



Guidelines for appointment of obstetricians and gynaecologists to specialist positions in Australia and New Zealand

This statement has been developed and reviewed by the Women's Health Committee and approved by the RANZCOG Board and Council.

A list of Women's Health Committee Members can be found in [Appendix A](#).

Disclosure statements have been received from all members of this committee.

Disclaimer This information is intended to provide general advice to practitioners. This information should not be relied on as a substitute for proper assessment with respect to the particular circumstances of each case and the needs of any patient. This document reflects emerging clinical and scientific advances as of the date issued and is subject to change. The document has been prepared having regard to general circumstances.

First endorsed by RANZCOG: July 2007
Current: March 2018
Review due: March 2021

Background: This statement was first developed by Women's Health Committee in July 2007 and reviewed in March 2018.

Funding: The development and review of this statement was funded by RANZCOG.

The Royal Australian and New Zealand College of Obstetricians and Gynaecologists (RANZCOG) recommends that applicants for appointments to positions of a specialist Obstetrician and Gynaecologist in Australia or New Zealand, should:

- be registered as a Fellow of RANZCOG; or
- whose training and experience is 'substantially comparable to' a RANZCOG Fellow as assessed by the College; and
- be able to provide evidence of participation in relevant Continuing Professional Development (CPD) or Continuing Medical Education (CME) activities.

Where an applicant is not a RANZCOG Fellow and has not been previously assessed by the College, an assessment of training should be conducted by the College prior to employment.

In Australia the assessment is conducted by the Specialist International Medical Graduate (SIMG)/Area of Need (AoN) assessment process and may indicate a need for additional supervised training. Assessment is undertaken by RANZCOG at the request of the Australian Medical Council (AMC).

In New Zealand, the assessment is conducted by RANZCOG as an advisory body for the New Zealand Medical Council (NZMC). Pathways to vocational (specialist) registration by the NZMC are based mostly on advice from RANZCOG and may include additional supervised training. In addition, applicants must fulfill the criteria for registration as laid down by the New Zealand Medical Council.

RANZCOG recognises occasional practices which are contrary to the aforementioned pathways (for example in some rural areas in Australia and by the Medical Council in New Zealand) which bypass RANZCOG's involvement in the assessment process. RANZCOG considers alternative assessment pathways to registration as a specialist to be inappropriate and strongly recommends compliance with formal assessment pathways, which includes the RANZCOG assessment.

RANZCOG acknowledges that there will be workforce pressures (AoN in Australia and emergency locum appointments in New Zealand) that may on occasion make this guideline difficult to apply in practice. However, in order to maintain and improve the highest standards in the care of women in Australia and New Zealand, RANZCOG recommends that only professionals, who hold a RANZCOG qualification or are assessed as substantially comparable, should be appointed to positions of Specialist Obstetricians and Gynaecologists.

Pathways for Specialist Recognition in Australia

A pathway for overseas trained doctors wishing to be employed in the role of a specialist Obstetrician and Gynaecologist in Australia is available on the College website at: <http://www.ranzcog.edu.au/>. This contains comprehensive information on how to achieve Fellowship of the College and covers topics on Overseas Trained Specialists, Area of Need, Occupational Training Visas and Overseas Trained Subspecialists (OTSS). It includes links to various agencies including the Australian Medical Council (AMC), Health Insurance Commission, Commonwealth Department of Health and Ageing, Department of Human Services (DHS) and the Department of Immigration and Citizenship (DIAC). It also includes links to support resources for overseas trained doctors, to assist in integration into the medical workforce.

In New Zealand, pathways to specialist registration are extensively outlined on the Medical Council of New Zealand website, see below.

Links to related College Statements

Guidelines for locum positions in specialist obstetric and gynaecological practice in Australia and New Zealand (WPI 12)

http://www.ranzcog.edu.au/component/docman/doc_download/992-wpi-12-guidelines-for-locum-positions-in-specialist-obstetric-and-gynaecological-practice-in-anz.html

Evidence-based Medicine, Obstetrics and Gynaecology (C-Gen 15)

http://www.ranzcog.edu.au/component/docman/doc_download/894-c-gen-15-evidence-based-medicine-obstetrics-and-gynaecology.html?Itemid=341

Useful links and websites

RANZCOG International Trained Specialist Assessment

<http://www.ranzcog.edu.au/education-a-training/simsg/134-specialist-img.html>

Australian Medical Council

<http://amc.org.au>

DoctorConnect also provides information on the process of recruiting specialists in Australia.

<http://www.doctorconnect.gov.au/internet/otd/publishing.nsf/Content/recruiting>

Medical Council of New Zealand

<http://www.mcnz.org.nz>

Appendices

Appendix A Women's Health Committee Membership

Name	Position on Committee
Professor Yee Leung	Chair
Dr Joseph Sgroi	Deputy Chair, Gynaecology
Associate Professor Lisa Hui	Member
Associate Professor Ian Pettigrew	EAC Representative
Dr Tal Jacobson	Member
Dr Ian Page	Member
Dr John Regan	Member
Dr Craig Skidmore	Member
Associate Professor Janet Vaughan	Member
Dr Bernadette White	Member
Dr Scott White	Member
Associate Professor Kirsten Black	Member
Dr Greg Fox	College Medical Officer
Dr Marilyn Clarke	Chair of the ATSI WHC
Dr Martin Byrne	GPOAC Representative
Ms Catherine Whitby	Community Representative
Ms Sherryn Elworthy	Midwifery Representative
Dr Amelia Ryan	Trainee Representative

Appendix B Overview of the development and review process for this statement

i. Steps in developing and updating this statement

This statement was originally developed in July 2007 and was most recently reviewed in March 2015. The Women's Health Committee carried out the following steps in reviewing this statement:

- Declarations of interest were sought from all members prior to reviewing this statement.
- Structured clinical questions were developed and agreed upon.
- An updated literature search to answer the clinical questions was undertaken.
- At the March 2018 face-to-face committee meeting, the existing consensus-based recommendations were reviewed and updated (where appropriate) based on the available body of evidence and clinical expertise. Recommendations were graded as set out below in Appendix B part iii)

ii. Declaration of interest process and management

Declaring interests is essential in order to prevent any potential conflict between the private interests of members, and their duties as part of the Women's Health Committee.

A declaration of interest form specific to guidelines and statements was developed by RANZCOG and approved by the RANZCOG Board in September 2012. The Women’s Health Committee members were required to declare their relevant interests in writing on this form prior to participating in the review of this statement.

Members were required to update their information as soon as they become aware of any changes to their interests and there was also a standing agenda item at each meeting where declarations of interest were called for and recorded as part of the meeting minutes.

There were no significant real or perceived conflicts of interest that required management during the process of updating this statement.

iii. Grading of recommendations

Each recommendation in this College statement is given an overall grade as per the table below, based on the National Health and Medical Research Council (NHMRC) Levels of Evidence and Grades of Recommendations for Developers of Guidelines. Where no robust evidence was available but there was sufficient consensus within the Women’s Health Committee, consensus-based recommendations were developed or existing ones updated and are identifiable as such. Consensus-based recommendations were agreed to by the entire committee. Good Practice Notes are highlighted throughout and provide practical guidance to facilitate implementation. These were also developed through consensus of the entire committee.

Recommendation category		Description
Evidence-based	A	Body of evidence can be trusted to guide practice
	B	Body of evidence can be trusted to guide practice in most situations
	C	Body of evidence provides some support for recommendation(s) but care should be taken in its application
	D	The body of evidence is weak and the recommendation must be applied with caution
Consensus-based		Recommendation based on clinical opinion and expertise as insufficient evidence available
Good Practice Note		Practical advice and information based on clinical opinion and expertise

Appendix C Full Disclaimer

This information is intended to provide general advice to practitioners, and should not be relied on as a substitute for proper assessment with respect to the particular circumstances of each case and the needs of any patient.

This information has been prepared having regard to general circumstances. It is the responsibility of each practitioner to have regard to the particular circumstances of each case. Clinical management should be responsive to the needs of the individual patient and the particular circumstances of each case.

This information has been prepared having regard to the information available at the time of its preparation, and each practitioner should have regard to relevant information, research or material which may have been published or become available subsequently.

Whilst the College endeavours to ensure that information is accurate and current at the time of preparation, it takes no responsibility for matters arising from changed circumstances or information or material that may have become subsequently available.