

Training Program Regulations

Surgical Education and Training Program in Neurosurgery

Approved for commencement 5 February 2024





Regulations for the Surgical Education and Training Program in Neurosurgery

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



REGULATIONS

SURGICAL EDUCATION AND TRAINING IN NEUROSURGERY

The Regulations encompass the rules, procedures, policies, administrative processes and principles for the control and conduct of the Surgical Education and Training Program in Neurosurgery. 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 readers are advised to ensure they are consulting the most current version.

© Copyright

This work is protected by copyright. You may download, display and print this material in unaltered form only (retaining this notice) for your personal, non-commercial use. No material anywhere in this work may be copied, reproduced or further disseminated unless for private use. All other rights are reserved.

Neurosurgical Society of Australasia
SET Program in Neurosurgery
PO Box 23337
Docklands Victoria 8012
Australia
Phone + 61 3 9600 1276 Fax + 61 3 9642 5611
Email set.neurosurgery@nsa.org.au



Regulations for the Surgical Education and Training Program in Neurosurgery

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



TABLE OF CONTENTS

SECTION 1: INTRODUCTION TO THE SET PROGRAM.....	4
1.1 Definition of terms and acronyms	4
1.2 Overview of Governance.....	5
1.3 Overview of the Regulations	6
1.4 Duration and Structure	6
1.5 Registration, Employment and Training Fees	7
1.6 Leave	8
1.7 Deferral	9
1.8 Interruption.....	9
1.9 Flexible Training	10
1.10 Reconsideration, Review and Appeal.....	11
1.11 Special Consideration.....	12
SECTION 2: CURRICULUM COMPONENTS AND STANDARDS.....	13
2.1 Curriculum Philosophy	13
2.2 Curriculum Modules.....	13
2.3 Training Requirements.....	14
2.4 Training Requirements for Basic Neurosurgical Training.....	14
2.5 Training Requirements for Intermediate Neurosurgical Training.....	15
2.6 Training Requirements for Advanced Neurosurgical Training.....	16
SECTION 3: PROGRESSION AND PERFORMANCE	17
3.1 Progression between SET Levels and Completion of Training.....	17
3.2 Performance Improvement Notice	18
3.3 Unsatisfactory Performance Notice	19
3.4 Dismissal Procedures	19
3.5 Misconduct Procedures	20
SECTION 4: CLINICAL TRAINING AND ASSESSMENT.....	22
4.1 Clinical Training Posts.....	22
4.2 Clinical Terms (Professional Performance Assessment)	23
4.3 Operative Experience (Logbook Report).....	25
4.4 Direct Observation of Procedural Skills Assessments.....	27



Regulations for the Surgical Education and Training Program in Neurosurgery

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



SECTION 5: RESEARCH TRAINING AND ASSESSMENT	29
5.1 Research Requirement.....	29
5.2 Research Project Requirement	29
5.3 Research Presentation Requirement	30
5.4 Research Publication Requirement.....	30
SECTION 6: COURSES AND SEMINARS	31
6.1 Compulsory Courses and Seminars.....	31
6.2 Courses.....	31
6.3 Training Seminars.....	31
SECTION 7: EXAMINATIONS	32
7.1 Fellowship Examination	32
7.2 Practice Examination.....	33
7.3 Anatomy Examination.....	33
SECTION 8: RECOGNITION OF PRIOR LEARNING.....	34
8.1 Introduction	34
8.2 Compulsory Examinations.....	34
8.3 Compulsory Courses.....	34
8.4 Research Requirements	34
8.5 Clinical Terms, Operative Experience and DOPS Requirements	35
8.6 Surgeon Scientist Pathway.....	35



Regulations for the Surgical Education and Training Program in Neurosurgery

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



SECTION 1: INTRODUCTION TO THE SET PROGRAM

1.1 Definition of terms and acronyms

Acronyms, definitions and terms used in these Training Program Regulations (**Regulations**).

Acronym/term:	shall mean/is defined as:
Applicant	A doctor who has been accepted to the SET Program but not yet commenced the SET Program
Assessor	A Surgical Trainer who is permitted to complete DOPS for trainees as part of the SET Program
Clinical Term	Clinical training terms are approximately three months in duration with start and end dates determined by the Training Board
Days	Unless otherwise specified, references to any days are to be read as calendar days, not business days
Deferral	A delay in the commencement of the SET Program by an applicant who has been offered a training position but not yet commenced the SET Program
Dismissal Procedures	Procedures undertaken to dismiss a trainee in accordance with clause 3.4 of these Regulations
DOPS	The Neurosurgery Direct Observation of Procedural Skills assessment
Fellowship Examination	The Fellowship Examination set by the RACS Court of Examiners in Neurosurgery and undertaken by trainees as part of the SET Program
Flexible Training	Training undertaken on a minimum 50% full-time equivalent basis, but less than 100% full-time
FRACS	Fellowship of the Royal Australasian College of Surgeons in Neurosurgery
Home Region	Trainees are allocated a Home Region where they will ordinarily spend most of their SET Program if there are available accredited training posts
Interruption	Interruption is a period of approved leave of absence from the SET Program by a trainee who has commenced training
Logbook Report	A logbook summary report in a format prescribed by the Training Board
Misconduct Panel	A panel appointed as part of the Misconduct Procedures to consider allegations made against a trainee
Misconduct Procedures	Procedures undertaken in relation to allegations of misconduct processed in accordance with clause 3.5 of these Regulations



Regulations for the Surgical Education and Training Program in Neurosurgery

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



NSA	Neurosurgical Society of Australasia
Pathway	The Surgeon-Scientist Pathway for recognition of prior learning open to trainees who undertake a neurosurgical research-focused Doctor of Philosophy while on a period of interruption from the SET Program
PPA Report	A Professional Performance Assessment Report in a format prescribed by the Training Board
RACS	Royal Australasian College of Surgeons
Regulations	These Training Program Regulations which establish the principles, terms and conditions for the Training Program
RPL	Recognition of prior learning involves the assessment of prior training or experience obtained which is comparable to components of the SET Program
RRA regulation	RACS Reconsideration, Review and Appeal regulation which sets out three sequential steps that may be taken by a trainee aggrieved by a decision related to the SET Program
SET	Surgical Education and Training
SET Program	The Surgical Education and Training Program in Neurosurgery
Surgical Supervisor	All accredited training posts have a neurosurgeon approved by the Training Board who satisfies the responsibilities and requirements for supervision and assessment of trainees at the post as part of the SET Program
Surgical Trainer	All accredited training posts have neurosurgeons who are members of a training unit who interact with trainees in the workplace and in other educational activities as part of the SET Program and met the requirements set forth by the Training Board
Trainee	A trainee registered in the SET Program in Neurosurgery
Training Board	The Surgical Education and Training Board of Neurosurgery responsible for the administration and management of the SET Program

1.2 Overview of Governance

- 1.2.1 The Australian and Aotearoa New Zealand primary postgraduate qualification required to practice as an independent specialist neurosurgeon in the respective countries is the Fellowship of the Royal Australasian College of Surgeons (**FRACS**) in Neurosurgery.
- 1.2.2 The Royal Australasian College of Surgeons (**RACS**) is the body accredited and authorised to conduct surgical education and training in Australia and Aotearoa New Zealand. The Surgical



Regulations for the Surgical Education and Training Program in Neurosurgery

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



Education and Training Program in Neurosurgery (**SET Program**) is the accredited training program to obtain the FRACS and operates in Australia and Aotearoa New Zealand.

- 1.2.3 The administration and management of the SET Program is delegated to the Neurosurgical Society of Australasia (**NSA**) as an agent of the RACS. The Board of Neurosurgery (**Training Board**) has dual reporting roles and represents both the RACS and the NSA on all matters relating to the SET Program (see the Terms of Reference available on the website).
- 1.2.4 The official website for the SET Program is the NSA website at www.nsa.org.au. All trainees, surgical supervisors and key stakeholders receive access passwords to the restricted section of the website, which contains forms and other essential information, pertaining to the SET Program. The official website for the RACS is www.surgeons.org.
- 1.2.5 For assistance or information on the SET Program please contact:

Neurosurgical Society of Australasia
SET Program in Neurosurgery
PO Box 23337
Docklands Victoria 8012
Phone + 61 3 9600 1276 Fax + 61 3 9642 5611
Email set.neurosurgery@nsa.org.au

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 SET Program. These Regulations are in compliance with the RACS policies and regulations. At times, these Regulations may refer directly to a RACS policy or regulation or an NSA policy. In such instances, these additional policies can be found at www.surgeons.org or www.nsa.org.au.
- 1.3.2 All trainees, surgical supervisors, accredited training units and Training Board members are required to comply with these Regulations at all times.
- 1.3.3 The information in these Regulations is as accurate as possible at the time of printing. The Training Board 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 at www.nsa.org.au. Readers are advised to ensure they are consulting the most current version of these Regulations.
- 1.3.4 In the event of any discrepancy or inconsistency between these Regulations and information from any other source, written, verbal or otherwise, with the exception of RACS policies and regulations, these Regulations shall prevail.

1.4 Duration and Structure

- 1.4.1 The SET Program is structured on a three-level sequential curriculum to facilitate the cumulative acquisition of the experience, knowledge, skills and attributes aligned with the overall objective.
- 1.4.2 The SET Program can be completed in a minimum of five years full-time equivalent and a maximum of nine calendar years from commencement of training subject to satisfactory progression through the levels in the timeframes outlined in these Regulations.



Regulations for the Surgical Education and Training Program in Neurosurgery

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



- 1.4.3 The first level is Basic Neurosurgical Training, which is focused on the basic neurosurgical foundational skills. The minimum training time for Basic Neurosurgical Training is one full-time equivalent training year. The maximum training time for completion of Basic Neurosurgical Training is two calendar years from commencement of training.
- 1.4.4 The second level is Intermediate Neurosurgical Training where the trainee involvement should be increasing in complexity. The trainee should be assuming more responsibility and building on the foundational experience, knowledge, skills and attributes towards the required level of competence. The minimum training time for Intermediate Neurosurgical Training is three full-time equivalent training years from completion of Basic Neurosurgical Training. The maximum training time for completion of Intermediate Neurosurgical Training is eight calendar years from commencement of training.
- 1.4.5 The third level is Advanced Neurosurgical Training where the trainee should be functioning with full emergency competence, operating as the primary surgeon in core neurosurgical procedures and acquiring the foundation for subspecialist practice. The minimum training time for Advanced Neurosurgical Training is one full-time equivalent training year from completion of Intermediate Neurosurgical Training. The maximum training time for completion of Advanced Neurosurgical Training is nine calendar years from commencement of training.
- 1.4.6 The following conditions apply when calculating the minimum training times:
 - (a) Approved interruption for all reasons is not included in the calculation; and
 - (b) Approved flexible training results in a pro-rata adjustment.
- 1.4.7 The following conditions apply when calculating the maximum training times:
 - (a) Commencement of training is the date the trainee first commenced the SET Program;
 - (b) Approved interruption for parental responsibilities, carer responsibilities or health reasons is not included in the calculation;
 - (c) Approved interruption for all other reasons is included in the calculation; and
 - (d) Except for parental responsibilities, carer responsibilities or health reasons, approved flexible training does not result in a pro-rata adjustment.
- 1.4.8 If a trainee has completed the maximum training time for their training level and has not been approved for progression to the next training level, or completed the maximum time for completion of the SET Program and has not complete all training requirements, the trainee will be dismissed from the SET Program pursuant to clause 3.4.

1.5 Registration, Employment and Training Fees

- 1.5.1 Trainees selected into the SET Program will be registered with the RACS in accordance with the RACS Trainee Registration and Variation regulation.
- 1.5.2 Surgical training fees are approved by the RACS and the NSA each year and are published on their respective websites. Invoices are issued prior to the commencement of the training year. The RACS is responsible for invoicing and collection of fees.
- 1.5.3 Trainees who fail to pay outstanding monies owed to the RACS or the NSA will be dismissed from the SET program in accordance with the RACS Surgical Education and Training Fee and the Specialty Surgical Education and Training Fee Policies.



Regulations for the Surgical Education and Training Program in Neurosurgery

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



- 1.5.4 Trainees are required to notify the Training Board of any illness, injury or impairment that may impact on their ability to undertake or complete the SET Program. This notification must be made in accordance with the RACS III, Injured and Impaired Trainees regulation.
- 1.5.5 Trainees are required to notify the Board, in writing, within 2 days of any material change to their employment or their medical registration status during their SET Program and to provide all documentation relating to any change. For avoidance of doubt, this includes but is not limited to:
- (a) details of the commencement and outcome of any investigations or disciplinary processes taken by their employer;
 - (b) details of any restrictions, conditions, cautions or reprimands placed on the trainee by their employer;
 - (c) details of the suspension or termination of employment;
 - (d) the recording of any undertakings, conditions or cautions on a trainee's medical registration; and
 - (e) the expiry, suspension or cancellation of the trainee's medical registration.
- 1.5.6 The Training Board Chair or nominee may suspend a trainee from the SET Program in the following circumstances:
- (a) where misconduct procedures have commenced in accordance with clause 3.5 (**Misconduct Procedures**); or
 - (b) where dismissal procedures have commenced in accordance with clause 3.4 (**Dismissal Procedures**); or
 - (c) where the trainee is subject to an investigation by their employing authority, regulatory authority and/or the RACS; or
 - (d) where there has been a material change to a trainee's employment or medical registration status which impacts on their ability to fully participate in the SET Program.
- 1.5.7 In the event of suspension, the trainee will be advised in writing as soon as practicable after the decision is made and will be advised of the reason for the suspension and any term or conditions attached to the suspension.
- 1.5.8 The suspension of the trainee will continue to operate until it is removed by the Training Board Chair or nominee. The Training Board Chair or nominee may remove a suspension if the reason for the suspension has been removed or reversed.
- 1.5.9 Fees paid by a trainee during a period of suspension are not refundable.
- 1.5.10 Any period of suspension will not be counted towards the minimum training time for the trainee's SET Program level.

1.6 Leave

- 1.6.1 Trainees undertaking full-time training are entitled to a maximum of four weeks leave in each Clinical Term, subject to approval by the employing authority. Trainees undertaking flexible training are entitled to the pro-rata equivalent. Periods beyond this may result in the Clinical Term being deemed Unassessed and will not be counted towards the minimum training time for the trainee's SET Program level.



Regulations for the Surgical Education and Training Program in Neurosurgery

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



- 1.6.2 The maximum leave entitlement is inclusive of, but not limited to, combined annual, personal, compassionate, parental, study, conference and carer's leave.

1.7 Deferral

- 1.7.1 Deferral is a delay in the commencement of the SET Program by an applicant who has been offered a training position but not yet commenced training.
- 1.7.2 Successful applicants to the SET Program who wish to defer the commencement must formally apply to the Training Board at the time of acceptance of the offer outlining the reasons for their request and providing any related documentary evidence in accordance with the Selection Regulations.
- 1.7.3 Applications for additional periods of deferral (beyond an initial 12 months) not related to parental responsibilities, carer responsibilities or health reasons must be submitted prior to 31 May in the year prior to the proposed commencement of training. In all other circumstances, applications must be submitted as far in advance as possible.
- 1.7.4 All requests for deferral will be considered but not necessarily granted. The Training Board Chair or nominee will make a determination on the approval or otherwise taking into consideration the reasons for the request and logistical considerations.
- 1.7.5 Requests for deferral will not be granted in the following circumstances:
- (a) to complete unaccredited experience or training in a surgical discipline;
 - (b) to complete research which is not part of a higher degree;
 - (c) to complete research which is part of a higher degree but has not commenced at the time of the deferral application;
 - (d) to complete an additional period of deferral for reasons relating to research.
- 1.7.6 The Training Board may approve an additional period of deferral greater or lesser than that applied for.
- 1.7.7 Should a request for deferral be denied, applicants must either accept the original offer or decline the offer of a position on the SET Program. If an applicant does not respond to a notification of a deferral decline within 14 days, the offer of a position on the SET Program is withdrawn.
- 1.7.8 An approved period of deferral does not preclude the applicant from being employed in a non-training clinical position.

1.8 Interruption

- 1.8.1 Interruption is a period of approved leave of absence from the SET Program by a trainee who has commenced training.
- 1.8.2 Any trainee can apply for a period of interruption. Reasons for interruption may include but are not limited to parental responsibilities, carer responsibilities, health reasons, individual development opportunities outside surgery, research, and academic activities.
- 1.8.3 Applications for interruption not related to parental responsibilities, carer responsibilities or health reasons must be submitted prior to 31 May in the year prior to the proposed start of the



Regulations for the Surgical Education and Training Program in Neurosurgery

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



period of interruption. In all other circumstances, applications must be submitted as far in advance as possible.

- 1.8.4 Except for interruption for parental responsibilities, carer responsibilities or health reasons, trainees cannot apply for interruption commencing in their first year of training.
- 1.8.5 All requests for interruption will be considered but not necessarily granted. The Training Board Chair or nominee will decide on the approval or otherwise taking into consideration, but not limited to, the following:
 - (a) the reasons for the request;
 - (b) the length of interruption sought;
 - (c) the impact on the trainee's SET Program
 - (d) the trainee's performance;
 - (e) the impact on training units; and
 - (f) the impact on the SET Program overall.
- 1.8.6 An application for interruption should include:
 - (a) the reasons for the request;
 - (b) the period of interruption sought including start and end dates; and
 - (c) any supporting evidence (which is essential for health reasons).
- 1.8.7 Applications made for health reasons must be accompanied by independent evidence from the treating specialist which must specifically support an interruption of training for the period sought.
- 1.8.8 Requests for interruption will not be granted in the following circumstances:
 - (a) to complete experience, training or a fellowship in a surgical discipline not accredited as part of the SET Program;
 - (b) where a trainee has been suspended from the SET Program in accordance with clause 1.5.6;
 - (c) where a trainee is the subject of Dismissal Procedures.
- 1.8.9 The trainee will be advised in writing of the outcome.
- 1.8.10 The Training Board may approve a period of interruption greater than that applied for.
- 1.8.11 The Training Board is not an employer and approval of a period of interruption does not compel a trainee's employer to grant leave. Trainees must also apply for and be granted appropriate leave from their employer.

1.9 Flexible Training

- 1.9.1 The Training Board is committed to supporting trainees to reach their full potential by providing opportunities for flexible training. Flexible training is defined as training undertaken on a minimum 50% full-time equivalent basis, but less than 100% full-time.
- 1.9.2 Any trainee can apply for flexible training. Reasons for requests for flexible training may include but are not limited to parental responsibilities, carer responsibilities, health reasons, individual development opportunities outside surgery, research and academic activities.



Regulations for the Surgical Education and Training Program in Neurosurgery

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



- 1.9.3 Trainees are encouraged to submit applications as far in advance as possible if there is a need for flexible training arrangements.
- 1.9.4 Approval of flexible training is at the discretion of the Training Board Chair or nominee. The application should include:
 - (a) the reason for the request;
 - (b) the duration of flexible training being sought;
 - (c) the pro rata time commitment preferred; and
 - (d) the preferred region for the flexible training to be undertaken in.
- 1.9.5 Approval of flexible training requires consideration of the needs of the individual trainee, the ability of the Training Board to identify an employer able to provide the employment conditions sought, and the ability of the flexible training being sought to satisfy the Training Board requirements for training, assessment, maintenance of competence and timely progression.
- 1.9.6 The Training Board will be responsible for securing flexible training posts and availability cannot be guaranteed. Where the number of flexible training requests exceed the posts available, priority will be given to trainees with parental responsibilities, carer responsibilities and health reasons.
- 1.9.7 The trainee will be advised in writing of the outcome of their application for flexible training. If the application is declined, the trainee will be given reasons for the decision.
- 1.9.8 Where flexible training is approved, the training must include daytime work, educational and training activities, and on-call and out of hours duties on a pro rata basis, comparable to that training undertaken by a full-time trainee.
- 1.9.9 Adjustments to training requirements and minimum training times for flexible trainees, where applicable, will be a condition of approval communicated in the outcome notification.

1.10 Reconsideration, Review and Appeal

- 1.10.1 The RACS Reconsideration, Review and Appeal regulation (**RRA regulation**) sets out three sequential steps that may be taken by a trainee aggrieved by a decision related to the SET Program. The RRA regulation can be accessed at www.surgeons.org.
- 1.10.2 An application for Reconsideration of a decision must be submitted to the Training Board or the RACS in accordance with the RRA regulation within 28 days of the date of the original decision.
- 1.10.3 An application for Review of a decision must be received by RACS directly in accordance with the RRA regulation within 14 days of the date of the written notification of the Reconsideration Decision.
- 1.10.4 An application for Appeal must be received by RACS directly in accordance with the RRA regulation within 14 days of the date of the written notification of the Review Decision.
- 1.10.5 Where the Training Board has delegated authority to act on its behalf to Training Board members, nominees, representatives, committees and surgical supervisors, the Training Board remains the original decision maker for the purpose of the Reconsideration of the delegated decisions.



Regulations for the Surgical Education and Training Program in Neurosurgery

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



- 1.10.6 When processing a Reconsideration, the application will be assessed by the Training Board Chair or nominee in accordance with the RRA regulation to determine eligibility for processing.
- 1.10.7 Where an application is eligible, the Training Board Chair, or a nominee or panel of the Training Board appointed by the Training Board Chair, will act on behalf of the Training Board in considering the Reconsideration application.
- 1.10.8 After conducting the Reconsideration, the Training Board Chair, nominee or panel of the Training Board will arrive at a Reconsideration Decision. Where a panel is appointed, this will be determined by a majority vote.
- 1.10.9 The Training Board Chair, nominee or panel of the Training Board will report the reasons for the Reconsideration Decision at the next scheduled Training Board meeting after the Reconsideration Decision.
- 1.10.10 The Training Board Chair will notify the trainee, copied to the RACS RRA mailbox, of the Reconsideration Decision within the timeframe specified in the RRA regulation. Where appropriate, the notification will include information relating to further options that may be available to the trainee.

1.11 Special Consideration

- 1.11.1 Trainees can apply for special consideration if they experience illness, bereavement or other serious circumstances beyond their control which have, or may affect, their ability to meet a SET Program requirement or regulation.
- 1.11.2 The following are not open to special consideration under this clause 1.11 and applications must be made in accordance with the relevant RACS policies:
 - (a) an assessment of unsatisfactory in a compulsory course identified in clause 6.2; and
 - (b) the Fellowship Examination.
- 1.11.3 For avoidance of doubt, the following circumstances will not ordinarily constitute grounds for special consideration:
 - (a) ordinary or expected stress or anxiety associated with the SET Program; or
 - (b) minor illnesses or medical conditions; or
 - (c) work commitments.
- 1.11.4 Applications for special consideration must include a written submission and copies of all documentation on which the trainee wishes to rely. The written submission must specifically address the circumstances, the potential impact on the trainee's ability to meet the SET Program requirements and specify the remedy sought.
- 1.11.5 Applications made on medical grounds must be accompanied by independent medical evidence from the treating specialist which must specifically address the extent to which the trainee's ability to meet a SET Program requirement or regulation has been, or will likely be, impacted.
- 1.11.6 Approval of special consideration is at the discretion of the Training Board Chair or nominee. The trainee will be sent a letter advising them of the decision and the reasons it was made.



Regulations for the Surgical Education and Training Program in Neurosurgery

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



- 1.11.7 Except for the Training Seminar Requirement (see clause 6.3), the special consideration outcome cannot exempt a trainee from completion of a training requirement. The special consideration outcome can allow for alternate timing for completion of a training requirement during the SET Program on such terms and conditions as the Training Board Chair or nominee determines.
- 1.11.8 The Training Board may, at its sole discretion, pass a resolution to apply special consideration to a group of trainees without an application being submitted by the impacted trainees where the Training Board identifies serious circumstances beyond the trainees' control which have the potential to affect their ability to meet a SET Program requirement or regulation. In such circumstances, the trainees do not need to accept the special consideration offered.
- 1.11.9 The Training Board Chair or nominee can apply special consideration to an individual trainee without an application being submitted by the impacted trainee where the Training Board Chair identifies illness, bereavement or other serious circumstances beyond the trainee's control which have the potential to affect their ability to meet a SET Program requirement or regulation. In such circumstances, the trainee does not need to accept the special consideration offered.

SECTION 2: CURRICULUM COMPONENTS AND STANDARDS

2.1 Curriculum Philosophy

- 2.1.1 The overall objective of the SET Program is to produce competent independent specialist neurosurgeons with the experience, knowledge, skills and attributes necessary to provide the communities, health systems and professions they serve with the highest standard of safe, ethical and comprehensive care and leadership.
- 2.1.2 To achieve the SET Program objectives, competencies for a graduating trainee have been developed in the RACS competency areas of:
 - (a) Collaboration and teamwork
 - (b) Communication
 - (c) Cultural competence and cultural safety
 - (d) Health advocacy
 - (e) Judgement and clinical decision making
 - (f) Leadership and management
 - (g) Medical expertise
 - (h) Professionalism
 - (i) Scholarship and teaching; and
 - (j) Technical expertise.

2.2 Curriculum Modules

- 2.2.1 The RACS competencies have been integrated into specific learning outcomes for different training levels which are aligned with the curriculum modules.
- 2.2.2 The learning outcomes are delivered by a number of learning methods and modalities as outlined in the curriculum including structured educational programs, skills courses, self-directed learning and workplace hands on service learning and exploration.



Regulations for the Surgical Education and Training Program in Neurosurgery

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



- 2.2.3 To assess the accomplishment of the learning outcomes multiple assessment tools and performance based standards are applied to determine the degree of progression towards the competencies and suitability of the trainee to continue training.
- 2.2.4 To evaluate the effectiveness of achieving the overall objective, the assessment of learning outcomes and other evaluation mechanisms are considered to provide direction on potential improvements to the curriculum, training activities and learning methods and opportunities.
- 2.2.5 The curriculum modules encompass learning outcomes which are aligned with the curriculum modules for each level of the SET Program. The modules are available on the training website www.nsa.org.au.
- 2.2.6 Neurosurgery is a rapidly changing field and although the Training Board aims to provide a comprehensive, relevant and current curriculum, there may be instances when major changes or new advances in neurosurgery require the trainee to develop competencies not encompassed by the curriculum.
- 2.2.7 The trainee is expected to develop independent learning skills. The curriculum should facilitate the development of those skills. The curriculum should guide and not limit the trainee's ongoing education.

2.3 Training Requirements

- 2.3.1 Each level of the SET Program has training requirements which must be satisfied within the maximum allocated period. The training requirements are used to assess performance and determine progression and suitability to continue training.
- 2.3.2 Where indicated in these Regulations, some training requirements can be completed at an earlier level, at an alternate level where approved as part of a special consideration application (see clause 1.11) or recognition of prior learning can be applied (see clause 8).

2.4 Training Requirements for Basic Neurosurgical Training

- 2.4.1 Basic Neurosurgical Training has minimum and maximum training times as outlined in clause 1.4.3.
- 2.4.2 Trainees who complete the maximum training time for Basic Neurosurgical Training and have not been approved for progression to Intermediate Neurosurgical Training will be dismissed from the SET Program (see clause 3.4).
- 2.4.3 The full-time training requirements which must be satisfactorily completed during Basic Neurosurgical Training are summarised below with further details available in these Regulations. These requirements may be adjusted where flexible training is approved.

Training Requirements	Regulation
Clinical Term Requirement: Submit quarterly Professional Performance Assessments	4.2
Basic Clinical Term Requirement: Satisfactory completion of at least three active Clinical Terms during Basic Neurosurgical Training	4.2



Regulations for the Surgical Education and Training Program in Neurosurgery

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



Clinical Term Case Requirement: Participation in a minimum of 80 major neurosurgical procedures for each six months while in active Clinical Terms	4.3
Basic Case Requirement: Participation in a minimum of 200 major neurosurgical procedures from commencement of the SET Program while in active Clinical Terms	4.3
Basic DOPS Requirement: Be assessed by one Assessor as having satisfied each Type 1 DOPS procedure	4.4
CCRISP® Requirement: Satisfactorily complete the Care of the Critically Ill Surgical Patient Course	6.2
Training Seminar Requirement: Satisfactorily participate in all scheduled Training Seminars while undertaking active Clinical Terms as part of the SET Program	6.3

2.4.4 Trainees must remain in their allocated accredited training positions at all times during Basic Training, unless on a period of approved interruption.

2.5 Training Requirements for Intermediate Neurosurgical Training

2.5.1 Intermediate Neurosurgical Training has minimum and maximum training times as outlined in clause 1.4.4.

2.5.2 Trainees who complete the maximum training time for Intermediate Neurosurgical Training and have not been approved for progression to Advanced Neurosurgical Training will be dismissed from the SET Program (see clause 3.4).

2.5.3 The full-time training requirements which must be satisfactorily completed during Intermediate Neurosurgical Training are summarised below with further details available in these Regulations. These requirements may be adjusted where flexible training is approved.

Training Requirements	Regulation
Clinical Term Requirement: Submit quarterly Professional Performance Assessments	4.2
Intermediate Clinical Term Requirement: Satisfactory completion of at least nine active Clinical Terms during Intermediate Neurosurgical Training	4.2
Clinical Term Case Requirement: Participation in a minimum of 80 major neurosurgical procedures for each six months while in active Clinical Terms	4.3
Intermediate Case Requirement: Participation in a minimum of 1,000 major neurosurgical procedures from commencement of the SET Program while in active Clinical Terms	4.3
Intermediate DOPS Requirement: Be assessed by two different Assessors as having satisfied each Type 1 and Type 2 DOPS procedure (including those submitted during Basic Neurosurgical Training)	4.4
EMST Requirement: Satisfactorily complete the Early Management of Severe Trauma Course	6.2



Regulations for the Surgical Education and Training Program in Neurosurgery

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



Training Seminar Requirement: Satisfactorily participate in all scheduled Training Seminars while undertaking active Clinical Terms as part of the SET Program	6.3
Research Project Requirement: Satisfactorily complete an approved supervised research project	5.2
Research Presentation Requirement: Satisfactorily complete an approved research presentation	5.3

2.5.4 Trainees must remain in their allocated accredited training positions at all times during Intermediate Neurosurgical Training, unless on a period of approved interruption.

2.6 Training Requirements for Advanced Neurosurgical Training

2.6.1 Advanced Neurosurgical Training has minimum and maximum training times as outlined in clause 1.4.5.

2.6.2 Subject to any exemption granted by the Training Board, trainees who reach a maximum of nine years from commencement of training without successful completion of all training requirements will be dismissed from the SET Program (see clause 3.4).

2.6.3 The full-time training requirements which must be satisfactorily completed during Advanced Neurosurgical Training are summarised below with further details available in these Regulations. These requirements may be adjusted where flexible training is approved.

Training Requirements	Regulation
Clinical Term Requirement: Submit quarterly Professional Performance Assessments	4.2
Advanced Clinical Term Requirement: Satisfactory completion of at least four active Clinical Terms during Advanced Neurosurgical Training	4.2
Clinical Term Case Requirement: Participation in a minimum of 80 major neurosurgical procedures for each six months while in active Clinical Terms	4.3
Advanced Case Requirement: Participation in a minimum of 1,200 major neurosurgical procedures from commencement of the SET Program while in active Clinical Terms	4.3
Primary Case Requirement: Participation in a minimum 500 major neurosurgical procedures as primary surgeon from commencement of the SET Program while in active Clinical Terms (the cases are included in the overall minimum of 1,200)	4.3
Paediatric Case Requirement: Participation in a minimum of 50 major paediatric neurosurgical procedures from commencement of the SET Program while in active Clinical Terms (the cases are included in the overall minimum of 1,200)	4.3



Regulations for the Surgical Education and Training Program in Neurosurgery

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



Advanced DOPS Requirement: Be assessed by one Assessor as having satisfied any five of the Type 3 DOPS procedures (including those submitted during Basic and Intermediate Neurosurgical Training)	4.4
Research Publication Requirement: Have a publication from the supervised research project in an approved journal	5.4
Training Seminar Requirement: Satisfactorily participate in all scheduled Training Seminars while undertaking active Clinical Terms as part of the SET Program	6.3
Fellowship Examination: Satisfactorily complete the Fellowship Examination in Neurosurgery	7.1

2.6.4 Trainees must remain in their allocated accredited training positions at all times during Advanced Neurosurgical Training, unless on a period of approved interruption.

SECTION 3: PROGRESSION AND PERFORMANCE

3.1 Progression between SET Levels and Completion of Training

3.1.1 Progression from Basic Neurosurgical Training to Intermediate Neurosurgical Training will be considered after the second and fourth Clinical Terms in each training year, after the minimum training time for Basic Neurosurgical Training has been satisfied. At the time the progression decision is made, to progress, the trainee must:

- (a) have satisfactorily completed the minimum training time for Basic Neurosurgical Training; and
- (b) have satisfactorily completed all the training requirements for Basic Neurosurgical Training; and
- (c) have received **less than two** Performance Improvement Notices relating to the four most recent active Clinical Terms completed and have no PPA Report Pending; and
- (d) satisfy any condition in an Unsatisfactory Performance Notice applicable to eligibility to progress to Intermediate Neurosurgical Training; and
- (e) not be suspended; and
- (f) not be subject to Misconduct Procedures; and
- (g) not be subject to Dismissal Procedures.

3.1.2 Progression from Intermediate Neurosurgical Training to Advanced Neurosurgical Training will be considered after the second and fourth Clinical Terms in each training year, after the minimum training time for Intermediate Neurosurgical Training has been satisfied. At the time the progression decision is made, to progress, the trainee must:

- (a) have satisfactorily completed the minimum training time for Intermediate Neurosurgical Training; and
- (b) have satisfactorily completed all the training requirements for Intermediate Neurosurgical Training; and
- (c) have received **less than two** Performance Improvement Notices relating to the four most recent active Clinical Terms completed and have no PPA Report Pending; and
- (d) satisfy any condition in an Unsatisfactory Performance Notice applicable to eligibility to progress to Advanced Neurosurgical Training; and



Regulations for the Surgical Education and Training Program in Neurosurgery

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



- (e) not be suspended; and
- (f) not be subject to Misconduct Procedures; and
- (g) not be subject to Dismissal Procedures.

3.1.3 Advanced Neurosurgical Training will be complete after the minimum training time for Advanced Neurosurgical Training has been satisfied and the trainee:

- (a) has satisfactorily completed the minimum training time for Advanced Neurosurgical Training; and
- (b) has satisfactorily completed all the training requirements for the SET Program; and
- (c) has received **less than two** Performance Improvement Notices relating to the four most recent active Clinical Terms completed and have no PPA Report Pending; and
- (d) does not have an active or unresolved Performance Improvement Notice outstanding; and
- (e) has satisfied any condition in an Unsatisfactory Performance Notice applicable to eligibility to complete Advanced Neurosurgical Training and the SET Program; and
- (f) upon completion is not suspended; and
- (g) upon completion is not subject to Misconduct Procedures; and
- (h) upon completion is not subject to Dismissal Procedures.

3.1.4 If a trainee has completed the maximum training time for their training level and has not been approved for progression to the next training level, or completed the maximum time for completion of the SET Program and has not complete all training requirements, the trainee will be dismissed (see clause 3.4).

3.2 Performance Improvement Notice

3.2.1 A trainee is only permitted four Performance Improvement Notices across the term of the SET Program.

3.2.2 A trainee is not permitted to be issued a Performance Improvement Notice if they have received an Unsatisfactory Performance Notice at any time during the term of the SET Program.

3.2.3 A Performance Improvement Notice will be issued if:

- (a) a training requirement is not satisfactorily completed to the standard required by the due date; or
- (b) a Professional Performance Assessment Report for a Clinical Term is Unsatisfactory.

3.2.4 The Performance Improvement Notice will list the areas where improvement is required and will be active for one Clinical Term. Identified areas for improvement must be resolved within the active Clinical Term specified. The Performance Improvement Notice will specify whether it is the first, second, third or fourth Performance Improvement Notice.

3.2.5 When issuing a fourth Performance Improvement Notice, an interview (which may be via electronic means) will be scheduled with the trainee, the surgical supervisor and a representative of the Training Board. The trainee will be invited to have a support person of their choice with them. The support person may take notes on the trainee's behalf and act as a support to the trainee, but their role must not extend to that of an advocate. Notes will be prepared of the interview.



Regulations for the Surgical Education and Training Program in Neurosurgery

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



- 3.2.6 The purpose of the interview is to ensure that the trainee has a remediation plan in place and that the trainee is advised of the implications if any other training requirements are not satisfied.

3.3 Unsatisfactory Performance Notice

- 3.3.1 A trainee is only permitted one Unsatisfactory Performance Notice across the term of the SET Program.
- 3.3.2 An Unsatisfactory Performance Notice will be issued if:
- (a) a training requirement is not satisfactorily completed to the standard required by the due date; or
 - (b) a Professional Performance Assessment Report for an active Clinical Term is Unsatisfactory; and
 - (c) the trainee has received **four prior** Performance Improvement Notices; or
 - (d) a finding of misconduct is made, the outcome of which is the issuing of an Unsatisfactory Performance Notice.
- 3.3.3 The Unsatisfactory Performance Notice will be active for such duration, and under such conditions as determined by the SET Training Board Chair or nominee.
- 3.3.4 The Unsatisfactory Performance Notice will list the duration and conditions which must be satisfied.
- 3.3.5 When issuing an Unsatisfactory Performance Notice an interview (which may be via electronic means) will be scheduled with the trainee, the surgical supervisor and a representative of the Training Board. The trainee will be invited to have a support person of their choice with them. The support person may take notes on the trainee's behalf and act as a support to the trainee, but their role must not extend to that of an advocate. Notes will be prepared of the interview.
- 3.3.6 The purpose of the interview is to ensure that the trainee has a remediation plan in place and understands the conditions of the Unsatisfactory Performance Notice and the implications of failing any of the conditions.
- 3.3.7 If a trainee fails a condition of an Unsatisfactory Performance Notice while it is active, the trainee will be dismissed from the SET Program in accordance with clause 3.4.

3.4 Dismissal Procedures

- 3.4.1 Trainees may be dismissed from the SET Program for one or more of the following reasons:
- (a) the trainee has failed to rectify a condition of an Unsatisfactory Performance Notice by the due date; or
 - (b) the trainee has not satisfactorily completed the required training within the maximum time permitted; or
 - (c) there is a finding of misconduct justifying dismissal; or
 - (d) failure to comply with a reasonable written direction of the Training Board or RACS and its Boards and Committees; or
 - (e) failure to pay training related fees by due date; or
 - (f) failure to maintain general medical registration or general scope registration as required in accordance with the RACS policies and regulations; or



Regulations for the Surgical Education and Training Program in Neurosurgery

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



- (g) resignation from, or abandonment of a training post prior to the completion of the allocated period of training without the prior approval of the Training Board Chair; or
- (h) failure to achieve or maintain employment in an accredited training post as allocated by the Training Board which allows for full participation in the SET Program; or
- (i) termination from an allocated training post; or
- (j) there is a material change to a trainee's employment or medical registration status which materially impacts on the trainee's ability to fully participate in the SET Program.

- 3.4.2 The trainee will be provided with a Notice of Intention to Dismiss, which includes the reason for the dismissal and relevant documentation.
- 3.4.3 The trainee will be suspended from the SET Program effective from the date of the Notice of Intention to Dismiss. The employer will be notified of the intention to dismiss the trainee and will be kept informed of decisions throughout the Dismissal Procedures.
- 3.4.4 The trainee may submit an application for Reconsideration, Review or Appeal relating to the Notice of Intention to Dismiss in accordance with the RRA regulation.
- 3.4.5 If no application is made in accordance with the RRA regulation, the trainee dismissal will be finalised by the Training Board or nominee and a Notice of Dismissal will be issued.
- 3.4.6 If an application is made in accordance with the RRA regulation which finds that the Notice of Intention to Dismiss should be revoked, the decision reached in accordance with the RRA regulation will be binding on the Training Board.
- 3.4.7 If an application is made in accordance with the RRA regulation which finds dismissal is warranted, the trainee's dismissal will be finalised by the Training Board Chair or nominee and a Notice of Dismissal will be issued.

3.5 Misconduct Procedures

- 3.5.1 Misconduct is defined in the RACS SET Misconduct regulation available at www.surgeons.org.
- 3.5.2 Where an allegation of misconduct (**Alleged Misconduct**) has been made against a trainee, or the Training Board Chair otherwise becomes aware of circumstances which may amount to misconduct, the Training Board Chair (or nominee) will appoint a panel of three persons to consider the Alleged Misconduct (the **Misconduct Panel**). This Misconduct Panel may include the Training Board Chair.
- 3.5.3 The Misconduct Panel will undertake preliminary inquiries to assess the nature of the Alleged Misconduct and whether Misconduct Procedures should proceed.
- 3.5.4 If there is a third-party investigation or process underway or planned relevant to the Alleged Misconduct, the Misconduct Panel may hold their decision on whether to proceed with the Misconduct Procedures in abeyance pending the outcome of that investigation or process.
- 3.5.5 If the Misconduct Panel determines that the Alleged Misconduct is without substance, the Misconduct Procedures will not proceed. A written record of the Alleged Misconduct and the decision will be retained on the trainee's file.



Regulations for the Surgical Education and Training Program in Neurosurgery

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



- 3.5.6 If the Misconduct Panel determines that there is sufficient information to warrant continuing with the Misconduct Procedures, the trainee will be advised of the Alleged Misconduct in sufficient detail to enable them to properly respond. The Misconduct Panel may choose to provide **Proposed Sanctions** if the Alleged Misconduct is admitted to at their discretion, having regard to clause 3.5.21.
- 3.5.7 Depending on the seriousness of the Alleged Misconduct, the Misconduct Panel may suspend the trainee from the SET Program at the commencement or at any time during the Misconduct Procedures.
- 3.5.8 The trainee will be provided with 7 days in which to respond in writing to the Alleged Misconduct.
- 3.5.9 If the trainee admits to the Alleged Misconduct in full or does not respond to the notification in clause 3.5.6, the Misconduct Panel will have the discretion determine the Sanctions in accordance with clause 3.5.21, having regard to any mitigating circumstances submitted by the trainee and any other factors as determined by the Misconduct Panel. The Misconduct Panel is not bound by the Proposed Sanctions, if applicable, in clause 3.5.6 if additional information is available which warrants a departure.
- 3.5.10 If the trainee disputes the Alleged Misconduct in part or in full, the Misconduct Procedures will continue. The Misconduct Panel is not bound by the Proposed Sanctions, if applicable, in clause 3.5.6.
- 3.5.11 Unless requested by the Misconduct Panel, the trainee does not have the right to attend any meetings of the Misconduct Panel or to make any oral submissions to it, either personally or through any other party.
- 3.5.12 The Misconduct Panel may inform itself as it sees fit, subject to the rules of procedural fairness.
- 3.5.13 The Misconduct Panel may delay its deliberations until an investigation or process is undertaken into the Alleged Misconduct or part thereof by a third party and may rely on the findings of that third party provided the trainee is advised of the delay and/or intention to rely on the findings of the third party.
- 3.5.14 Where a trainee is requested to attend an interview with the Misconduct Panel, the trainee will be invited to have a support person of their choice with them. The support person may take notes on the trainee's behalf and act as a support to the trainee, but their role must not extend to that of an advocate.
- 3.5.15 The Misconduct Panel may request further information from the trainee or any third parties at any time during the Misconduct Procedures.
- 3.5.16 The Misconduct Panel will provide the trainee with the opportunity to consider and respond to any relevant material obtained from third parties during the Misconduct Procedures.
- 3.5.17 If a trainee chooses not to attend an interview, or to provide further information as requested by the Misconduct Panel, the Misconduct Procedures will be conducted in the absence of any response from the trainee.
- 3.5.18 All members of the Misconduct Panel are entitled to vote on decisions. The Misconduct Panel decides outcomes based on a majority vote of its members.



Regulations for the Surgical Education and Training Program in Neurosurgery

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



- 3.5.19 The Misconduct Panel must make a finding as to whether, to the Alleged Misconduct is substantiated (in part or full), unsubstantiated or unable to be substantiated. The standard of proof that applies is "balance of probabilities". Balance of probabilities requires that something must be more likely to have happened than not to have happened.
- 3.5.20 Where Misconduct is substantiated (in part or full) the Misconduct Panel will determine the Sanctions, having regard to clause 3.5.21.
- 3.5.21 Where there is a finding of Misconduct, one of the following Sanctions will apply:
- (a) a formal warning without any terms or conditions attached; or
 - (b) the issuing of an Unsatisfactory Performance Notice on such terms and conditions as deemed appropriate; or
 - (c) a finding of Misconduct justifying dismissal from the SET Program.
- 3.5.22 The trainee, the Training Board, the trainee's employer, and the supervisor will be advised of the outcome of the Misconduct Procedures and reasons for the decision within 7 days of the decision.
- 3.5.23 Where there is a finding of Misconduct the RACS CEO will be informed, to determine whether a mandatory notification is required to medical registration authorities.

SECTION 4: CLINICAL TRAINING AND ASSESSMENT

4.1 Clinical Training Posts

- 4.1.1 Clinical training posts facilitate workplace hands-on service learning and exploration in a range of training environments providing the opportunity for the trainee to develop, with supervision, the requisite experience, knowledge, skills and attributes necessary to become a competent independent specialist neurosurgeon.
- 4.1.2 Clinical training posts are accredited in accordance with the Training Post Accreditation Regulations available on the NSA website at www.nsa.org.au.
- 4.1.3 Each clinical training post has an allocated supervisor, satisfying the requirements in the Training Post Accreditation Regulations.
- 4.1.4 Each training unit has its own profile for patient case mixes, supervision, staffing levels, working requirements for trainees and equipment. The Training Board believes that it is essential for trainees to be exposed to varied working environments during training. For the purposes of these Regulations, a training post involving multiple hospitals is counted as one training unit.
- 4.1.5 At the commencement of the SET Program, trainees will be allocated a Home Region where they will ordinarily spend most of their SET Program if there are available accredited training posts. The Home Regions available are as follows:
- (a) Aotearoa New Zealand
 - (b) Australian Capital Territory
 - (c) New South Wales
 - (d) Northern Territory
 - (e) Queensland (Northern)



Regulations for the Surgical Education and Training Program in Neurosurgery

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



- (f) Queensland (Other)
- (g) South Australia
- (h) Tasmania
- (i) Victoria
- (j) Western Australia

- 4.1.6 Where a trainee is selected to the SET Program applying the Undersubscribed Home Regions special measures outlined in the Selection Regulations, they are not permitted to change their Home Region at any time during their SET Program.
- 4.1.7 Except for trainees in clause 4.1.6, trainees can apply for special consideration in accordance with Regulation 1.11 to change their Home Region.
- 4.1.8 Trainees with a Home Region in Aotearoa New Zealand will undertake up to two full-time equivalent training years of their training in Australia and the remainder, including Advanced Neurosurgical Training, in Aotearoa New Zealand training posts.
- 4.1.9 All trainees will rotate through a minimum of three training units during their SET Program to ensure they receive a wide exposure to systems, supervisors and case mixes.
- 4.1.10 Trainees will ordinarily spend no more than two full-time equivalent training years in any one training unit. Exceptions may be made at the discretion of the Training Board Chair, particularly where the trainee's Home Region has less than three accredited training units.
- 4.1.11 The Training Board approves the allocation of trainees to accredited posts during all clinical training years. Trainees must be prepared to be assigned to a post anywhere in Australia and Aotearoa New Zealand.
- 4.1.12 Trainees are not permitted to swap training post allocations.
- 4.1.13 In exceptional circumstances as determined by the Training Board Chair or nominee, a trainee in Advanced Neurosurgical Training who has completed the minimum training time for Advanced Neurosurgical Training may undertake one or more Clinical Terms without being allocated to an accredited training post.

4.2 Clinical Terms (Professional Performance Assessment)

- 4.2.1 All clinical training terms are approximately three months in duration (**Clinical Terms**). The start and end dates for Clinical Terms will be determined by the Training Board.
- 4.2.2 A Clinical Term is active if the trainee is undertaking clinical training as part of the SET Program. A Clinical Term is inactive if a trainee is on approved interruption as part of the SET Program.
- 4.2.3 Active Clinical Terms are assessed using the Professional Performance Assessment Report (**PPA Report**).
- 4.2.4 For each assessment area within the PPA Report, guidelines of what would be considered the minimum acceptable standard of performance are provided. The guidelines provide some common examples and are not exhaustive. Unsatisfactory performance includes all unethical or improper conduct and also includes honest mistakes, errors of judgement and poor standards in service delivery.



Regulations for the Surgical Education and Training Program in Neurosurgery

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



- 4.2.5 The rating scale within the PPA Report is:
- (a) Fully Satisfied
 - (b) Partly Satisfied
 - (c) Not Satisfied
- 4.2.6 Completion of the PPA Report, on the prescribed form, must be undertaken for each active Clinical Term during each year of training as part of the SET Program.
- 4.2.7 To complete the PPA Report, the supervisor should seek the input from the available Surgical Trainers who have directly worked with the trainee during the Clinical Term, collectively referred to as the Assessors. This is best done in a unit/department meeting. The Assessors may also seek input from any other person who had contact with the trainee during the Clinical Term to inform their assessment (e.g. nurses, allied health staff, administrative staff).
- 4.2.8 Where a conflict of interest (perceived or otherwise) exists, or may exist, or a Surgical Trainer is absent, the Surgical Trainer may be excluded as an Assessor by the supervisor.
- 4.2.9 The rating for each assessment area within the PPA Report must be a majority decision of the Assessors, **not just that of the supervisor personally**. In the event there are an equal number of Assessors, and the assessment decision for any assessment area is split, the supervisor shall have the casting vote.
- 4.2.10 The trainee, the Supervisor and another Assessor should have a meeting to discuss the PPA Report. The PPA Report must be completed prior to the meeting.
- 4.2.11 The Training Board Chair or nominee may attend any meeting relevant to a trainee's performance and prepare notes of the meeting for the training record.
- 4.2.12 If any area of the PPA Report is assessed as Not Satisfied or Partly Satisfied the supervisor should provide examples and suggestions for improvement as discussed by the Assessors, either in the PPA Report itself or in an alternate written form.
- 4.2.13 Trainees are responsible for ensuring that the completed PPA Report is submitted to the Training Board in the prescribed manner by the due date. The PPA Report should be signed by the trainee, the Supervisor, and the head of the unit/department (or nominee if absent).
- 4.2.14 An active Clinical Term will be recorded as **Satisfactory** if each assessment area in the PPA Report is rated as Fully Satisfied.
- 4.2.15 An active Clinical Term will be recorded as **Unsatisfactory** if any assessment area in the PPA Report is rated as Not Satisfied or Partly Satisfied.
- 4.2.16 An active Clinical Term will be recorded as **Unassessed** if the trainee has exceeded the maximum leave entitlement for an active Clinical Term (see clause 1.6.1) or the trainee has applied for and been granted special consideration to not have the active Clinical Term assessed.
- 4.2.17 Where a trainee is subject to any investigations, disciplinary procedures or misconduct procedures, and the outcome has not been determined, the Training Board Chair may determine that the PPA Report for the active Clinical Term be held in abeyance until the outcome of the



Regulations for the Surgical Education and Training Program in Neurosurgery

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



investigations, disciplinary procedures or misconduct procedures are finalised. The active Clinical Term in this circumstance will be recorded as **Pending**. The PPA Report will be due within 14 days of the outcome of the investigations, disciplinary procedures or misconduct procedures having been communicated to the trainee by the conducting body or person.

- 4.2.18 A Performance Improvement Notice (clause 3.2) or an Unsatisfactory Performance Notice (clause 3.3) will be issued for an active Clinical Term if a PPA Report is assessed as Unsatisfactory.
- 4.2.19 If a PPA Report is not submitted by the supervisor, the Training Board Chair may nominate an alternate Surgical Trainer within the training unit to complete the PPA Report provided the Surgical Trainer has had direct supervision of the trainee during the active Clinical Term.
- 4.2.20 The full-time training requirements relating to active Clinical Terms are as follows.

Training Requirements	Training Level
Clinical Term Requirement: Submit quarterly Professional Performance Assessments	Basic, Intermediate and Advanced Neurosurgical Training
Basic Clinical Term Requirement: Satisfactory completion of at least three active Clinical Terms during Basic Neurosurgical Training	Basic Neurosurgical Training
Intermediate Clinical Term Requirement: Satisfactory completion of at least nine active Clinical Terms during Intermediate Neurosurgical Training	Intermediate Neurosurgical Training
Advanced Clinical Term Requirement: Satisfactory completion of at least four active Clinical Terms during Advanced Neurosurgical Training	Advanced Neurosurgical Training

4.3 Operative Experience (Logbook Report)

- 4.3.1 Appropriately supervised operative experience obtained during clinical training, including good case mixes and caseloads, are essential learning opportunities for trainees to acquire the necessary technical skills and expertise to practice as an independent neurosurgical consultant.
- 4.3.2 Trainees must maintain an operative experience log of all procedures that they participate in as part of the SET Program during active Clinical Terms.
- 4.3.3 A logbook summary report (**Logbook Report**) in a format prescribed by the Training Board must be submitted by all trainees at the end of each six-month clinical training period and must be verified by the surgical supervisor as an accurate record.
- 4.3.4 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 trainee must have been involved in the performance of the surgery and the pre- and post-operative management of the patient in the unit in which the accredited training post is located.
- 4.3.5 When completing the Logbook Report the following classifications apply:



Regulations for the Surgical Education and Training Program in Neurosurgery

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



- (a) Primary Surgeon is when the trainee performs all of the principal procedure (eg clipping the aneurysm, removing tumour, inserting both ends VP shunt). There may be an experienced assistant/supervisor scrubbed.
 - (b) Secondary Surgeon is when the trainee performs a significant part of the principal procedure (eg exposure of aneurysm, exposure and part resection of tumour, one end of VP shunt), or performs one of procedures classified as being performed by conjoint surgeons (eg performing laminectomy where conjoint surgeon performs fusion). This would be more than a simple opening/closure of a simple craniotomy/spinal cases.
 - (c) Assistant Surgeon includes basic opening/closure of a routine case performed by another surgeon and other standard surgical assistant tasks.
- 4.3.6 When considering the Logbook Report to determine satisfaction of training requirements in clause 4.3.9, minor and miscellaneous neurosurgical procedures will be excluded from the total major neurosurgical procedures performed.
- 4.3.7 Inaccurate recording of procedures in the Logbook Report may constitute misconduct.
- 4.3.8 The trainee is responsible for ensuring that the Logbook Report is submitted by the due date and that they have adequate records to justify the data in the Logbook Report.
- 4.3.9 The full-time training requirements relating to operative experience are as follows.

Training Requirements	Training Level
Clinical Term Case Requirement: Participation in a minimum of 80 major neurosurgical procedures for each six months while in active Clinical Terms	Basic, Intermediate and Advanced Neurosurgical Training
Basic Case Requirement: Participation in a minimum of 200 major neurosurgical procedures from commencement of the SET Program while in active Clinical Terms	Basic Neurosurgical Training
Intermediate Case Requirement: Participation in a minimum of 1,000 major neurosurgical procedures from commencement of the SET Program while in active Clinical Terms	Intermediate Neurosurgical Training
Advanced Case Requirement: Participation in a minimum of 1,200 major neurosurgical procedures from commencement of the SET Program while in active Clinical Terms	Advanced Neurosurgical Training
Primary Case Requirement: Participation in a minimum 500 major neurosurgical procedures as primary surgeon from commencement of the SET Program while in active Clinical Terms (the cases are included in the overall minimum of 1,200)	Advanced Neurosurgical Training
Paediatric Case Requirement: Participation in a minimum of 50 major paediatric neurosurgical procedures from commencement of the SET Program while in active Clinical Terms (the cases are included in the overall minimum of 1,200)	Advanced Neurosurgical Training

- 4.3.10 A Logbook Report which satisfies the Clinical Term Case Requirement will be recorded as **Satisfactory**.



Regulations for the Surgical Education and Training Program in Neurosurgery

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



- 4.3.11 A Logbook Report which does not satisfy the Clinical Term Case Requirement will be recorded as **Unsatisfactory**.
- 4.3.12 A Performance Improvement Notice (clause 3.2) or an Unsatisfactory Performance Notice (clause 3.3) will be issued if the Clinical Term Case Requirement is Unsatisfactory.

4.4 Direct Observation of Procedural Skills Assessments

- 4.4.1 The Neurosurgical Direct Observation of Procedural Skills Assessments (**DOPS**) are designed to assess both knowledge and technical proficiency in discrete procedural skills. The procedure must be performed by the trainee and observed by a Surgical Supervisor or Surgical Trainer approved by the Training Board (**Assessor**).
- 4.4.2 The Assessor must have supervised the trainee undertaking the procedure on multiple occasions. Where the Assessor is not the Surgical Supervisor, the Surgical Supervisor must also sign the DOPS form to confirm they are confident with the assessment completed by the Assessor.
- 4.4.3 The trainee should initiate a DOPS when they feel they have a reasonable chance of demonstrating safe and efficient independent practice.
- 4.4.4 The Assessor, in completing the DOPS, is confirming that the trainee can perform all the principal procedure independently and in a consistently safe and effective manner based on their direct observations of the trainee performing the procedure.
- 4.4.5 The Type 1 DOPS procedures are as follows:

Type 1 DOPS
Acute Subdural Haematoma
Chronic Subdural Haematoma – Burr Hole or Craniotomy
External Ventricular Drain
Opening and closing a pterional craniotomy

- 4.4.6 The Type 2 DOPS procedures are as follows:

Type 2 DOPS
Anterior cervical discectomy and fusion
Carpal Tunnel Decompression
Cerebral Abscess Aspiration or Excision
Excision of Cerebral Metastasis
Extradural Haematoma
High Grade Glioma
Intracerebral Haemorrhage Evacuation
Lumbar Laminectomy for Canal Stenosis



Regulations for the Surgical Education and Training Program in Neurosurgery

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



Lumbar Microdiscectomy
Spinal Abscess or Tumour
Ventriculo-Peritoneal Shunt (insertion or revision)
Stereotactic Needle Biopsy

4.4.7 The Type 3 DOPS procedures are as follows:

Type 3 DOPS
Craniotomy and Clipping of Anterior Circulation Aneurysm
Meningioma resection involving sphenoid wing or venous sinus
Pituitary Tumour – Trans-sphenoidal resection
Posterior Fossa / Skull Base Tumour
Posterior Fossa Decompression/Chiari Decompression
Spinal Cord Tumour
Spinal Fusion: Posterior – Instrumented
Trigeminal Microvascular Decompression
Ulnar Neurolysis
Cerebral angiography or endovascular procedure

4.4.8 The SET Program training requirements are as follows:

Training Requirements	Training Level
Basic DOPS Requirement: Be assessed by one Assessor as having satisfied each Type 1 DOPS procedure	Basic Neurosurgical Training
Intermediate DOPS Requirement: Be assessed by two different Assessors as having satisfied each Type 1 and Type 2 DOPS procedure (including those submitted during Basic Neurosurgical Training)	Intermediate Neurosurgical Training
Advanced DOPS Requirement: Be assessed by one Assessor as having satisfied any five of the Type 3 DOPS procedures (including those submitted during Basic and Intermediate Neurosurgical Training)	Advanced Neurosurgical Training

4.4.9 Any DOPS form can be submitted to the Training Board at any time during the SET Program. The DOPS will only be assessed as satisfied if:

- The DOPS is related to the performance of the procedure during an active Clinical Term;
- The DOPS form has been signed by the Assessor;
- The date the procedure was last observed by the Assessor is recorded on the DOPS form;
- The DOPS form is submitted to the Training Board by the trainee within 14 days of the date the procedure was last observed by the Assessor as recorded on the DOPS form; and



Regulations for the Surgical Education and Training Program in Neurosurgery

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



- (e) Where the Assessor is not the Surgical Supervisor, and the Surgical Supervisor has signed the DOPS form to confirm that they are confident with the assessment completed by the Assessor.

SECTION 5: RESEARCH TRAINING AND ASSESSMENT

5.1 Research Requirement

5.1.1 The SET Program training requirements are as follows:

Training Requirements	Training Level
Research Project Requirement: Satisfactorily complete an approved supervised research project	Intermediate Neurosurgical Training
Research Presentation Requirement: Satisfactorily complete an approved research presentation	Intermediate Neurosurgical Training
Research Publication Requirement: Have a publication from the supervised research project in an approved journal	Advanced Neurosurgical Training

5.1.2 Recognition of prior learning for the research requirements may be considered in accordance with clause 8.

5.2 Research Project Requirement

5.2.1 The Research Project Requirement must be completed during Basic and/or Intermediate Neurosurgical Training.

5.2.2 It is the responsibility of the trainee to make all applicable arrangements for their supervised research project and to obtain the prior approval of the Research Committee who have the delegated authority of the Training Board to assess this training requirement applying their discretion in accordance with these Regulations.

5.2.3 The research project must:

- (a) be achievable during Intermediate Neurosurgical Training;
- (b) be supervised by an appropriately qualified consultant or researcher;
- (c) be a substantive project relevant to neurosurgery with the potential for a meaningful outcome;
- (d) be likely to result in a publication which satisfies the requirements in clause 5.4; and
- (e) the role of the trainee in the project must be significant.

5.2.4 For approval of the research project trainees will be required to submit a written research proposal, on the prescribed form, during Basic Neurosurgical Training or their first year of Intermediate Neurosurgical Training. Trainees will be required to present the proposal orally to the Research Committee if requested. Due dates for proposals will be as advised by the Training Board.

5.2.5 Trainees will be required to provide oral progress reports to the Research Committee, if requested, at any time during the research project.



Regulations for the Surgical Education and Training Program in Neurosurgery

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



- 5.2.6 For approval of successful completion of the research project trainees will be required to submit a written research completion report, on the prescribed form, together with a copy of the manuscript which must have been submitted for publication (it is not a requirement that it be accepted at that time). Trainees will be required to present the completion report orally to the Research Committee if requested. Due dates for completion reports will be as advised by the Training Board.
- 5.2.7 Trainees must obtain approval of the research proposal and research completion report from their research supervisor, prior to submission to the Research Committee. Research supervisors may be contacted to verify their prior approval and to provide additional information at the discretion of the Research Committee.
- 5.2.8 During oral presentations, the Research Committee will ask questions to assist them in determining the approval or rejection of the research proposal or research completion report and to assist trainees in their progression with their research project.
- 5.2.9 Trainees must undertake the research project approved by the Research Committee. Any modifications, including changes in supervisors, institutions, or the research project must be approved by the Research Committee by way of a revised research proposal using the prescribed form.

5.3 Research Presentation Requirement

- 5.3.1 The Research Presentation Requirement must be completed during Intermediate Neurosurgical Training.
- 5.3.2 Trainees must present an oral presentation (excluding poster side presentations) of the research findings from the supervised research project approved in accordance with clause 5.2 at the NSA Annual Scientific Meeting or at an alternative national or international meeting, approved by the Research Committee, which is subject to competitive abstract selection.
- 5.3.3 For the approval of the completion of the Research Presentation Requirement, a letter or certificate from the meeting organisers at which the presentation was given must be submitted. The letter or certificate must confirm the trainee personally presented the paper and the title and details of the same.

5.4 Research Publication Requirement

- 5.4.1 The Research Publication Requirement must be completed prior to or during Advanced Neurosurgical Training. It is a condition to apply for and present for the Fellowship Examination that the Research Publication Requirement be approved as completed.
- 5.4.2 Trainees must have one neurosurgical publication (not a case report or abstract) based on the research findings from the supervised research project approved in accordance with clause 5.2. The publication must be as primary author.
- 5.4.3 The publication must be in a journal with a SCImago Journal Rank in quartiles 1 to 3 in the subject area of Medicine or Neuroscience (<https://www.scimagojr.com/journalrank.php>) unless otherwise approved by the Research Committee. The quartile ranking is at the time of acceptance



Regulations for the Surgical Education and Training Program in Neurosurgery

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



for publication or the most recent published at the time of application to the Research Committee.

- 5.4.4 For the approval of the completion of the Research Publication Requirement, the trainee must provide a pdf copy of the published article, showing full bibliographic details. For manuscripts which are accepted for publication, but not yet published, the trainee must provide the publisher's proof of acceptance and the publisher's pdf proof of the article.

SECTION 6: COURSES AND SEMINARS

6.1 Compulsory Courses and Seminars

- 6.1.1 The SET Program training requirements are as follows:

Training Requirement	Training Level
CCrISP® Requirement: Satisfactorily complete the Care of the Critically Ill Surgical Patient Course	Basic Neurosurgical Training
EMST Requirement: Satisfactorily complete the Early Management of Severe Trauma Course	Intermediate Neurosurgical Training
Training Seminar Requirement: Satisfactorily participate in all scheduled Training Seminars while undertaking active Clinical Terms as part of the SET Program	Basic, Intermediate and Advanced Neurosurgical Training

6.2 Courses

- 6.2.1 The CCrISP® Requirement must be completed prior to or during Basic Neurosurgical Training.
- 6.2.2 The EMST Requirement must be completed prior to or during Intermediate Neurosurgical Training.
- 6.2.3 Trainees are advised to register as soon as is practical after selection to the SET Program. Registration and delivery of the courses are managed by the RACS with a fee charged.
- 6.2.4 Recognition of prior learning for the courses may be considered in accordance with clause 8.

6.3 Training Seminars

- 6.3.1 The Training Seminar Requirement requires all trainees to satisfactorily participate in all scheduled Training Seminars while undertaking active Clinical Terms as part of the SET Program.
- 6.3.2 Trainees can apply for special consideration in accordance with clause 1.11 if they are unable to attend a Training Seminar, or part thereof.
- 6.3.3 The Training Seminar topics, include but are not limited to:
 - (a) Spinal Surgery
 - (b) Neurovascular
 - (c) Neurotrauma
 - (d) Paediatric Neurosurgery



Regulations for the Surgical Education and Training Program in Neurosurgery

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



- (e) Functional Neurosurgery
 - (f) Skull Base Surgery
 - (g) Neuro-oncology
 - (h) Professional Skills
- 6.3.4 Expenses incurred in attending the Training Seminars are the responsibility of the trainee. Trainees are responsible for their own accommodation and travel arrangements. A fee may be charged by the NSA as the organiser.
- 6.3.5 Trainees may be required to submit presentations or abstracts for Training Seminars. All submissions must be received prior to the due date in the format requested.
- 6.3.6 The Training Seminar Requirement for each Training Seminar held will be recorded as **Unsatisfactory** if:
- (a) the trainee does not attend the Training Seminar or part thereof without special consideration being granted; or
 - (b) the trainee does not present at the Training Seminar if requested; or
 - (c) the trainee does not submit the presentation and/or abstract by the due date if requested; or
 - (d) the trainee does not present for an examination held as part of the Training Seminar as required; or
 - (e) the trainee does not pay the fee for attendance (if required); or
 - (f) attendance at the Training Seminar was deemed unsatisfactory by the Training Board Chair or nominee.
- 6.3.7 A Performance Improvement Notice (clause 3.2) or an Unsatisfactory Performance Notice (clause 3.3) will be issued if the Training Seminar Requirement is Unsatisfactory.

SECTION 7: EXAMINATIONS

7.1 Fellowship Examination

- 7.1.1 The Fellowship Examination in Neurosurgery (**Fellowship Examination**) is a summative assessment which must be satisfactorily completed during Advanced Neurosurgical Training.
- 7.1.2 The Fellowship Examination is comprised of written and clinical/viva components as determined by the RACS Court of Examiners for Neurosurgery.
- 7.1.3 The required standard for the Fellowship Examination is a level of competency equivalent to that of a consultant neurosurgeon in his or her first year of independent practice. The surgical competencies espoused by the RACS are used as a guideline for the examiners, who follow agreed marking guidelines and the predetermined standard.
- 7.1.4 The Fellowship Examination reflects the SET Program curriculum.
- 7.1.5 Registration and delivery of the Fellowship Examination is managed by the RACS, with a fee charged. There are strict closing dates, with full details available on the RACS website www.surgeons.org.



Regulations for the Surgical Education and Training Program in Neurosurgery

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



- 7.1.6 To be eligible to apply for and present for the Fellowship Examination, the trainee:
- (a) must be in Advanced Neurosurgical Training or eligible to progress to Advanced Neurosurgical Training; and
 - (b) must have satisfactorily completed the Research Publication Requirement; and
 - (c) must have been assessed as Satisfactory in the two active Clinical Terms immediately prior; and
 - (d) must not have an active Performance Improvement Notice; and
 - (e) must satisfy any condition in an Unsatisfactory Performance Notice applicable to eligibility to present for the Fellowship Examination by the due date; and
 - (f) must not be on a period of interruption; and
 - (g) must not be suspended; and
 - (h) must not be subject to Misconduct Procedures; and
 - (i) must not be the subject of Dismissal Procedures; and
 - (j) must satisfy any conditions set forth by the RACS.

7.2 Practice Examination

- 7.2.1 A Practice Examination will be held annually. Participation in the Practice Examination will form part of the Training Seminar Requirement.
- 7.2.2 The Practice Examination will be a single written paper, based on questions taken or adapted from previous Fellowship Examination papers.
- 7.2.3 The Practice Examination is formative, so there is no minimum pass mark required as part of the SET Program. This is designed to assist trainees in their preparation for the Fellowship Examination by providing feedback on strengths and weaknesses in their responses.
- 7.2.4 The Practice Examination will be held at such a time and place, and under such conditions, as determined by the Board. This will usually be during a Training Seminar and will run for 120 minutes with the paper consisting of two essay questions and one short answer question.
- 7.2.5 The Practice Examination must be attempted by trainees in their third or later years of Intermediate Neurosurgical Training, and trainees in Advanced Neurosurgical Training who have not satisfactorily completed the Fellowship Examination.
- 7.2.6 Answers will be reviewed and comments sent to the trainees and their supervisor within 60 days of completion of the Practice Examination to assist them in their preparation for the Fellowship Examination and determination of preparedness to present for the Fellowship Examination.

7.3 Anatomy Examination

- 7.3.1 An Anatomy Examination will be held during each Training Seminar. Participation in the Anatomy Examination will form part of the Training Seminar Requirement.
- 7.3.2 The Anatomy Examination is formative, so there is no minimum pass mark required as part of the SET Program. It is designed to assist trainees in ensuring that their basic science knowledge relevant to neurosurgery is maintained throughout training and to help trainees and supervisors identify a trainee's strengths and weaknesses and target areas for improvement.



Regulations for the Surgical Education and Training Program in Neurosurgery

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



- 7.3.3 The Anatomy Examination must be attempted by all trainees except those who have successfully completed the Fellowship Examination or are presenting for the Practice Examination in clause 7.2 during the Training Seminar.
- 7.3.4 The Anatomy Examination will be held at such a time and place, and under such conditions, as determined by the Board. It will usually consist of 30 questions over 50 minutes.
- 7.3.5 Results will be sent to the trainees and their supervisor within 30 days of completion.

SECTION 8: RECOGNITION OF PRIOR LEARNING

8.1 Introduction

- 8.1.1 Recognition of prior learning (**RPL**) involves the assessment of prior training or experience obtained which is comparable to components of the SET Program. The principle of RPL is to avoid unnecessary duplication of training and experience which is equivalent to that delivered within the SET Program.
- 8.1.2 There is no automatic entitlement to RPL. Applications must be made in writing to the Training Board Chair.
- 8.1.3 Approval of RPL is at the discretion of the Training Board Chair or nominee. The trainee will be notified in writing of the outcome of their RPL application.

8.2 Compulsory Examinations

- 8.2.1 Trainees will not be granted RPL for the Fellowship Examination.

8.3 Compulsory Courses

- 8.3.1 Trainees who have satisfactorily completed the CCrISP® Course, or a RACS recognised equivalent, may be eligible for RPL for this training requirement.
- 8.3.2 Trainees who have satisfactorily completed the EMST Course, or a RACS recognised equivalent, may be eligible for RPL for this training requirement.
- 8.3.3 Trainees will not be granted RPL for the Training Seminar Requirement.

8.4 Research Requirements

- 8.4.1 Trainees who have satisfactorily completed a research project relevant to neurosurgery resulting in a presentation and publication which satisfies the research requirements as determined by the NSA Research Committee in their discretion may be eligible for RPL for:
 - (a) the Research Project Requirement (see clause 5.2)
 - (b) the Research Presentation Requirement (see clause 5.3)
 - (c) the Research Publication Requirement (see clause 5.4)
- 8.4.2 No other research RPL will be granted.



Regulations for the Surgical Education and Training Program in Neurosurgery

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



8.5 Clinical Terms, Operative Experience and DOPS Requirements

8.5.1 Trainees will not be granted RPL for Clinical Terms, operative experience and DOPS training requirements except as provided for in clause 8.6.

8.6 Surgeon Scientist Pathway

8.6.1 The Surgeon-Scientist Pathway (**Pathway**) for RPL is open to trainees who have a genuine desire to undertake a neurosurgical research-focused Doctor of Philosophy (**PhD**) while on a period of interruption from the SET Program.

8.6.2 The Pathway is available for up to three years (full time equivalent) while on Training Board approved interruption, undertaking a PhD.

8.6.3 Trainees approved for the Pathway may receive RPL for two full time equivalent Clinical Terms as part of the SET Program and RPL for operative cases completed during the Pathway on successful completion of the Pathway.

8.6.4 Once interruption of training has been granted by the Training Board (see clause 1.8) trainees must apply for the Pathway using the prescribed form prior to the commencement of their interruption and PhD.

8.6.5 To be approved for the Pathway, trainees must satisfy the conditions outlined in these Regulations. Approval is at the discretion of the Training Board Chair.

8.6.6 The trainee must secure employment at a hospital with an accredited training post for the SET Program. This will not be employment in a SET accredited post and as such the Training Board is unable to assist with this employment process.

8.6.7 The SET Program supervisor at the hospital must agree to provide supervision of the clinical and educational activities required while on the Pathway, and completion of the required assessments.

8.6.8 The employment secured by the trainee must cover the full period of interruption and PhD and include participation at the hospital in the following as a minimum:

- (a) One neurosurgical clinic per fortnight
- (b) One half day operating list per week (not private assisting)
- (c) One ward round per week with a consultant neurosurgeon
- (d) One postoperative ward round per week
- (e) A minimum of 1:5 after hours on-call
- (f) One weekly consultant led tutorial
- (g) One monthly neuropathology session
- (h) One weekly neuro-radiology session
- (i) One monthly Journal Club meeting

8.6.9 For all Clinical Terms while on the Pathway the trainee must satisfy the:

- (a) Clinical Term Requirement; and
- (b) Training Seminar Requirement.



Regulations for the Surgical Education and Training Program in Neurosurgery

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



-
- 8.6.10 The trainee must submit the Logbook Report as required six monthly while on the Pathway. The case load requirements will not be applicable. Any operative cases completed while on the Pathway may be accredited as part of the SET Program on completion of the Pathway.
- 8.6.11 To be eligible for RPL, the trainee must have successfully completed the Pathway, which requires the trainee to:
- (a) Complete the PhD which means the university must confirm all academic requirements for the award have been completed; and
 - (b) Have satisfied all the clinical and educational requirements as outlined in these Regulations while undertaking the approved Pathway.
- 8.6.12 There is no RPL available if a trainee does not complete the Pathway in full as required in clause 8.6.11.