


AOA ACCREDITED FELLOWSHIPS POLICY

Ref No: FC002

Review Date: March 2025
Date Developed: March 2022
Principal Responsibility: Chair, Fellowships Committee
Validated: AOA Board of Directors

Authorised by:	Title: CEO	Name: Adrian Cosenza	Signature/date  March 2022
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OUTCOME:

All AOA Accredited Fellowship Programs will be accredited and managed in accordance with this Policy.

PREAMBLE

The aim of AOA accredited fellowship programs is to provide orthopaedic surgeons with supervised short-term training in a specific aspect of orthopaedic surgery. The main objective is to allow surgeons to develop their surgical skills in a subspecialty through a work-based surgical fellowship program provided by a chief supervisor/hospital.

Australian fellowship programs also provide opportunities for Specialist International Medical Graduates (SIMGs) to improve their professional skills and gain experience not available within their country of training.

AOA's accreditation process provides a voluntary service to AOA members and Fellows, by ensuring that the highest standard of training available in AOA accredited fellowship programs is offered throughout Australia.

The process works towards meeting the increasing number of requests for AOA validation of sub-specialty training fellowship programs by external bodies, including health care institutions, medical boards, medical industry, government agencies and overseas institutions. Further, the process aims to minimise the impact of an AOA accredited fellowship program on AOA 21 trainees by ensuring that these programs do not detrimentally impact their surgical and professional experience.

Fellowship programs are not formalised surgical training programs. Any experience gained during these fellowship programs may not be accredited to the AOA 21 training program. Further, the AOA fellowships portfolio should attempt to finance itself on a cost incurred basis.

AOA's fellowship accreditation process is independent of the RACS accreditation process.

DEFINITIONS

AOA is the Australian Orthopaedic Association.

Fellowships Committee consists of AOA members appointed by the Board as per their Terms of Reference.

A Fellowship Program is a sub-specialty training program in orthopaedics.

Accreditation is the process in which the Australian Orthopaedic Association certifies Fellowship Programs.

Fellow is the individual selected to participate in the sub-specialty training in the Fellowship Program.

Chief Supervisor is the individual primarily responsible for the Fellowship Program and the Fellow.

Supervisor assists the Chief Supervisor with day-to-day supervision of the Fellow.

Institution is the site at which the Fellowship Program will be held (e.g. hospital, private practice entity). There may be a number of institutions that are associated with the Fellowship Program.

AOA 21 is the Surgical Education and Training Program in orthopaedic surgery.

RTC is the Regional Training Committee responsible for overseeing AOA 21 trainees in their training region.

RACS is the Royal Australasian College of Surgeons.

CPD is Continuing Professional Development.

SIMG is a Specialist International Medical Graduate.

POLICY

1. Minimum Accreditation Requirements
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1. MINIMUM ACCREDITATION REQUIREMENTS

- 1.1. The Fellowship Program must be in a sub-specialty area relevant to orthopaedics and must be focused on the acquisition of specialist skills, experience and knowledge **beyond** that delivered in an accredited surgical orthopaedic training program.
- 1.2. The Fellowship Program will include clinical, laboratory or comparable basic science research in a sub-specialty relevant to orthopaedics. Facilities must be available to enable such research to be undertaken by participants.
- 1.3. Evidence must be provided to demonstrate that the primary institution supports the accreditation of the sub-specialty Fellowship Program.
- 1.4. A Chief Supervisor, responsible for both the Fellowship Program and the Fellow, must be allocated to the Fellowship Program.
- 1.5. Chief Supervisors of the Fellowship Programs within institutions with AOA 21 trainees must demonstrate that the Fellowship Program will not impact on access to the training experience, education and operative competence-based training of these trainees. This must be agreed to by the RTC.
- 1.6. The minimum tenure of the Fellowship Program must be six (6) months.
- 1.7. The Fellowship Program must include supervision. The position **must not** be a consultant position.
- 1.8. Fellows must not be used as substitutes for consultants on-call unless they are Australian and New Zealand Fellows who hold a FRACS (Orth), have specialist registration and have agreed to this prior to commencing the Fellowship Program. All other Fellows are able to contribute to the work of the institution by covering on-call at the level of a registrar.
- 1.9. Fellows must not be regularly rostered on-call unless it is directly relevant to the specialty of the proposed Fellowship Program.
- 1.10. Fellows must be employed under a contract by the primary institution with appropriate remuneration in place. It is not expected that a participant will be directly employed by a single surgeon.

2. APPLICATION PROCEDURE

- 2.1. Applications for accreditation can be made online at any time of year on the AOA website. Only complete applications will be processed.
- 2.2. A fee is payable to the AOA at the time of the application. This application fee is per AOA Accredited Fellowship Program and is non-refundable.
- 2.3. The application will be assessed against the requirements outlined in this policy which may change from time to time.
- 2.4. Applications will first be sent to the local RTC Chair to assess training impact and to consider whether the application is supported by the RTC.
- 2.5. The RTC may decline to support the application if there is significant impact to AOA 21 trainees or if there is local knowledge to suggest the proposed

Fellowship Program is not of a sufficient standard.

- 2.6. AORA state representatives will be consulted to seek feedback from registrars at AOA accredited training sites to assist with determining the impact of a fellowship on trainees.
- 2.7. Following the RTC, the application will be sent for assessment by the AOA Fellowships Committee. Meetings of the AOA Fellowships Committee occur quarterly, or as required.
- 2.8. The AOA Fellowships Committee makes a decision regarding the accreditation of the Fellowship Program.
- 2.9. In special circumstances and on a temporary basis the AOA Fellowships Committee Chair may accredit a Fellowship Program prior to the subsequent meeting of the AOA Fellowships Committee.
- 2.10. Where accreditation is granted, the initial accreditation validity period will be for between three (3) to five (5) years.
- 2.11. Once approved, a summary of the AOA Accredited Fellowship Program will be listed on the AOA website.
- 2.12. A certificate of AOA Fellowship Program Accreditation will be generated and sent to the supervising surgeon.
- 2.13. The AOA Fellowships Committee should make enquiries or obtain advice in order to assist it to come to a decision regarding the accreditation of a Fellowship Program.
- 2.14. Each AOA Accredited Fellowship Program covers **one** participant position only. If an additional position is proposed, a separate application for accreditation must be submitted and a separate application fee is payable to the AOA.
- 2.15. Should the Chief Supervisor already have an AOA Accredited Fellowship Program, the AOA Fellowships Committee will take into consideration the number of Supervisors associated with each AOA Accredited Fellowship Program and the ability to appropriately supervise each Fellow.
- 2.16. Chief Supervisors with two (2) AOA accredited fellowship programs, seeking to apply for a third or more, must provide a copies of all existing and proposed fellowship program timetables and a statement to outline supervision arrangements.
- 2.17. Additional Fellows cannot be appointed to a single AOA Accredited Fellowship Program except for brief periods of time of up to 2 months.
- 2.18. If the Fellowship Program is not approved for accreditation by the AOA Fellowships Committee the applicant may appeal the decision in accordance with the AOA Reconsideration, Review & Appeals Policy.

3. ADVERTISEMENT OF FELLOWSHIP PROGRAMS

- 3.1. The Chief Supervisor or employing institution may advertise the Fellowship Program as AOA accredited when formal correspondence has been received

from AOA indicating that the Fellowship Program has been accredited.

- 3.2. A directory of AOA Accredited Fellowship Programs is available on the AOA website. It is the responsibility of the Chief Supervisor to periodically check the accuracy of the Fellowship program information on the website and to advise the AOA Fellowships Officer if changes are required.
- 3.3. The AOA logo may be used in the promotion of an AOA Accredited Fellowship Program.
- 3.4. Fellowship Program documents may include the following statement: 'This Fellowship Program is accredited by the Australian Orthopaedic Association'.
- 3.5. AOA publications will advertise Australian fellowship programs, and will distinguish between AOA accredited and non-accredited programs in advertisements.

4. FINANCING OF FELLOWSHIP PROGRAMS

- 4.1. AOA is not responsible for any payments to be made to the Fellow as part of an AOA Accredited Fellowship Program or the contractual arrangements between the Fellow and Institution. This is a matter for the Fellow and Institution.
- 4.2. Funding of an AOA Accredited Fellowship Program must be in a manner that is accountable, transparent, and that will withstand public scrutiny.
- 4.3. A **base salary** package of \$70,000 per annum, before tax, has been deemed an appropriate **minimum** for the participant when funding is based in Australia. This amount is to be indexed annually according to CPI and may include accommodation, assisting and leave entitlements.
- 4.4. Funding may be provided to the participant by their home country or institution.
- 4.5. Salary may include payments in the form of assistant's fees (from Medicare directly to the Fellow), on-call fees, payments from institutions and grants from industry, as permitted by the extent or nature of registration provided by the Medical Board of Australia.
- 4.6. Where fees from assisting (including those generated under Medicare) are not paid to the participant and are instead assigned to a third party, contracts of employment must specify the arrangements concerning the assignment of such fees with a clear explanation given to the participant.
- 4.7. Excess funds may, at the Chief Supervisor's discretion, be applied to accountable Fellow's research expenses, attendance at scientific meetings and other activities associated with the Fellowship Program.
- 4.8. By seeking accreditation Chief Supervisors agree to provide appropriate financial information regarding the Fellowship Program on the request of the Fellowships Committee.
- 4.9. **Total industry contributions** for an individual Fellowship Program should not exceed \$90,000 per annum. This amount may be reviewed from time to time. It is expected that AOA Accredited Fellowship Programs do not solely rely on

grants from industry.

- 4.10. Industry bodies must not pay Fellows directly.
- 4.11. Industry support for Fellowship Programs must be funded through a third party to ensure 'arm's length' administration. Such third parties may include: the AOA, universities, research institutions and foundations, philanthropic associations, public and private hospitals or other organisations associated with the provision of health care.
- 4.12. In cases where industry contributions are utilised, Chief Supervisors, Supervisors and Fellows agree to abide by the AOA Code of Conduct and Position Statement on Interaction with Medical Industry.
- 4.13. There is to be no link between industry funding and obligatory use of industry products.
- 4.14. Industry funding must be in accordance with the regulations outlined by the Medical Technology Association of Australia (MTAA) Code of Practice or its equivalent including the Australian Consensus Framework for Ethical Collaboration in the Healthcare Sector. Contributions made through AOA will only be accepted from a company that has subscribed to an industry code of practice and that code of practice undertakes regular auditing of its members.

5. REPORTING PROCEDURES

- 5.1. At the conclusion of the Fellowship Program the Fellow and Chief Supervisor must submit reports in the format available on the AOA website. These reports will be forwarded to the AOA Fellowships Committee for consideration.
- 5.2. Upon receipt of satisfactory reports, and provided these reports acknowledge successful completion of the Fellowship Program, the AOA will issue the Fellow a Certificate of Completion.
- 5.3. Both reports must be submitted in order for a Certificate of Completion to be issued to the Fellow.
- 5.4. Ongoing accreditation of the Fellowship Program will be conditional on the timely receipt of these reports.
- 5.5. Upon the request of medical device companies or Chief Supervisor, AOA will disclose Fellow and Supervisor Reports for the benefit of validation of financial support and ongoing educational and clinical purposes.

6. RENEWAL OF ACCREDITATION

- 6.1. An annual service fee is to be levied by AOA for each AOA Accredited Fellowship Program position for ongoing costs related to administration, such as the recording of data, processing of reports and the compilation and maintenance of the directory of these Fellowship Programs on the website. This fee must be paid by 1 July each year.
- 6.2. Chief supervisors will be notified 6 months prior to the expiration of their Fellowship Program's accreditation. It is the Chief supervisor's responsibility to ensure that the appropriate re-accreditation paperwork is submitted on time to avoid removal of accreditation.

- 6.3. Renewal of the AOA accredited Fellowship Program will be subject to the AOA Accredited Fellowships Policy as amended from time to time.
- 6.4. Where an issue of sufficient concern is identified within the Fellowship Program, the AOA Fellowships Committee Chair may convene an AOA Accredited Fellowships Review Committee to review these concerns. Refer to Annex 1.
- 6.5. It is understood that Fellowship Programs may remain vacant on some occasions. However, if the Fellowship Program remains vacant for 24 months, ongoing approval shall not be granted unless there are extenuating circumstances.

7. CHANGES TO AN AOA ACCREDITED FELLOWSHIP PROGRAM

- 7.1. The Chief Supervisor is required to complete a 'Change in Circumstance Form' highlighting the changes, and submit this to AOA. These changes include but are not limited to:
 - 7.1.1. Change in Chief Supervisor
 - 7.1.2. Change in primary institution
 - 7.1.3. The addition of hospital sites
 - 7.1.4. Change in funding arrangements
 - 7.1.5. Change to the timetable and/or Fellowship Program description
- 7.2. In the first instance the AOA Fellowships Committee Chair will review all changes made to the Fellowship Program in consultation with the local RTC and may request additional documentation to support these changes.
- 7.3. Once the changes have been reviewed, the Chair will make the following recommendations:
 - a) If the changes are minor, the Fellowship Program will continue with the changes taking effect immediately.
 - b) If the changes are major the chief supervisor will need to reapply for accreditation and be assessed by the Fellowships Committee.

8. SUPERVISION OF AN AOA ACCREDITED FELLOWSHIP PROGRAM

- 8.1. **Chief Supervisor Responsibilities**
 - 8.1.1. The Chief Supervisor is the individual primarily responsible for the Fellowship Program and participant.
 - 8.1.2. The Chief Supervisor has a responsibility to:

- a) Take full responsibility for the Fellowship Program and supervision of the Fellow.
- b) Select and appoint the Fellow in accordance with the AOA Code of Conduct for Members.
- c) Coordination of the provision of the Fellowship Program at the relevant sites, including:
 - Orientation for each Fellow on rotation to each of the institutions listed in the Fellowship Program.
 - Coordination of the provision of appropriate facilities for clinical, laboratory or comparable basic research.
 - Ensuring the availability of opportunities for the participant to engage in research.
- d) Be regularly available to the Fellow.
- e) Provide regular instruction and feedback to the participant.
- f) Gauge the appropriate level of supervision required for the Fellow.
- g) Ensure that the Fellow has the appropriate credentials in order to work at the institution(s).
- h) Be readily available to provide direct supervision to the Fellow when needed.
- i) Be readily available to the Fellow and the patient and be prepared to take over the provision of patient care if/as needed.
- j) Be prepared to discharge supervisor duties as per the AHPRA guidelines.
- k) Ensure that SIMGs are processed on the correct Visa, 407 (Training) Visa, unless otherwise specified/approved.
- l) Notify AOA of any changes to the Fellowship Program as outlined in section 7 of this policy.
- m) Complete the required 'Supervisor's Report' within two weeks of completion of the Fellow's tenure.
- n) Act in accordance with the *AOA Code of Conduct for Members*.
- o) Abide by the *AOA Position Statement: Interaction with Medical Industry*.

8.2. Eligibility for appointment

8.2.1. Chief supervisor

The Chief Supervisor must:

- a) Must have passed the Royal Australasian College of Surgeons Fellowships Examination in Orthopaedics.
- b) Be a financial member in good standing of the AOA (FAOrthA).
- c) Have at least 5 years of specialist orthopaedic surgeon experience with sufficient post-specialty training experience in the Fellowship subspecialty area.
- d) Have current Australian medical registration as a specialist orthopaedic surgeon.
- e) Have full evidence of their CPD compliance for the preceding year and must continue to maintain this. Failure to maintain CPD compliance will jeopardise the accreditation of the Fellowship Program.
- f) If arthroplasty is performed in the Fellowship Program, the Chief Supervisor must participate in the AOA National Joint Replacement Registry.
- g) Be on staff at all institutions that are affiliated with the fellowship program.
- h) Disclose as a potential conflict of interest, at any scientific meeting or at any AOA business or committee meeting whether or not the Chief Supervisor is presenting, that the Fellowship Program receives industry support.
- i) Have evidence of membership in a national or international surgical or medical association. This includes but is not limited to being an active member of an AOA associate specialist society.
- j) Be an active contributor to orthopaedic science research, publication or presentation activity. For example
 - Have a publication in a peer reviewed journal within the last 5 years, or a contributor to an AOA ASM or COE within the last 5 years.
 - Be a current member of the editorial board of an international peer reviewed orthopaedic journal.

8.3. Supervisor's Responsibilities

- 8.3.1. Other Supervisors may be associated with the Fellowship Program to assist with the day-to-day supervision of the Fellow.
- 8.3.2. Supervisors have a responsibility to:
 - a) Conduct day-to-day supervision and training of the Fellow as delegated by the chief supervisor.

- b) Be regularly available to the Fellow.
- c) Be readily available to provide direct supervision to the Fellow when needed and where appropriate.
- d) Be readily available to the Fellow and the patient and be prepared to take over the provision of patient care if/as needed.
- e) Provide instruction and feedback to the Fellow.
- f) If a local fellow in their 'Transition to Practice' phase of training is selected, the supervisor must assist and provide regular feedback, where appropriate, to the fellow to meet the AOA 21 'Transition to Practice' Criteria.
- g) Meet with the Chief Supervisor to discuss the performance of the Fellow.
- h) Disclose as a potential conflict of interest, at any scientific meeting or at any AOA business or committee meeting whether or not the Chief Supervisor is presenting, that the Fellowship Program receives industry support.
- i) Act in accordance with the *AOA Code of Conduct for Members*.
- j) Abide by the *AOA Position Statement: Interaction with Medical Industry*.

The Supervisor must:

- a) Must have passed the Royal Australasian College of Surgeons Fellowships Exam in Orthopaedics.
- b) Be a Fellow in good standing of the AOA (FAOrthA).
- c) Have at least 5 years of specialist experience and training experience in the fellowship subspecialty area.
- d) Have current Australian medical registration as an orthopaedic surgeon.
- e) Have full evidence of their CPD compliance for the preceding year and must continue to maintain this. Failure to maintain CPD compliance will jeopardise accreditation of the Fellowship Program.
- f) If arthroplasty is performed in the Fellowship Program, the Supervisor is required to participate in the AOA National Joint Replacement Registry.

9. FELLOWS

9.1. Eligibility for appointment local fellows

Successful candidates will be notified of their appointment by the Chief Supervisor of the Fellowship Program.

Applicants who wish to participate in a Fellowship Program should:

- 9.1.1. Hold a Fellowship of the Royal Australasian College of Surgeons (FRACS) in orthopaedic surgery, or
- 9.1.2. Be in the AOA 21 Training Program '*Transition to Practice*' stage of training and continue to follow the [AOA 21 Training Program](#) requirements as per their signed agreement at their commencement of training.
- 9.1.3. Only participate in accredited Fellowship Programs for a maximum of **two** years.

9.2. Eligibility for appointment Specialist International Medical Graduates

Successful candidates will be notified of their appointment by the Chief Supervisor of the Fellowship Program

- 9.2.1. The SIMG should be a qualified orthopaedic surgeon in their country of origin or
- 9.2.2. Be training towards a specialist orthopaedic qualification in their country of residence where they are no more than two years from completing their specialist degree.
- 9.2.3. The SIMG should be a member of good standing with their Associations/Colleges in their country of origin.
- 9.2.4. Prior to commencement of the Fellowship Program, SIMG Fellows must apply to:
 - a) The Australian Medical Council (AMC) in order to verify their qualifications for medical registration
 - b) AHPRA for the appropriate category of medical registration, and
 - c) The Department of Home Affairs for the appropriate visa category. Unless otherwise specified/approved, **all** international candidates are to apply for a 407 (Training) Visa.
- 9.2.5. It is expected that SIMGs participating in AOA Accredited Fellowship Programs return to their countries of residence at the conclusion of Fellowship Program. These Fellowship Programs **are not** intended as a prelude to permanent medical registration in Australia.
- 9.2.6. SIMGs undertaking the specialist pathway through RACS must receive permission from the AOA Federal Training Committee prior to commencing an accredited Fellowship Program. Accredited Fellowship Programs **are not** designed for general training.

9.3. Fellow's Responsibilities

During the Fellowship Program the participant must:

- 9.3.1. Not act in a way detrimental to the education or learning of AOA accredited trainees.

- 9.3.2. Engage in either clinical/laboratory/comparable basic research as directed by the Chief Supervisor.
- 9.3.3. Have an accompanying Supervisor at each institution.
- 9.3.4. Never attend to patients without the permission of their Supervisor.
- 9.3.5. Know the limits of their scope of authority and circumstances under which they are permitted to act with conditional independence.
- 9.3.6. Where possible, contribute to registrar education by becoming involved in leadership and teaching opportunities.
- 9.3.7. Notify the AOA and their Chief Supervisor of any changes to their circumstances that will affect their participation in the Fellowship Program.
- 9.3.8. Complete the required *Fellow's Report* two weeks of completing the Fellowship Program.
- 9.3.9. Abide by the AHPRA registration requirements.
- 9.3.10. Abide by the *AOA Position Statement: Interaction with Medical Industry*.
- 9.3.11. Abide by the *AOA Code of Conduct for Members* (for AOA members only)

9.4. Cessation of Fellowship Program Participation

The cessation of the Fellow's involvement in the AOA Accredited Fellowship Program will occur if:

- 9.4.1. The Fellow notifies the AOA or their Chief Supervisor in writing that they are no longer able to participate in the Fellowship Program.
- 9.4.2. The Fellow has been found to falsify personal information and/or training documents.
- 9.4.3. One or more of the institutions affiliated with the Fellowship Program, or the Chief Supervisor, cease the Fellow's employment.
- 9.4.4. The Fellow has completed the Fellowship Program.
- 9.4.5. The Fellow does not have the appropriate medical registration or visa in order to be able to work in Australia.
- 9.4.6. The Fellow does not hold the appropriate visa or their visa has expired (IMGs only).

10. CESSATION OF AN AOA ACCREDITED FELLOWSHIP PROGRAM

Cessation of an AOA accredited Fellowship Program will occur if:

- 10.1. Accreditation is not renewed.

- 10.2. Renewal of accreditation is not granted by the AOA Fellowships Committee.
- 10.3. The Chief Supervisor notifies the AOA in writing that the Fellowship Program has discontinued.
- 10.4. The Chief Supervisor is found to have provided incorrect or inaccurate information on documentation regarding the Fellowship Program.
- 10.5. The AOA Accredited Fellowships Review Committee recommends disaccreditation. Refer to Annex 1.
- 10.6. The Fellowship Program is no longer able to meet and maintain the minimum accreditation requirements.
- 10.7. The Fellowship Program has remained vacant for twenty-four (24) months.

11. MEDICAL DEVICE INDUSTRY INVOLVEMENT

- 11.1. The philosophy, structure and control of the Fellowship Program will rest with the Chief Supervisor without influence from the sponsoring party.
- 11.2. The successful applicant is to be chosen exclusively by the Chief Supervisor of the Fellowship Program.
- 11.3. The presence and extent of any sponsorship should be declared and transparent. AOA will list in general terms the names of medical industry contributors who financially support AOA accredited fellowships.
- 11.4. There is to be no link, either implicit or explicit, between the use of a product or service and industry funding.
- 11.5. AOA Accredited Fellowship Programs must not bear an industry sponsor's name.
- 11.6. Apart from appropriate acknowledgement, there is to be no prominent advertising of the industry's involvement of the Fellowship Program on AOA material e.g. Website or AOA Bulletin.
- 11.7. The industry sponsor must be a member of the MTAA or equivalent society, and subscribe to and abide by an industry code of conduct.
- 11.8. Industry support for a Fellowship Program will be considered a disclosure item by the AOA as a potential conflict of interest at any scientific meeting at which the named co-supervisor is presenting, or at any AOA business or committee meeting.

12. REVIEW PROCEDURES

- 12.1. The Fellowships Committee will review the AOA Fellowships Portfolio in all aspects at five (5) yearly intervals, next in 2024, or as required.
- 12.2. The review of Fellowship Programs will be conducted in accordance with section 6 of this policy.
- 12.3. Any Fellowship Program found not to meet the minimum accreditation requirements as set by AOA during the review process may be disaccredited

if recommendations made to enable the Fellowship Program to be retained cannot be met.

13. PERFORMANCE INDICATOR/S

- 13.1. Number of accredited Fellowship Programs granted
- 13.2. Number of Fellowship Programs completed satisfactorily
- 13.3. Number of accredited Fellowship Programs successfully renewed
- 13.4. Number of 'on time' Supervisor's Reports and Fellow's Reports submitted
- 13.5. On time processing of applications

SEE ALSO

[AOA Code of Conduct for Members](#)

[AOA Position Statement: Interaction with Medical Industry](#)

[AOA Reconsideration, Review & Appeals Policy](#)

ANNEX 1

AOA ACCREDITED FELLOWSHIPS REVIEW COMMITTEE

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1. APPOINTMENT OF AN AOA ACCREDITED FELLOWSHIPS REVIEW COMMITTEE

1.1. Where areas of sufficient concern are identified within AOA accredited Fellowship Programs, the AOA Fellowships Committee may request an AOA Accredited Fellowships Review Committee (**Review Committee**) to investigate these concerns. Areas of sufficient concern include but are not limited to:

- 1.1.1. Salary disputes within the Fellowship Program.
- 1.1.2. Chief Supervising surgeon is found to have provided incorrect or inaccurate information.
- 1.1.3. Failure to notify AOA of any significant changes made to the Fellowship Program.
- 1.1.4. The Fellowship Program is no longer able to meet and maintain minimum accreditation standards.
- 1.1.5. Complaints of misconduct made against the Chief Supervising surgeon/supervisors of the Fellowship Program.
- 1.1.6. Failure to comply with AOA direction within specified time frames.

1.2. The Review Committee is formed to:

- 1.2.1. Independently review the Fellowship Program in question, including all evidence relating to the allegations presented.
- 1.2.2. Verify that relevant AOA policies and processes have been followed and documented.
- 1.2.3. Meet with the Chief Supervising surgeon and offer them an opportunity to present any evidence or information that may be relevant to the Review Committee.
- 1.2.4. Make a recommendation to the Fellowships Committee on whether the Fellowship Program should remain accredited (with or without specific conditions) or should be discredited.

The Review Committee will consist of the Professional Conduct and Standards Chair and two other AOA members. At least one member of the

Review Committee must have no involvement with the Fellowship Program or any Supervisors affiliated with that Fellowship Program and must be based in a different state.

- 1.2.5. Administrative support for the Review Committee will be provided by the AOA Fellowships Manager.
- 1.2.6. From time to time the Fellowships Committee Chair may be co-opted for a portion of the meeting to provide relevant background knowledge regarding the concerns brought to the attention of the Review Committee.

2. AOA ACCREDITED FELLOWSHIPS REVIEW COMMITTEE MEETING

- 2.1. The Chief Supervisor of the Fellowship Program will be invited to attend a meeting with the Committee. The Chief Supervisor will be:
 - 2.1.1. Informed that the purpose of the meeting is to consider the accreditation of the Fellowship Program.
 - 2.1.2. Provided with a copy of the file summary that the Review Committee will use to review the significant concerns raised against the Fellowship Program.
 - 2.1.3. Advised of the members of the Review Committee.
 - 2.1.4. Advised that the Review Committee will make a recommendation regarding the accreditation of the Fellowship Program to the Fellowships Committee.
 - 2.1.5. That the Fellowships Committee will consider the recommendations put forward by the Review Committee.
- 2.2. The Chief Supervisor may be asked to produce evidence or a written statement to show cause. The evidence and/or written statement must be provided 48 hours prior to the meeting, which will be minuted.
- 2.3. An individual who can provide support, but cannot advocate for the Fellowship Program or the Chief Supervisor, may accompany the Chief Supervisor. This individual must not be a practicing lawyer.
- 2.4. Where the Chief Supervisor is duly notified of the meeting and declines, and no alternative date is possible, the Review Committee may make a recommendation to the Fellowships Committee without the input of the Chief Supervisor.
- 2.5. Any declarations of interest will be made at the commencement of the meeting.
- 2.6. To minimise the apprehension of bias, the Fellowships Committee Chair does not have a vote regarding any recommendations put forward.

3. RECOMMENDATION OF THE AOA ACCREDITED FELLOWSHIPS REVIEW COMMITTEE

- 3.1. Immediately following the meeting with the Chief Supervisor, the Review Committee members will discuss the allegations and take into consideration any relevant additional evidence or information gained from the meeting.
- 3.2. The Review Committee will then make a recommendation in writing to the Fellowships Committee.

3.3. The recommendation may include one of the following:

- 3.3.1.** Continued accreditation of the Fellowship Program.
- 3.3.2.** Continued accreditation of the Fellowship Program with specific conditions.
- 3.3.3.** Disaccreditation of the Fellowship Program.

4. CONSIDERATION OF THE REVIEW COMMITTEE'S RECOMMENDATION BY THE FELLOWSHIPS COMMITTEE

4.1. Continued accreditation of the Fellowship Program

4.1.1. If the Review Committee recommends continuation OR conditional continuation of the Fellowship Program, a Fellowships Committee meeting will be convened to consider the recommendation within a reasonable period of time. The supporting documentation must demonstrate that:

- a) The Chief Supervisor had been notified of the allegations made against them/the Fellowship Program.
- b) The Chief Supervisor had the opportunity to provide evidence or show cause regarding these allegations.

4.1.2. The Fellowships Committee will:

- a) Review the file summary
- b) Review the minutes of the meeting between the Review Committee and the Chief Supervisor
- c) Review the Review Committee's recommendation
- d) Seek approval from the AOA Board of Directors regarding the recommendation

4.2. Disaccreditation

4.2.1. If the Review Committee recommends disaccreditation of the Fellowship Program a Fellowships Committee meeting will be convened to consider the recommendation within a reasonable period of time. The supporting documentation must demonstrate that the:

- a) Chief Supervisor had been notified of the allegations made against them.
- b) The Chief Supervisor had the opportunity to provide evidence or show cause regarding these allegations.

4.2.2. The Fellowships Committee will:

- a) Review the file summary
- b) Review the minutes of the meeting between the Review Committee and the Chief Supervisor
- c) Review the Review Committee's recommendation
- d) Escalate the recommendation to the AOA Board of Directors

5. DECISION BY THE AOA BOARD OF DIRECTORS

5.1. Where the AOA Board of Directors decides against the recommendation for disaccreditation of the Fellowship Program, the Fellowships Committee Chair will notify the Chief Supervisor of the Board's decision and any further requirements/specific conditions accompanying the continued accreditation of the Fellowship Program.

5.2. Where the AOA Board of Directors upholds the recommendation for disaccreditation of the Fellowship Program, the Chief Supervisor will be issued with formal correspondence from the Fellowships Committee Chair in a timely manner.

6. CESSATION OF THE FELLOWSHIP PROGRAM

6.1. Where a Fellowship Program is discredited, the following will occur:

- 6.1.1. The Fellowship Program will be discredited upon completion of current Fellow's tenure unless otherwise specified by the AOA Board of Directors.
- 6.1.2. A two-year ban on reapplying for an accredited Fellowship Program will be placed on the Chief Supervisor.
- 6.1.3. Immediate removal of the Fellowship Program's summary from the AOA website.
- 6.1.4. Immediate removal of the phrase 'This Fellowship Program is accredited by the Australian Orthopaedic Association' from any promotional material.
- 6.1.5. Notification will be provided by the Chief Supervisor to any prospective fellows that the Fellowship Program is no longer accredited by AOA.
- 6.1.6. Notification will be provided by the Chief Supervisor to any medical device companies that are providing funding for the Fellowship Program.

6.2. The Chief Supervisor has six (6) weeks to ensure all conditions have been met

7. APPEALS POLICY

7.1. If the Chief Supervisor believes they are adversely affected by the decision of the AOA they are able to lodge an appeal in alignment with AOA's *Reconsideration, Review & Appeals Policy*.