

Procedures Endorsement Program Handbook

February 2024

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Glossary

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| Accredited procedural supervisor ('supervisor') | Supervisors of endorsees undertaking workplace-based training in procedures in pain medicine (cf. Supervisor of Training (SoT) in the pain medicine training program). |
| Co-supervisor | An endorsed fellow who supports the accredited procedural supervisor in teaching specific procedures, but is not responsible for the overall training, assessment or confirmation of competence of the endorsee. |
| Endorsee | A practitioner seeking FPM endorsement in procedures in pain medicine. |
| Fellow | A fellow of FPM ANZCA. |
| Endorsed fellow | FFPMANZCA who is endorsed by FPM in at least one selected pain procedure. |
| Procedures in pain medicine ('pain medicine procedures', 'procedures') | Interventions that breach the skin, usually with a needle or minimally invasive surgery, to deliver medicines or various forms of energy to affect deep tissues to assist in diagnosis, or palliate symptoms to improve function and quality of life. ¹ |

¹ ANZCA FPM. [PS11\(PM\): Procedures in pain medicine clinical care standard](#). Feb 2024.

1. Introduction

The Faculty of Pain Medicine (FPM) has defined processes to endorse fellows who practise procedures. The process involves demonstration of competency and demonstration of adherence to *PS11(PM): Procedures in Pain Medicine Clinical Care Standard*. The procedures endorsement program (PEP) is open to FPM fellows, and to trainees who are in the practice development stage (PDS) of their FPM Training Program.

Attainment of endorsement in procedures in pain medicine (endorsement) may be pursued via one of the following pathways:

- **Supervised clinical experience pathway** – which is open to PDS trainees and FPM fellows who elect to train *ab-initio* in nominated procedures.
- **Practice assessment pathway** – which is open until the end of 2026 to practising FPM Fellows with established experience in pain medicine procedures.

Fellows and trainees undertaking the program are known as “endorsees”. Fellows who have achieved and maintain endorsement are known as “endorsed fellows”.

1.1. By-laws and policies

By-law 20, FPM Procedures Endorsement Program governs the process for endorsement of fellows for procedures in pain medicine and takes precedence over the contents of this handbook should there be any conflict between the two. The FPM board is responsible for making, amending and repealing all by-laws.

Endorsees agree to abide by the faculty by-laws and corporate policies, such as those regarding academic integrity, privacy, bullying and harassment and social media.

2. Supervised Clinical Experience Pathway

Fellows of the FPM and FPM trainees who are in the practice development stage may choose to expand their practice by gaining workplace-based experience potentially leading to endorsement in procedures in pain medicine. Procedural clinical experience that is accrued towards the program must be undertaken under the supervision of a FPM accredited procedural supervisor.

The [FPM procedures endorsement program curriculum](#) (the curriculum) outlines the procedures in which endorsement may be gained and the learning outcomes required to demonstrate proficiency. The curriculum draws on and refers to the [pain medicine training program curriculum](#), which outlines in detail the knowledge, skills and attitudes which should be common to specialist pain medicine physicians of all backgrounds. It is assumed that endorsees have completed at least the core training stage of the FPM fellowship training program and are familiar with the conceptual basis of pain medicine.

The procedures have been grouped into three categories that reflect the level of risk and complexity involved. Endorsees are not required to seek endorsement in all procedures or all categories and may pursue one or more procedures that are relevant to their practice or interest.

Fellows undertaking the supervised clinical experience pathway are able to credit some of the program’s activities towards their continuing professional development (CPD). There is no specific CPD activity to cover this training, but activities could be broken down to be claimed under the appropriate category. For example, participation in case discussions could be claimed under the practice evaluation category, and completion of direct observation of procedural skills (DOPS) could be claimed under knowledge and skills. Please see [ANZCA and FPM CPD webpage](#) for further information.

2.1 Joining the program

Applicants apply for a position with an accredited procedural supervisor in a pain unit that provides procedures. The position should share responsibility for patient assessment, selection and preparation, performing procedures, and post-procedure follow up. When approaching a potential supervisor, applicants are asked to outline their previous procedures experience using the *Supervised Clinical Experience Pathway Expression of Interest form*. This form is submitted to the supervisor in addition to references and curriculum vitae (CV). A list of accredited procedural supervisors is available on the website.

Once a position has been secured, the applicant should apply to the faculty and pay the non-refundable registration fee. The application to the faculty and registration fee must be submitted prior to commencing the role.

Trainees in the PDS who undertake the procedures endorsement program can do so concurrently with the FPM training program. Completion of the FPM training program is not contingent on endorsement in procedures (see section 2.4 below).

2.2 Gaining clinical experience

Clinical experience in planning, performance and management of pain medicine procedures is gained while working under the supervision of an accredited procedural supervisor. Co-supervisors may be involved in teaching the endorsee specific procedures. Experience will be accrued towards the procedures listed in the program's curriculum.

Procedures that have been identified for endorsement have been categorised into three levels. The time durations for gaining clinical experience in these categories are:

| | Min | Max |
|------------|-----------|---------------|
| Category 1 | 6 months | 24 months FTE |
| Category 2 | 6 months | 24 months FTE |
| Category 3 | 12 months | 48 months FTE |

Endorsees must spend a minimum of 6 months at their identified FTE with their supervisor to show they are capable of providing unsupervised care encompassing the selection, performance and follow-up of procedures within the sociopsychobiomedical paradigm as outlined in the Curriculum.

Endorsees can gain experience in procedures of different categories concurrently.

It is recommended that endorsees actively participate in at least one theatre list per week.

2.3 Workplace-based progressive feedback

Endorsees and supervisors will have access to the ePortfolio to add logbook entries and complete assessment forms including the direct observation of procedural skills (DOPS) and Confirmation of Competence (see section 2.7).

Using the ePortfolio, the endorsee maintains a log of cases performed and self-rates their performance on these cases. The accredited procedural supervisor provides feedback to the endorsee on the level of supervision the endorsee required for that procedure.

The DOPS tool is used by the accredited procedural supervisor/co-supervisor and endorsee to provide feedback to support learning and to assess the overall development of an endorsee as a specialist and professional. There is no minimum number of DOPS required to progress to sign-off for endorsement of a procedure, but endorsees should be aiming to undertake at least one DOPS per month.

The endorsee is responsible for initiating regular DOPS assessments with their supervisor/co-supervisor who completes the form in the ePortfolio.

Training in procedures can be undertaken simultaneously, however endorsees can only be signed-off for endorsement in a procedure with pre-requisite competencies once they can successfully demonstrate these mandatory competencies.

Levels of supervision:

| Supervision level | Supervisor role | Endorsee role |
|---|---|---|
| Level 1 – endorsee observes the procedure | <ul style="list-style-type: none"> Supervisor is responsible for the performance of the procedure | <ul style="list-style-type: none"> Endorsee primarily observes |
| Level 2 – endorsee assists with procedure | <ul style="list-style-type: none"> Supervisor remains primarily responsible for the performance of the procedure | <ul style="list-style-type: none"> Endorsee assists the supervisor |
| Level 3 - endorsee primarily responsible for procedure | <ul style="list-style-type: none"> Supervisor provides intraoperative assistance to the endorsee | <ul style="list-style-type: none"> Endorsee is primarily responsible for the performance of the procedure |
| Level 4 - endorsee performs procedure independently | <ul style="list-style-type: none"> Supervisor observes endorsee performing the cases | <ul style="list-style-type: none"> Endorsee performs procedure independently and safely within expected time limit |

Data privacy in the ePortfolio

Collecting information about patients has important privacy implications. In collecting and using any patient information it is your responsibility to ensure that all privacy obligations are met, and any necessary consent obtained. Only de-identified information should be routinely stored.

If any identifying information is recorded in the ePortfolio, or other material submitted to the College, please ensure that you, or your hospital's privacy statement addresses this issue, or that your patient has consented. It is also important to note that any reflective comments in the ePortfolio may have potential medico-legal implications.

2.4 Undertaking the procedures endorsement program concurrently with the FPM fellowship training program

The procedures endorsement program can be undertaken during the PDS of the FPM training program.

PDS trainees who are also endorsees need to comply with requirements of both programs. It is expected that workplace-based progressive feedback (WBPF) activities undertaken during procedural training be focused on procedures.

PDS trainees who withdraw from the procedures endorsement program will not be disadvantaged in relation to completion of the FPM fellowship training program as long as they have met PDS requirements.

The PDS supervisor and the accredited procedural supervisor can be the same person.

It is recommended that trainees focusing on procedures undertake a placement of 22-44 weeks. If only part of the PDS year is dedicated to procedural training, it is recommended that this occurs towards the end of the year, to facilitate continuity of training into practice.

2.5 Flexible program options

It is understood that endorsees may take extended breaks from the program. When this occurs, they should advise the faculty. It is recommended, however, that interruption of training in the program is minimised in order to facilitate consolidation of procedural skills and continuity of training into practice.

In cases where the endorsee wishes to change their accredited procedural supervisor, the endorsee must advise the faculty in writing, and reenrol in the program. The faculty will advise the new accredited procedural supervisor of the history of the endorsee's training in the program.

2.6 Learning support resources

The FPM professional document *PS11(PM): Procedures in Pain Medicine Clinical Care Standard* articulates what is considered to be the appropriate and safe use of procedures in the practice of pain medicine.

The supervisors will have techniques that work for them. It is up to the individual to be across best practice in procedures and ensure their practice is based on the international evidence, being aware that this will come from multiple organisations.

The ANZCA library has a number of resources related to procedures in pain medicine that can be accessed via the [website](#).

The faculty runs CPD events at scientific meetings and as stand-alone workshops on procedures in pain medicine which endorsees and endorsed fellows are encouraged to attend.

2.7 Process to sign off a procedure for endorsement

Once an endorsee believes they are ready to perform a particular procedure unsupervised, they should consult their accredited procedural supervisor and arrange to undertake a final DOPS assessment.

If the procedure is assessed as satisfactory, and the endorsee has reached supervision level 4 ('endorsee performs procedure independently'), they may approach the accredited procedural supervisor regarding sign off. If the procedure is assessed as not satisfactory, formative feedback will be provided.

The supervisor completes the Confirmation of competence form once they have determined that the endorsee can safely and independently perform the procedure within the sociopsychobiomedical context. This confirms to the faculty that the endorsee is eligible for endorsement in this particular procedure. The completed Confirmation of competence form will be submitted to the faculty. The supervisor may recommend the endorsee receive endorsement in all procedures of a category (1 or 2) should the endorsee show proficiency in most of the procedures of that category. Category 3 procedures require individual confirmation of competence forms for each procedure in which endorsement is being sought.

Endorsees who achieve sign off for endorsement while undertaking the FPM training program will not receive the endorsement until they have been admitted to fellowship of the FPM. If the time between sign-off of a procedure and admission to fellowship is greater than 12 months, the DOPS assessment will need to be repeated, and the sign-off form re-signed.

Applications for endorsement require:

- A covering letter - detailing what procedures are being applied for; an outline of experience prior to entering the program; time undertaken in the program and proof of pre-requisite requirements being met.
- Confirmation of competence forms.
- Radiation safety course certificate of completion.

The Procedures Endorsement Program Reference Group will review applications for endorsement ahead of the Procedures in Pain Medicine Committee.

3. Practice Assessment Pathway

Until the end of 2026, a pathway will be available to FPM fellows who practise pain medicine procedures to have their practice endorsed without a requirement for supervised clinical experience. This pathway requires fellows to demonstrate competence in procedures in pain medicine and adherence to *PS11(PM): Procedures in Pain Medicine Clinical Care Standards* through submission of a written application and supporting documentation.

The application will be assessed by the Procedures Endorsement Program Reference Group. This process may require further information such as a structured conversation or a visit to the fellows workplace to determine the outcome. Following this assessment, the reference group will make one of the following recommendations:

- Recommend that the fellow is endorsed.
- Recommend that the fellow is not endorsed at this stage (and suggest a remediation plan).
- Determine that further assessment is required. The assessors may request –
 - Additional documentation, and/or
 - An interview via videoconference, and/or
 - On-site peer review visit

The reference group will make its recommendation to the faculty regarding the endorsement. Award of endorsement is decided by the FPM board, following acceptance of reference group recommendations by the procedures in pain medicine committee.

4. Maintaining endorsement

Once endorsement is achieved, a fellow must ensure they maintain their proficiency by undertaking professional development activities related to their procedural scope of practice.

Endorsed fellows will be required to meet the ANZCA and FPM CPD standard. There will be no increased burden of CPD credits for fellows seeking to maintain their endorsement, however specific requirements relating to CPD activities to be undertaken during a triennium apply.

In addition to the usual ANZCA and FPM CPD program, which includes development of knowledge and skills, practice evaluation and completion of emergency response activities, endorsed fellows will be expected once per triennium to provide the faculty with a certification (letter) from the Medical Advisory Committee of the institution(s) in which they perform procedures, stating that the fellow's practice meets the hospital's expected standards of care, and that there are no concerns in regards to the fellow's knowledge, skill, judgement, or professional conduct that require college intervention.

See the [ANZCA and FPM CPD Handbook](#) for further details.

5. Fees

Fees are determined by the FPM Board and ANZCA Council each year as part of the annual budgeting cycle.

5.1 Fees for the supervised clinical experience pathway

When joining the Procedures Endorsement Program, or returning to the program after a break, a non-refundable registration fee will be payable.

An annual program fee will be charged while undertaking the supervised clinical experience pathway. In the first year, this fee is due prior to commencing the placement of supervised clinical experience and upon payment access will be given to the ePortfolio. In subsequent years, payment is due by the end of January to maintain active registration status within the program.

It is understood that many endorsees will be in the program part time or for part of the year, and the fee is set recognising this. Therefore pro-rata program fees are not offered.

5.2 Fees for the Practice Assessment Pathway

Fellows pay a non-refundable Practice Assessment Application Fee with their written application form. Fellows who submit additional applications for endorsement at a later date will need to pay the application fee again.

Change control register

| Version | Author | Reviewed by | Approved by | Approval date | Sections modified | Date of next review |
|---------|---|--------------------|-------------|---------------|---|---------------------|
| V1.0 | Procedures Training Pathway Working Group | PPMPSG FPM PAEC | FPM Board | 19/07/2020 | Created | 2021 |
| V1.1 | PPMPSG | FPM PAEC | FPM Board | Dec 2020 | SCEP sign-off, PAP process, fees, glossary added. | 2021 |
| V1.2 | PPMPSG | FPM PAEC | FPM Board | Dec 2021 | Min training time duration; Zwisch levels added; application for endorsement process added | 2022 |
| V1.3 | P McMorran J Whittington | PPMC | FPM PAEC | Aug 2022 | Removing reference to Zwisch, amend to 'levels of supervision' and process for new ePortfolio | 2023 |
| V1.4 | P McMorran | PPMC | FPM PAEC | Nov 2023 | Category 3 endorsement require submission of CoC forms | 2024 |
| V1.5 | P McMorran | FPM Board | FPM Board | Feb 2023 | Updates to the PAP application process | 2025 |