660 for all fellows registered in a PFET Program. The registration fee or part thereof is non-refundable.
- 1.6.6 The official commencement date of the PFET Program will be the application date for registration or alternate date nominated at the time of application. No retrospective credit will be given for any training undertaken prior to the official commencement date or undertaken after the PFET Program registration has ceased.
- 1.6.7 Registration to the PFET Program will cease if:
- (a) The fellows' registration fee is not paid by the due date; or
 - (b) The fellows' registration expires; or
 - (c) The fellow requests in writing that the PFET Program registration cease; or
 - (d) The fellows' employment in the PFET Program position ceases for any reason; or
 - (e) The fellow is found to have falsified a training document; or
 - (f) The fellow fails to submit a training document by the communicated due date; or
 - (g) The fellow is granted accreditation (completion) of the PFET Program.



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1.7 Interruption of a PFET Program

- 1.7.1 Applications to interrupt a PFET Program may be approved in a range of circumstances including ill-health and parenting.
- 1.7.2 Applications must be made in writing to the Committee. Interruptions must be supported by the employer of the accredited PFET Program position and must be accompanied by a Professional Performance Assessment (PPA) Report valid up until the date of application for interruption.
- 1.7.3 Where interruption is granted, the commencement date for the interruption will be the date the Committee received the completed application for interruption.
- 1.7.4 During a period of interruption registration in the PFET Program will be suspended. Any training undertaken during the interruption will not be considered as part of the PFET Program.

1.8 Accreditation (Completion) of a PFET Program

- 1.8.1 Each PFET Program will have clearly stated curriculum requirements and objectives which must be satisfied for accreditation.
- 1.8.2 On application to and approval from the Committee that the objectives of the PFET Program have been satisfied the fellow will be issued with a Certificate of Post Fellowship Education and Training. The Certificate will acknowledge the sub-specialty, duration of satisfactory training and the institution where the PFET Program was undertaken.

1.9 Grievance Process

- 1.9.1 Any person adversely affected by a decision made by the Committee or a surgical supervisor may, within thirty (30) Business Days of being notified of the decision submit a written grievance to the Committee Chair to have the decision reviewed.
- 1.9.2 In submitting a written grievance, the person must include the grounds for the grievance or appeal, the remedy sought and any relevant supporting documentation.
- 1.9.3 A written grievance will be considered by the Committee within twenty (20) Business Days of its receipt.
- 1.9.4 The Committee will provide a written response affirming the previous decision, modifying the decision, or reversing the decision, providing appropriate justification.
- 1.9.5 Where the Committee overturns or varies a decision the reasoning must fall into one of the following categories and must be justified:
 - (a) That the decision was based on a mistake of fact or law; or
 - (b) That an error in due process occurred; or
 - (c) That the relevant policies or procedures were not observed; or
 - (d) That relevant and significant information was not appropriately considered in the decision; or



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- (e) The grounds for special consideration as defined by the Committee were established which justify the decision.

1.9.6 Where a person adversely affected by a decision has submitted a written grievance and is dissatisfied with the Committee decision review, the person may submit a written appeal to the NSA Board in accordance with clause 1.10.

1.10 Appeal Process

1.10.1 Any person adversely affected by a decision, who has submitted a written grievance in accordance with clause 1.9 and is dissatisfied with the outcome of the grievance process may, within twenty (20) Business Days of being notified of the grievance decision submit a written appeal to the NSA Board to have the decision reviewed.

1.10.2 An appeal fee of \$AUD1,100 including GST will be payable which will be refunded if the final determination of the appeal panel is that the original decision be overturned. Payment must be made at the time of submitting the appeal and the appeal will not be taken to have been received until full payment has been made.

1.10.3 In submitting a written appeal, the applicant must include the grounds for the appeal, the remedy sought and any relevant supporting documentation. The applicant will have the onus of proof to establish the grounds of the appeal.

1.10.4 The NSA will convene an appeal panel. The appeal panel will include two members of the NSA Board who were not party to the original decision and three additional persons who are not members or employees of the NSA and who were not involved in the original decision.

1.10.5 The appeal panel will convene an appeal hearing within thirty (30) Business Days of receipt of the written appeal and payment.

1.10.6 The person who submitted the appeal may nominate a support person to accompany him or her at any stage of the appeal process. The support person must not be a legal practitioner or barrister.

1.10.7 The appeal panel may receive written or oral submissions at any time in the course of a hearing, at its discretion.

1.10.8 The appeal panel will provide a written response affirming the previous decision, modifying the decision, or reversing the decision, providing appropriate justification to both the Committee and the applicant.

1.10.9 Where the appeal panel overturns or varies a decision the reasoning must fall into one of the following categories and must be justified:

- (a) That the decision was based on a mistake of fact or law; or
- (b) That an error in due process occurred; or
- (c) That the relevant policies or procedures were not observed; or
- (d) That relevant and significant information was not appropriately considered in the decision; or



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- (e) The grounds for special consideration as defined by the Committee were established which justify the decision.

1.11 Governance

- 1.11.1 The NSA Post Fellowship Education and Training Committee (the Committee) is responsible for the oversight of the policies and the maintenance of education, training, assessment standards and communication of decisions relating to the PFET Programs.
- 1.11.2 The Committee must provide a written report to the NSA Board at each scheduled meeting.
- 1.11.3 The composition of the Committee must include, as a minimum:
 - (a) An appointed Chair who must also be a member of the NSA Board
 - (b) The Chair of the SET Board of Neurosurgery ex-officio or his/her nominee
 - (c) Three additional persons who are members of the NSA
- 1.11.4 With the approval of the NSA Board the Committee may co-opt additional members.
- 1.11.5 Committee members must satisfy the eligibility criteria for the duration of their tenure. If there is a change in circumstances and a Committee member no longer satisfies the eligibility criteria, they may be removed from the Committee and their position declared vacant.
- 1.11.6 The Chair of the Committee shall be appointed by the NSA Board. The additional representatives in 1.11.3 (c) shall be appointed by the NSA Board following a call for nominations from eligible persons.
- 1.11.7 Members who sit on the Committee ex-officio do so for the term of office of that position. Members who are co-opted on the Committee do so for a term determined by the NSA Board. Other members shall hold office for a period of three (3) years and be eligible for re- appointment up to a maximum of nine (9) years.
- 1.11.8 Meetings must be held via teleconference or face to face as required. Travel and expense reimbursements for attendance at meetings shall be in accordance with the NSA Travel and Reimbursement Policy applicable to all Committee members.
- 1.11.9 The NSA Conflict of Interest Policy will apply to all Committee members and meetings.
- 1.11.10 Questions arising at a meeting of the Committee shall be determined by a majority of the votes of members who are present at the meeting. Each member present at a meeting is entitled to one vote but, in the event of an equality of votes on any question, the person presiding may exercise a second or casting vote.
- 1.11.11 Notwithstanding the above, a member may be excluded from voting in accordance with the NSA Conflict of Interest Policy.



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SECTION 2: ACCREDITATION OF PFET POSITIONS

2.1 Introduction

- 2.1.1 The purpose of these Regulations are to set forth and establish the terms and conditions for the inspection and accreditation of positions for the NSA PFET Program in sub-specialty areas relevant to neurosurgery.
- 2.1.2 Applications are open to public and private institutions in Australia, New Zealand and overseas with a current post fellowship training position in a sub-specialty area relevant to neurosurgery. Applications are based on a specific position, rather than an institution accreditation.
- 2.1.3 Applications are open to institutions working in affiliation with other institutions. Where the proposed PFET position involves multiple units there must be a primary unit. The majority of the training time must be spent in the primary unit.

2.2 Position Accreditation

- 2.2.1 Application can be made at any time of year on the prescribed form through the NSA website www.nsa.org.au. Only applications in the prescribed manner will be considered. An application fee is payable at the time of application. The application fee is per position. The application fee is revised annually and will be published on the NSA website www.nsa.org.au. The application fee is currently \$AUD330 including GST. This application fee, or part thereof, is not refundable.
- 2.2.2 The assessment of the proposed position will commence with a paper based assessment against the minimum accreditation criteria.
- 2.2.3 If there are any significant areas which require further investigation a physical inspection may be required. Where a physical inspection is required an inspection fee is payable. The inspection fee is revised annually and will be published on the NSA website www.nsa.org.au. The inspection fee is currently will be \$AUD2,000. This inspection fee, or part thereof, is not refundable.
- 2.2.4 The applicant will be provided with an assessment report, summarising the assessment against the minimum accreditation standards and the outcome. This assessment report will be provided within twenty (20) Business Days of receipt of application where a physical inspection is not required, or twenty (20) Business Days of the physical inspection which such an inspection is required.
- 2.2.5 Where accreditation is not granted the applicant will have thirty (30) Business Days from the date of the assessment report to provide additional information regarding the identified deficiencies. The Committee will consider this additional information and make a determination on whether the deficiencies have been satisfactorily addressed within twenty (20) Business Days of receipt of the additional information. If additional information is not provided, or the Committee determine that the deficiencies have not been satisfactorily addressed the Committee decision will be final.



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2.2.6 Where accreditation is granted, the initial accreditation validity period will be for between three (3) to five (5) years, subject to annual renewal (see clause 2.3).

2.3 Renewal of Accreditation

2.3.1 Renewal during the accreditation validity period (see clause 2.2.6) is conducted on an annual basis unless an issue of sufficient concern is identified. Where an issue of sufficient concern is identified the Committee may suspend the accreditation and require a paper based assessment and/or physical inspection at any time. Where a paper based assessment only is required the fees payable in clause 2.2.1 are not applicable. Where a physical inspection is required the fees payable in clause 2.2.3 are payable. An assessment report will be provided in accordance with clause 2.2.4.

2.3.2 Fellows in accredited PFET positions must complete a Post Fellowship Assessment Report at the completion of their PFET Program. This assessment is used to evaluate the quality of the PFET position in comparison to the accreditation standards and objectives and is used in the renewal and re-accreditation process.

2.3.3 Institutions with accredited positions will automatically receive a renewal form thirty (30) Business Days prior to the end of each twelve (12) month period during the accreditation validity period. Each institution must renew their position annually by completing this form. There is no fee for renewal during the accreditation validity period. Renewal will be subject to a satisfactory paper based assessment of the form and any associated Post Fellowship Assessment Reports against the minimum accreditation criteria.

2.3.4 If a position is eligible for renewal given its validity period but renewal is not granted is not granted by the Committee due to the identification of an issue of sufficient concern this will be processed in accordance with clause 2.3.1.

2.3.5 Institutions with accredited positions that are nearing the end of their accreditation validity period (see clause 2.2.6) will automatically receive a notice to submit a new application for accreditation sixty (60) Business Days prior to the expiry of the accreditation validity period. Applications must be submitted, and will be processed, in accordance with clause 2.2 of these Regulations.

2.4 Cessation of Accreditation

2.4.1 Accreditation of a PFET Program position will cease if:

- (a) The accreditation is not renewed annually during the accreditation validity period; or
- (b) The renewal of the accreditation is not granted; or
- (c) The institution requests in writing that the position accreditation cease; or
- (d) The institution is found to have falsified an accreditation or renewal submission.

2.5 Minimum Accreditation Standards

2.5.1 Institution and Position Structure



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- (a) The position must be in a sub-specialty area relevant to neurosurgery and must be focused on specialist skills, knowledge and experience beyond that delivered in the SET Program in Neurosurgery.
- (b) Positions in institutions with current SET Program in Neurosurgery accredited training positions must demonstrate that the PFET position will not impact on the training, education and operative experience of the SET Program trainees.
- (c) The duration of the position must be a minimum of 12 months' full time or part time equivalent.
- (d) Non-discriminatory policies must be followed in the selection and appointment of fellows.
- (e) The position must be under supervision and not be a consultant position.
- (f) The position must have appropriate remuneration in place for the fellow.
- (g) The institution(s) in which the position is located must have a defined unit including a designated supervisor, regular auditing and morbidity and mortality meetings of all relevant patients within the unit.
- (h) The institution(s) must have appropriate accreditation and must be compliant with any regulation from any local, state and federal regulatory authorities. The accreditation must confirm the maintenance of appropriate standards of care and quality improvement.
- (i) For the Cerebrovascular Surgery PFET Program the training unit must have an Interventional Radiology Unit of a high standard that has a strong cooperative working relationship with the Neurosurgical Unit.

2.5.2 Quality of Educational Training and Learning

- (a) Fellows must be involved in the management decisions, pre-operative assessment, operative experience and post-operative monitoring and evaluation of patients in the institution(s) relevant to the particular sub-specialty.
- (b) The institution must have a dedicated educational program in place to satisfy the PFET Program sub-specialty curriculum and syllabus including the required clinical experience and educational activities.
- (c) There must be evidence of clinical and/or basic research in the sub-specialty area within the institution(s) and the Fellow must have the opportunity to participate in the same.
- (d) Fellows in the position must be given access to negotiated educational leave to attend key scientific meetings and training activities relevant to the sub-specialty.
- (e) The primary institution, being the institution where the fellow will spend the majority of their clinical time, must accept full responsibility for the quality and delivery of the PFET Program in the affiliated institutions.

2.5.3 Dedicated Supervisor



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- (a) For Australian and New Zealand positions, there must be a dedicated supervisor with the FRACS in Neurosurgery and membership of the NSA. For positions outside Australia and New Zealand the dedicated supervisor must have the equivalent professional qualification and association membership in the country where the position is located.
- (b) The dedicated supervisor must spend a minimum of 10 hours per week in the institution including afterhours operating but not on-call hours.
- (c) The dedicated supervisor must take responsibility for the educational program and supervision of the fellow and agree to comply with the PFET Program Regulations.
- (d) The dedicated supervisor must participate in an NSA or RACS supervisor's training meeting at least once every 2 years.
- (e) The dedicated supervisor must have sufficient post fellowship expertise in the sub-specialty area.
- (f) Where a position involves affiliate institutions, the supervisor must be on staff at all institutions.

2.5.4 Specialist surgical staff appropriately qualified to provide direct supervision

- (a) In addition to the supervisor, for each PFET position there must be a minimum of one other neurosurgeon, spending a minimum total of 20 hours per week in the unit with sufficient post fellowship expertise in the subspecialty area and one other neurosurgeon in the unit spending a minimum of 10 hours per week.
- (b) Each specialist staff must demonstrate a strong interest in the education of the fellow, possess sound clinical and teaching abilities, support the goals and objectives of the PFET Program, and participate in the education, training, supervision and assessment of the fellow.

2.5.5 Equipment and Clinical Support Services

- (a) The institution must have appropriate imaging, diagnostic, support/ancillary services and operating equipment in place to satisfy the PFET Program sub-specialty curriculum and syllabus.

2.5.6 Sponsorship

- (a) Where industry sponsorship is provided for the position or fellow there must be no obligation on the fellow or the institution in which the position is located to use any industry product or service. The sponsorship arrangements must be compliant with the RACS Code for Interactions with Medical Industry.
- (b) The sponsor must not be involved in the selection of the fellow in any way.



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SECTION 3: PFET PROGRAM IN CEREBROVASCULAR SURGERY

3.1 Objective of the PFET Program

3.1.1 The objective of the PFET Program in Cerebrovascular Surgery is to provide competent independent specialist neurosurgeons with advanced procedural experience, knowledge and surgical skill relevant to the safe and effective treatment of complex cerebrovascular conditions. PFET Programs in Cerebrovascular can be limited to specific complex cerebrovascular practice areas.

3.1.2 To achieve the overall objective, the following competencies have been developed in the RACS competency areas of medical expertise, technical expertise, judgement, communication, collaboration, management and leadership, health advocacy, scholar and teacher and professionalism:

- (a) an advanced level of scientific knowledge relevant to complex cerebrovascular conditions
- (b) the ability to critically appraise new technologies
- (c) the application of scientific knowledge to the diagnosis and treatment of complex cerebrovascular conditions
- (d) advanced procedural experience and surgical skill relevant to the safe and effective treatment of complex cerebrovascular conditions
- (e) advanced judgement and clinical decision making in the diagnosis, pre and post operative management of patients with complex cerebrovascular conditions
- (f) appropriate clinical decision making in identifying those patients amenable to surgical treatment for complex cerebrovascular conditions
- (g) advanced communication skills with patients, their families and the health team to achieve an optimal and collaborative clinical management environment
- (h) effective management of administrative procedures and responsibilities
- (i) effective use of the resources available to prioritise patient and health care system needs in order to maximise patient outcomes
- (j) advocacy for the interests of cerebrovascular treatment and appropriate health resource allocations
- (k) a recognition and commitment to the maintenance of surgical knowledge through self-directed learning
- (l) the application of research to clinical practice in cerebrovascular surgery
- (m) an understanding of unique ethical and medico-legal issues relevant to the practice of cerebrovascular surgery and apply them in clinical practice
- (n) adherence to, and appreciation of, the required standards of professionalism
- (o) appreciation of the importance of peer reviewed audit
- (p) employ a critically reflective approach to cerebrovascular surgery and their own clinical performance
- (q) the ability to interpret and understand interventional radiology procedures versus open operative procedures
- (r) the ability to critically analyse the risks and benefits between the two procedures in order to achieve the best outcome for the patient.



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- 3.1.3 To evaluate the effectiveness of the PFET Program in achieving the overall objective, the assessment of learning outcomes and other evaluation mechanisms provide direction on potential improvements to the curriculum, training activities and learning methods and opportunities.

3.2 Curriculum and Syllabus

- 3.2.1 To assist in achieving the objectives, each PFET Program position will have an advertised curriculum, including as a minimum the following learning opportunities:
- (a) Two half day operating sessions per week for the fellow focused primarily on complex cerebrovascular surgery; and
 - (b) One half day per week involvement in neurovascular angiographic and endovascular procedures; and
 - (c) Practical and theoretical teaching and instruction in cerebrovascular surgery; and
 - (d) Case presentations and clinical audits; and
 - (e) Outpatient clinics and other relevant cerebrovascular clinics on a weekly basis; and
 - (f) Joint cerebrovascular neurosurgery and interventional neuroradiology meetings on an alternate weekly basis; and
 - (g) Cerebrovascular or relevant divisional ward rounds on a weekly basis; and
 - (h) On-call roster for cerebrovascular surgery and neurosurgery with the call coverage being no more than 1:3.

3.3 Professional Performance Assessment

- 3.3.1 The assessment of performance by the supervisor is fundamental to advancement of the fellow and the accreditation of the PFET Program. Each PFET position has an approved supervisor. The supervisor is responsible for the supervision and assessment of the fellow in that position.
- 3.3.2 During the PFET Program the fellows' performance should be regularly reviewed by the supervisor including a three monthly performance assessment meeting.
- 3.3.3 Completion of the Professional Performance Assessment (PPA) Report, in the prescribed manner, must be undertaken at the conclusion of each six (6) month period.
- 3.3.4 The PPA Reports may also be completed more frequently at the request of the Committee or at any time as determined by the supervisor where any area of unsatisfactory or marginal performance is identified.
- 3.3.5 The fellow and the supervisor must have a performance assessment meeting to discuss the content of the PPA Report completed by the supervisor. The PPA Report should be verified by both the fellow and the supervisor to acknowledge that the content has been discussed. Verifying the report does not indicate agreement with the assessment.
- 3.3.6 Where any area of performance within the PPA Report has been rated as unsatisfactory or marginal the remedial component of the PPA Report must be completed.



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- 3.3.7 The fellow is responsible for ensuring that the completed assessment PPA Report is submitted to the Committee by the due date.
- 3.3.8 To be eligible for accreditation of the PFET Program the PPA Reports, covering the 12 month period immediately prior to completion of the PFET Program, must be satisfactory in all areas. Where there have been any unsatisfactory or marginal areas the Committee will interview the supervisor to assist in making a determination on whether accreditation should be granted. For accreditation to be considered in these circumstances there will need to be strong support from the supervisor.

3.4 Clinical Experience Assessment

- 3.4.1 Appropriately supervised operative experience in cerebrovascular surgery must be obtained during the PFET Program in the accredited position. Operative experience acquired prior to the commencement, during a period of interruption, in an institution not accredited, or after the completion of the PFET Program will not be considered.
- 3.4.2 For each operative case where more than one surgical procedure is undertaken only one procedure may be recorded. For a procedure to be recorded the fellow must have been involved in the performance of the surgery and the pre and post operative management of the patient.
- 3.4.3 The fellow must maintain an operative experience log of all procedures they participate in as part of the PFET Program. As a minimum the operative experience log should include the operative date, patient name, patient identification, institution where the procedure is performed, pre-operative diagnosis, operative procedure performed and outcome. This detailed operative experience log is not submitted to the Committee but must be cited by the supervisor.
- 3.4.4 Completion of a Cumulative Logbook Summary (CLS) Report, in the prescribed manner, including the supervisors' verification that the CLS Report reflects the fellows' detailed operative experience log must be submitted to the Committee at the conclusion of each six (6) month period.
- 3.4.5 The fellow is responsible for ensuring that the CLS Report is submitted to the Committee by the due date.
- 3.4.6 To be eligible for accreditation of the PFET Program the CLS Report must demonstrate sufficient experience in complex cerebrovascular surgery and a high level of competence in the treatment of anterior circulation aneurysms. While competence cannot be measured in absolute numeric terms, as a general guide the Committee would expect a major involvement in a minimum of 50 aneurysm cases of which at least 10 must be undertaken by the fellow as the primary/principal surgeon. In addition, the Committee would expect involvement by the fellow as the primary/principal surgeon or first assistant in a minimum of 10 AVM cases.



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- 3.4.7 Following completion of the Fellowship, if the candidate were to have insufficient numbers, an assessment of the total number of cases taken in context of the candidate's overall experience will be made.

3.5 Research Assessment

- 3.5.1 The fellow must demonstrate scholarly activity in cerebrovascular surgery with active participation in clinical and/or basic research during the PFET Program.
- 3.5.2 To be eligible for accreditation of the PFET Program the fellow is required to complete one cerebrovascular research project suitable for publication and/or presentation in a peer reviewed journal or scientific meeting during the PFET Program. Research projects completed prior to the commencement, during a period of interruption, in an institution not accredited, or after the completion of the PFET Program will not be considered.

3.6 Competence Assessment

- 3.6.1 At the completion of the PFET Program the supervisor of registered PFET fellow must submit the PFET Program Completion Report to the Committee.
- 3.6.2 To be eligible for accreditation of the PFET Program the Program Completion Report must confirm that the fellow has satisfied all requirements of the PFET Program and, in their opinion, should be accredited and awarded the Certificate. This report is completed by the supervisor alone. The report will be available to the fellow.

3.7 Post Fellowship Assessment Report

- 3.7.1 The fellow must submit the Post Fellowship Assessment Report providing an honest and accurate assessment of the PFET Program position.
- 3.7.2 The Post Fellowship Assessment Report is used to evaluate the quality of the PFET position in comparison to the accreditation standards and objectives and is used in the renewal and re-accreditation process. The report will be available to the supervisor.

3.8 Completion and Awarding the Certificate

- 3.8.1 Within twenty (20) business days of the completion of the PFET Program registered fellows must submit the following:
- (a) The final Professional Performance Assessment Report; and
 - (b) The Post Fellowship Assessment Report; and
 - (c) The Cumulative Logbook Summary Report for the PFET Program duration.
- 3.8.2 Within twenty (20) Business Days of the completion of the PFET Program the supervisor of registered fellow must submit the PFET Program Completion Report.
- 3.8.3 Accreditation of the PFET Program and awarding of the Certificate is conditional on the submission of the required forms identified above in the manner prescribed within the specified time frames.



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- 3.8.4 Applications for PFET Program accreditation must be made after completion of 12 months of the PFET Program by submission of the requisite forms. Accreditation is not an automatic process.
- 3.8.5 Fellows who apply for accreditation more than twenty (20) Business Days after their PFET Program registration has expired will be charged PFET Assessment Fee. The PFET Assessment Fee is revised annually and will be published on the NSA website www.nsa.org.au. The PFET Assessment Fee is currently \$AUD110 and is not refundable.
- 3.8.6 Applications are considered by the Committee. In considering applications, the Committee must be satisfied that the PFET Program objectives have been satisfied. This determination will be made within (20) Business Days of the forms being received.
- 3.8.7 On approval of accreditation the fellow will be issued with a Certificate of Post Fellowship Education and Training.



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SECTION 4: PFET PROGRAM IN SPINAL SURGERY

4.1 Objective of the PFET Program

- 4.1.1 The PFET Program in Spinal Surgery provides the opportunity for suitably qualified independent specialist neurosurgeons and orthopaedic surgeons to undertake extensive education and training to achieve advanced proficiency, knowledge and skills in spinal surgery.
- 4.1.2 The PFET Program in Spinal Surgery is a joint program governed by the Neurosurgical Society of Australasia and Australian Orthopaedic Association.
- 4.1.3 Please refer to the Post Fellowship Education and Training Program in Spinal Surgery Regulations, available on www.nsa.org.au, for further information.

SECTION 5: PFET PROGRAM IN NEURO-ONCOLOGY

5.1 Objective of the PFET Program

- 5.1.1 The objective of the PFET Program in Neuro-oncology is to provide competent independent specialist neurosurgeons with advanced procedural experience, knowledge and surgical skill relevant to the safe and effective treatment of complex Neuro-oncology conditions. PFET Programs in Neuro-oncology can be limited to specific complex practice areas.
- 5.1.2 To achieve the overall objective, the following competencies have been developed in the College competency areas of medical expertise, technical expertise, judgement, communication, collaboration, management and leadership, health advocacy, scholar and teacher and professionalism:
 - (a) an advanced level of scientific knowledge relevant to complex Neuro-oncology conditions
 - (b) the ability to critically appraise new technologies
 - (c) the application of scientific knowledge to the diagnosis and treatment of complex Neuro-oncology conditions
 - (d) advanced procedural experience and surgical skill relevant to the safe and effective treatment of complex Neuro-oncology conditions
 - (e) advanced judgement and clinical decision making in the diagnosis, pre and post operative management of patients with complex Neuro-oncology conditions
 - (f) appropriate clinical decision making in identifying those patients amenable to surgical treatment for complex Neuro-oncology conditions
 - (g) advanced communication skills with patients, their families and the health team to achieve an optimal and collaborative clinical management environment
 - (h) effective management of administrative procedures and responsibilities
 - (i) effective use of the resources available to prioritise patient and health care system needs in order to maximise patient outcomes
 - (j) advocacy for the interests of Neuro-oncology and appropriate health resource allocations
 - (k) a recognition and commitment to the maintenance of surgical knowledge through self directed learning
 - (l) the application of research to clinical practice in Neuro-oncology surgery



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- (m) an understating of unique ethical and medico-legal issues relevant to the practice of Neuro-oncology and apply them in clinical practice
- (n) adherence to, and appreciation of, the required standards of professionalism
- (o) appreciation of the importance of peer reviewed audit
- (p) employ a critically reflective approach to Neuro-oncology and their own clinical performance

5.1.3 To evaluate the effectiveness of the PFET Program in achieving the overall objective the assessment of learning outcomes and other evaluation mechanisms provide direction on

5.1.4 potential improvements to the curriculum, training activities and learning methods and opportunities.

5.2 Curriculum and Syllabus

5.2.1 To assist in achieving the objectives, each PFET Program position will have an advertised curriculum, including as a minimum the following learning opportunities:

- (a) Three half day operating sessions per week for the fellow focused primarily on complex Neuro-oncology surgery; and
- (b) Practical and theoretical teaching and instruction in Neuro-oncology; and
- (c) Case presentations and clinical audits; and
- (d) Outpatient clinics and other relevant Neuro-oncology clinics on a weekly basis; and
- (e) Neuro-oncology or relevant divisional ward rounds on a weekly basis; and
- (f) Joint Neuro-oncology meetings on an alternate weekly basis; and
- (g) On-call roster for Neuro-oncology and neurosurgery with the call coverage being no more than 1:3.

5.3 Professional Performance Assessment

5.3.1 The assessment of performance by the supervisor is fundamental to advancement of the fellow and the accreditation of the PFET Program. Each PFET position has an approved supervisor. The supervisor is responsible for the supervision and assessment of the fellow in that position.

5.3.2 During the PFET Program the fellows' performance should be regularly reviewed by the supervisor including a three monthly performance assessment meeting.

5.3.3 Completion of the Professional Performance Assessment (PPA) Report, in the prescribed manner, must be undertaken at the conclusion of each six (6) month period.

5.3.4 The PPA Reports may also be completed more frequently at the request of the Committee or at any time as determined by the supervisor where any area of unsatisfactory or marginal performance is identified.

5.3.5 The fellow and the supervisor must have a performance assessment meeting to discuss the content of the PPA Report completed by the supervisor. The PPA Report should be verified by both the fellow and the supervisor to acknowledge that the content has been discussed. Verifying the report does not indicate agreement with the assessment.



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- 5.3.6 Where any area of performance within the PPA Report has been rated as unsatisfactory or marginal the remedial component of the PPA Report must be completed.
- 5.3.7 The fellow is responsible for ensuring that the completed PPA Report is submitted to the Committee by the due date.
- 5.3.8 To be eligible for accreditation of the PFET Program the PPA Reports, covering the 12 month period immediately prior to completion of the PFET Program, must be satisfactory in all areas. Where there have been any unsatisfactory or marginal areas the Committee will interview the supervisor to assist in making a determination on whether accreditation should be granted. For accreditation to be considered in these circumstances there will need to be strong support from the supervisor.

5.4 Clinical Experience Assessment

- 5.4.1 Appropriately supervised operative experience in Neuro-oncology surgery must be obtained during the PFET Program in the accredited position. Operative experience acquired prior to the commencement, during a period of interruption, in an institution not accredited, or after the completion of the PFET Program will not be considered.
- 5.4.2 For each operative case where more than one surgical procedure is undertaken only one procedure may be recorded. For a procedure to be recorded the fellow must have been involved in the performance of the surgery and the pre and post operative management of the patient.
- 5.4.3 The fellow must maintain an operative experience log of all procedures they participate in as part of the PFET Program. As a minimum the operative experience log should include the operative date, patient name, patient identification, institution where the procedure is performed, pre-operative diagnosis, operative procedure performed and outcome. This detailed operative experience log is not submitted to the Committee but must be cited by the supervisor. Completion of a Cumulative Logbook Summary (CLS) Report, in the prescribed manner, including the supervisor's verification that the CLS Report reflect the fellow's detailed operative experience log must be submitted to the Committee at the conclusion of each six (6) month period.
- 5.4.4 The fellow is responsible for ensuring that the CLS Report is submitted to the Committee by the due date.
- 5.4.5 The Committee has an expectation that prior to commencement of the PFET Program the fellow has sufficient experience in general Neuro-oncology. The Committee requires a minimum of 70 operative Neuro-oncology cases, with an appropriate case mix, as primary surgeon or first assistant made of the following of the procedures:
 - (a) Glioma: Low grade - Debulking
 - (b) Glioma: High grade - Debulking
 - (c) Meningioma
 - (d) Metastasis
 - (e) Pituitary Tumour - Trans-sphenoidal



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- 5.4.6 The Committee will review the fellows' operative experience in Neuro-oncology prior to the commencement of the PFET Program. Where sufficient experience as identified in clause 5.4.6 is not evident the Committee will require this experience to be obtained during the PFET Program, in addition to the experience identified in clause 5.4.8, to be eligible for accreditation of the PFET Program.
- 5.4.7 To be eligible for accreditation of the PFET Program the CLS Report must demonstrate sufficient experience in complex Neuro-oncology surgery. While competence cannot be measured in absolute numeric terms, as a general guide the Committee would expect a minimum of 100 operative Neuro-oncology cases as the primary surgeon or first assistant to be undertaken during the PFET Program period, with an adequate case mix of the following procedures:
- (a) Acoustic Neuroma
 - (b) Bony Skull Tumour
 - (c) Colloid Cyst
 - (d) Endoscopic Biopsy
 - (e) Glioma: Low grade - Debulking
 - (f) Glioma: High grade - Debulking
 - (g) Meningioma
 - (h) Metastasis
 - (i) Pituitary Tumour - Trans-cranial
 - (j) Pituitary Tumour - Trans-sphenoidal
 - (k) Tumour Excision with Skull Base Approach
 - (l) Ventricular Tumour/Cyst
 - (m) Paediatric CNS Tumours

5.5 Research Assessment

- 5.5.1 The fellow must demonstrate scholarly activity in Neuro-oncology with active participation in clinical and/or basic research during the PFET Program.
- 5.5.2 To be eligible for accreditation of the PFET Program the fellow is required to complete one Neuro-oncology research project suitable for publication and/or presentation in a peer reviewed journal or scientific meeting during the PFET Program. Research projects completed prior to the commencement, during a period of interruption, in an institution not accredited, or after the completion of the PFET Program will not be considered.

5.6 Competence Assessment

- 5.6.1 At the completion of the PFET Program the supervisors of registered PFET fellow must submit the PFET Program Completion Report to the Committee.
- 5.6.2 To be eligible for accreditation of the PFET Program the Program Completion Report must confirm that the fellow has satisfied all requirements of the PFET Program and, in their opinion, should be accredited and awarded the Certificate. This report is completed by the supervisor alone. The report will be available to the fellow.

5.7 Post Fellowship Assessment Report



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- 5.7.1 The fellow must submit the Post Fellowship Assessment Report providing an honest and accurate assessment of the PFET Program position.
- 5.7.2 The Post Fellowship Assessment Report is used to evaluate the quality of the PFET position in comparison to the accreditation standards and objectives and is used in the re-accreditation process. The report will be available to the supervisor.

5.8 Completion and Awarding the Certificate

- 5.8.1 With twenty (20) business days of the completion of the PFET Program registered fellows must submit the following:
 - (a) The final Professional Performance Assessment Report; and
 - (b) The Post Fellowship Assessment Report; and
 - (c) The Cumulative Logbook Summary Report for the PFET Program duration.
- 5.8.2 With twenty (20) Business Days of the completion of the PFET Program the supervisor of registered fellow must submit the PFET Program Completion Report.
- 5.8.3 Accreditation of the PFET Program and awarding of the Certificate is conditional on the submission of the required forms identified above in the manner prescribed within the specified time frames.
- 5.8.4 Applications for PFET Program accreditation must be made after completion of 12 months of the PFET Program by submission of the requisite form. Accreditation is not an automatic process.
- 5.8.5 Fellows who apply for accreditation more than twenty (20) Business Days after their PFET Program registration has expired will be charged PFET Assessment Fee. The PFET Assessment Fee is revised annually and will be published on the NSA website www.nsa.org.au. The PFET Assessment Fee for 2010 will be \$AUD110 and is not refundable.
- 5.8.6 Applications are considered by the Committee. In considering applications, the Committee must be satisfied that the PFET Program objectives have been satisfied. This determination will be made within (20) Business Days of the forms being received.
- 5.8.7 On approval of accreditation the fellow will be issued with a Certificate of Post Fellowship Education and Training.

SECTION 6: PFET PROGRAM IN PAEDIATRIC NEUROSURGERY

6.1 Objective of the PFET Program

- 6.1.1 The objective of the PFET Program in Paediatric Neurosurgery is to provide competent independent specialist neurosurgeons with advanced procedural experience, knowledge and surgical skill relevant to the safe and effective treatment of complex paediatric neurosurgical conditions. PFET Programs in Paediatric Neurosurgery can be limited to specific complex paediatric neurosurgery practice areas.



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6.1.2 To achieve the overall objective, the following competencies have been developed in the RACS competency areas of medical expertise, technical expertise, judgement, communication, collaboration, management and leadership, health advocacy, scholar and teacher and professionalism:

- (a) an advanced level of scientific knowledge relevant to complex paediatric neurosurgery conditions
- (b) the ability to critically appraise new technologies
- (c) the application of scientific knowledge to the diagnosis and treatment of complex paediatric neurosurgery conditions
- (d) advanced procedural experience and surgical skill relevant to the safe and effective treatment of complex paediatric neurosurgery conditions
- (e) advanced judgement and clinical decision making in the diagnosis, pre and post operative management of patients with complex paediatric neurosurgery conditions
- (f) appropriate clinical decision making in identifying those patients amenable to surgical treatment for complex paediatric neurosurgical conditions
- (g) advanced communication skills with patients, their families and the health team to achieve an optimal and collaborative clinical management environment
- (h) effective management of administrative procedures and responsibilities
- (i) effective use of the resources available to prioritise patient and health care system needs in order to maximise patient outcomes
- (j) advocacy for the interests of paediatric neurosurgery treatment and appropriate health resource allocations
- (k) a recognition and commitment to the maintenance of surgical knowledge through self directed learning
- (l) the application of research to clinical practice in paediatric neurosurgery
- (m) an understating of unique ethical and medico-legal issues relevant to the practice of paediatric neurosurgery and apply them in clinical practice
- (n) adherence to, and appreciation of, the required standards of professionalism
- (o) appreciation of the importance of peer reviewed audit
- (p) employ a critically reflective approach to paediatric neurosurgery and their own clinical performance

6.1.3 To evaluate the effectiveness of the PFET Program in achieving the overall objective, the assessment of learning outcomes and other evaluation mechanisms provide direction on potential improvements to the curriculum, training activities and learning methods and opportunities.

6.2 Curriculum and Syllabus

6.2.1 To assist in achieving the objectives, each PFET Program position will have an advertised curriculum, including as a minimum the following learning opportunities:

- (a) Three half day operating sessions per week for the fellow focused primarily on complex paediatric neurosurgery; and
- (b) Practical and theoretical teaching and instruction in paediatric neurosurgery; and
- (c) Case presentations and clinical audits; and
- (d) Outpatient clinics and other relevant paediatric neurosurgery clinics on a weekly basis; and
- (e) Paediatric neurosurgery or relevant divisional ward rounds on a weekly basis; and
- (f) On-call roster for paediatric neurosurgery and neurosurgery with the call coverage being no more than 1:3.



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6.3 Professional Performance Assessment

- 6.3.1 The assessment of performance by the supervisor is fundamental to advancement of the fellow and the accreditation of the PFET Program. Each PFET position has an approved supervisor. The supervisor is responsible for the supervision and assessment of the fellow in that position.
- 6.3.2 During the PFET Program the fellows' performance should be regularly reviewed by the supervisor including a three monthly performance assessment meeting.
- 6.3.3 Completion of the Professional Performance Assessment (PPA) Report, in the prescribed manner, must be undertaken at the conclusion of each six (6) month period.
- 6.3.4 The PPA Reports may also be completed more frequently at the request of the Committee or at any time as determined by the supervisor where any area of unsatisfactory or marginal performance is identified.
- 6.3.5 The fellow and the supervisor must have a performance assessment meeting to discuss the content of the PPA Report completed by the supervisor. The PPA Report should be verified by both the fellow and the supervisor to acknowledge that the content has been discussed. Verifying the report does not indicate agreement with the assessment.
- 6.3.6 Where any area of performance within the PPA Report has been rated as unsatisfactory or marginal the remedial component of the PPA Report must be completed.
- 6.3.7 The fellow is responsible for ensuring that the completed assessment PPA Report is submitted to the Committee by the due date.
- 6.3.8 To be eligible for accreditation of the PFET Program the PPA Reports, covering the 12 month period immediately prior to completion of the PFET Program, must be satisfactory in all areas. Where there have been any unsatisfactory or marginal areas the Committee will interview the supervisor to assist in making a determination on whether accreditation should be granted. For accreditation to be considered in these circumstances there will need to be strong support from the supervisor.

6.4 Clinical Experience Assessment

- 6.4.1 Appropriately supervised operative experience in paediatric neurosurgery must be obtained during the PFET Program in the accredited position. Operative experience acquired prior to the commencement, during a period of interruption, in an institution not accredited, or after the completion of the PFET Program will not be considered.
- 6.4.2 For each operative case where more than one surgical procedure is undertaken only one procedure may be recorded. For a procedure to be recorded the fellow must have been involved in the performance of the surgery and the pre and post operative management of the patient.
- 6.4.3 The fellow must maintain an operative experience log of all procedures they participate in as part of the PFET Program. As a minimum the operative experience log should include the operative date, patient name, patient identification, institution where the procedure is performed, pre-operative diagnosis, operative procedure performed and outcome. This



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detailed operative experience log is not submitted to the Committee but must be cited by the supervisor.

- 6.4.4 Completion of a Cumulative Logbook Summary (CLS) Report, in the prescribed manner, including the supervisors' verification that the CLS Report reflects the fellows' detailed operative experience log must be submitted to the Committee at the conclusion of each six (6) month period.
- 6.4.5 The fellow is responsible for ensuring that the CLS Report is submitted to the Committee by the due date.
- 6.4.6 To be eligible for accreditation of the PFET Program the CLS Report must demonstrate sufficient experience in complex paediatric neurosurgery surgery. While competence cannot be measured in absolute numeric terms, as a general guide the Committee would expect a minimum of 150 operative paediatric neurosurgery cases as the primary surgeon or first assistant to be undertaken during the PFET Program period, of which a minimum of 50 must relate to cerebrovascular, tumours, craniofacial or spinal surgery made up of an adequate case mix of the following procedures:
- (a) Cavernous malformations in children
 - (b) Moyamoya disease in children (direct and indirect surgical revascularisation techniques)
 - (c) Cerebral aneurysms
 - (d) Cerebral arteriovenous malformations
 - (e) Cerebral AV fistulas (surgical and endovascular management)
 - (f) Vein of Galen malformations (endovascular and surgical management)
 - (g) Spinal vascular malformations
 - (h) Posterior fossa tumours – ependymoma
 - (i) Posterior fossa tumours – medulloblastoma
 - (j) Posterior fossa tumours – astrocytoma
 - (k) Posterior fossa tumours - brainstem glioma
 - (l) Posterior fossa tumours – other
 - (m) Craniopharyngioma
 - (n) Pineal tumours
 - (o) Choroid plexus tumours
 - (p) Optic pathway tumours
 - (q) Spinal cord tumours – intramedullary
 - (r) Spinal cord tumours – extramedullary
 - (s) Craniostomy repair – sagittal
 - (t) Craniostomy repair – coronal
 - (u) Craniostomy repair – metopic
 - (v) Craniostomy repair – multisutural

 - (w) Craniostomy repair – other
 - (x) Repair of craniocervical junction abnormalities
 - (y) Myelomeningocele
 - (z) Lipomyelomeningocele
 - (aa) Diastematomyelia
 - (bb) Tethered cord syndrome
 - (cc) Syrinx
 - (dd) Scoliosis
 - (ee) Growing skull fracture
 - (ff) Chiari 1 malformations
 - (gg) Chiari 2 malformations
 - (hh) Endoscopic third ventriculostomy



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- (ii) Intrathecal Baclofen pumps
- (jj) Selective dorsal rhizotomy
- (kk) Temporal lobectomy
- (ll) Hemispherectomy / hemispherotomy
- (mm) Lobar resections/ disconnections for epilepsy
- (nn) Subdural grid implantation
- (oo) Vagal nerve stimulation

6.5 Research Assessment

- 6.5.1 The fellow must demonstrate scholarly activity in paediatric neurosurgery surgery with active participation in clinical and/or basic research during the PFET Program.
- 6.5.2 To be eligible for accreditation of the PFET Program the fellow is required to complete one paediatric neurosurgery research project suitable for publication and/or presentation in a peer reviewed journal or scientific meeting during the PFET Program. Research projects completed prior to the commencement, during a period of interruption, in an institution not accredited, or after the completion of the PFET Program will not be considered.

6.6 Competence Assessment

- 6.6.1 At the completion of the PFET Program the supervisor of registered PFET fellow must submit the PFET Program Completion Report to the Committee.
- 6.6.2 To be eligible for accreditation of the PFET Program the Program Completion Report must confirm that the fellow has satisfied all requirements of the PFET Program and, in their opinion, should be accredited and awarded the Certificate. This report is completed by the supervisor alone. The report will be available to the fellow.

6.7 Post Fellowship Assessment Report

- 6.7.1 The fellow must submit the Post Fellowship Assessment Report providing an honest and accurate assessment of the PFET Program position.
- 6.7.2 The Post Fellowship Assessment Report is used to evaluate the quality of the PFET position in comparison to the accreditation standards and objectives and is used in the renewal and re-accreditation process. The report will be available to the supervisor.

6.8 Completion and Awarding the Certificate

- 6.8.1 With twenty (20) business days of the completion of the PFET Program registered fellows must submit the following:
 - (a) The final Professional Performance Assessment Report; and
 - (b) The Post Fellowship Assessment Report; and
 - (c) The Cumulative Logbook Summary Report for the PFET Program duration.
- 6.8.2 With twenty (20) Business Days of the completion of the PFET Program the supervisor of registered fellow must submit the PFET Program Completion Report.
- 6.8.3 Accreditation of the PFET Program and awarding of the Certificate is conditional on the submission of the required forms identified above in the manner prescribed within the specified time frames.



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- 6.8.4 Applications for PFET Program accreditation must be made after completion of 12 months of the PFET Program by submission of the requisite forms. Accreditation is not an automatic process.
- 6.8.5 Fellows who apply accreditation more than twenty (20) Business Days after their PFET Program registration has expired will be charged PFET Assessment Fee. The PFET Assessment Fee is revised annually and will be published on the NSA website www.nsa.org.au. The PFET Assessment Fee is currently \$AUD110 and is not refundable.
- 6.8.6 Applications are considered by the Committee. In considering applications, the Committee must be satisfied that the PFET Program objectives have been satisfied. This determination will be made within (20) Business Days of the forms being received.
- 6.8.7 On approval of accreditation the fellow will be issued with a Certificate of Post Fellowship Education and Training.