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4.1 Eligibility and application for the FPM training program

4.1.1 Trainees may enter the FPM training program prior to gaining fellowship in their primary specialty, but must have completed at least three years full-time equivalent (FTE) of training within that specialty.

4.1.2 The FPM training program may be pursued concurrently with training towards a primary specialist qualification. All requirements of the FPM training program must be met independently of those of the primary college, faculty or chapter.

4.1.3 Trainees who hold a primary specialist qualification that has not been deemed as acceptable to the board may enter the FPM training program but will not be eligible for fellowship of the FPM.

4.1.4 Applicants for the FPM training program must submit a completed Application for FPM Training form prior to commencing the core training stage, including required documentation as outlined in the FPM Training Handbook.

4.1.5 Applicants for the FPM training program must pay a non-refundable application fee. This covers the application process and enrolment in the Better Pain Management (BPM) program.

4.2 Foundations of pain medicine

4.2.1 Trainees are required to develop a foundational knowledge of pain medicine prior to commencing the core training stage, based on content of the BPM program and the Conceptual basis of pain medicine curriculum.

4.2.2 From February 2019, trainees must satisfactorily complete the BPM program by the end of week 11 of their core training stage, as outlined in the FPM Training Handbook.

4.2.2.1 Applicants who completed the Foundations of Pain Medicine Examination prior to February 2019 will not be required to undertake the BPM program provided they commence pain medicine training within 18 months of completion of the Foundations of Pain Medicine examination.

4.3 The FPM training program

4.3.1 The FPM training program comprises a minimum of two years (88 weeks) full-time equivalent of approved clinical experience directly related to pain medicine.
4.3.2 There are two components of the FPM training program:

- Core training stage: This is one year (44 weeks) of four quarters (11 weeks each) excluding normal leave (See by-law 4.4).
- Practice development stage: This is one year (44 weeks) of four quarters (11 weeks each) excluding normal leave (See by-law 4.5).

4.3.3 The date of commencement of the FPM training program is the date of starting the core training stage. The trainee must have submitted their application with the Faculty for training prior to this date.

4.3.4 Trainees must spend a minimum of one year (44 weeks) in a level 1 training unit during the training program. By-law 19 Accreditation of units offering training in pain medicine describes level 1 and level 2 training units.

4.3.5 Trainees must sign the FPM training agreement prior to commencing approved training. The agreement must be submitted annually thereafter by March 31 in order to maintain trainee status.

4.3.6 The FPM training program must be completed within five years of commencement of the core training stage.

4.3.7 Trainees who complete all the requirements of the FPM training program will be eligible to apply for a certificate of completion of training (CCT). (See by-law 3.1.2)

4.3.8 Any applicant for the certificate of completion of training who is subject to a trainee experiencing difficulty or trainee performance review process must satisfactorily complete all the requirements of these processes before the application will be considered.

4.4 Core training stage

4.4.1 The core training stage comprises a minimum of one year (44 weeks) of approved clinical experience in a Faculty-accredited training unit, excluding normal leave.

4.4.2 Trainees must spend at least 22 weeks in a level 1 unit during the core training stage (see by-law 4.3.4).

4.4.3 Trainees are eligible for the core training stage review when they have completed:

- A minimum of 44 weeks of approved training time in the core training stage.
- Workplace-based progressive feedback as outlined in the FPM Training Handbook (see by-law 4.6).
- Satisfactory completion of the BPM program by the end of week 11 of the core training stage.
- A minimum of four in-training assessments (see by-law 4.7).
4.4.4 Trainees must complete the core training stage review, and submit it to the FPM on the approved form, to be eligible to progress to the practice development stage.

4.5 **Practice development stage**

4.5.1 The practice development stage comprises a minimum of one year (44 weeks, excluding normal leave) of prospectively approved and supervised experience directly related to pain medicine.

4.5.2 Trainees are eligible to commence the practice development stage only after completing the core training stage review and approval of their PDS proposal by the assessor.

4.5.2.1 The PDS can be completed in:

- An FPM accredited training unit.
- Multidisciplinary teams with integrated processes andpractice within a sociopsychobiomedical model.
- Subspecialty or subspecialties related to Pain Medicine.
- Research project (includes 0.5 FTE clinical practice).

4.5.2.2 The minimum duration of a practice development stage training placement is a quarter (11 weeks) excluding normal leave.

4.5.3 The trainee must complete the PDS proposal form and submit it to the FPM no later than eight weeks prior to the proposed commencement of the PDS. The *FPM Training Handbook* details the requirements for completing the PDS proposal.

4.5.4 Trainees must prospectively nominate a practice development stage supervisor who must be a fellow of the FPM.

4.5.4.1 The trainee is required to prospectively nominate a placement supervisor for each training site, who will be responsible for the supervision and assessment of the trainee during that placement.

4.5.4.2 The placement supervisor is not required to be a fellow of the FPM. The PDS supervisor may also fulfil the role of placement supervisor.
4.5.5 The practice development stage review completes the PDS; this is performed by the PDS supervisor to confirm that the trainee has completed:

- A minimum of 44 weeks of approved training time in the practice development stage.
- Workplace-based progressive feedback as outlined in the FPM Training Handbook (see by-law 4.6).
- In-training assessments for each quarter (11 weeks) of training in the practice development stage (see by-law 4.7).
- One local and one external long case assessments (see by-law 4.8).
- The clinical case study (see by-law 4.9).
- The fellowship examination (see by-law 4.10).
- Evaluation of the PDS proposal and the learning outcome achievement.

4.5.6 Trainees must submit the practice development stage review to the Faculty on the prescribed form, for review by the Faculty assessor in order to receive the certificate of completion of training.

4.6 Workplace-based progressive feedback

4.6.1 Trainees must complete workplace-based progressive feedback (WBPF) during the FPM training program as outlined in the FPM Training Handbook.

4.6.2 Workplace-based progressive feedback must be completed on the approved workplace-based progressive feedback form and retained in the trainee’s learning portfolio.

4.6.3 During the training program, trainees must engage a minimum of four different assessors to undertake the workplace-based progressive feedback tools.

4.7 In-training assessments

4.7.1 Trainees must complete in-training assessments (ITAs) at quarterly intervals during the FPM training program.

4.7.2 The trainee must complete the in-training assessment in consultation with their supervisor of training (SoT) or practice development stage supervisor as appropriate, on the approved form.

4.7.3 Trainees must submit in-training assessments to the Faculty within 10 working days of completing the quarter. Training time will be approved only upon receipt of the in-training assessment by the Faculty.

4.7.4 The trainee must present the workplace-based progressive feedback forms undertaken during the preceding quarter to their supervisor of training or practice development stage supervisor at the in-training assessment meeting.
4.7.5 When an in-training assessment is deemed borderline, the trainee must undertake remedial activities during the subsequent quarter as directed by the supervisor of training or practice development stage supervisor.

4.7.6 When two consecutive in-training assessments are deemed borderline, or one in- training assessment is deemed unsatisfactory, the trainee:

- Must notify the Faculty in writing within 10 working days. Failure to do so will initiate the trainee performance review process.
- Will enter the trainee experiencing difficulty process as outlined in the FPM Training Handbook.
- Will undertake formal remediation activities as agreed to by the supervisor of training/practice development stage supervisor and considered acceptable by The chair, Learning and Development Committee.
- May be required to undertake extended training time to accommodate the remedial activities.

4.7.7 The trainee experiencing difficulty process will run for a minimum of a quarter (11 weeks) and a maximum of two quarters (22 weeks) of clinical training and will be assessed on the subsequent in-training assessments.

4.7.7.1 A satisfactory assessment in the first or second in-training assessment subsequent to the commencement of the trainee experiencing difficulty process will complete the process with no further remediation required.

4.7.7.2 If the in-training assessment at 22 weeks following commencement of the trainee experiencing difficulty process is assessed as borderline or unsatisfactory the trainee will enter the trainee performance review process.

4.8 Long case assessment

4.8.1 Trainees must pass one local long case assessment prior to completing one external long case assessment.

4.8.2 The external long case assessment will be conducted in regions in Australia and New Zealand as scheduled in the annual timetable.

4.8.3 Trainees may present for the external long case assessment if they have:

- Completed at least one satisfactory ITA and the general physical examination assessment.
- Passed one local long case assessment.
- Applied on the approved form and pay the long case assessment fee by the published closing date.
4.8.4 Candidates who withdraw their application in writing before the closing date of the external long case assessment may be refunded the fee paid.

4.8.5 Candidates who withdraw from the external long case assessment on or after the closing date or who fail to attend the assessment will forfeit the assessment fee.

4.8.6 Candidates may withdraw on medical or compassionate grounds before the external long case assessment. If on medical or compassionate grounds a candidate is unable on the day to present for the assessment, the candidate must submit a written notice and provide evidence of cause within seven days of the assessment. A new application must be submitted if the candidate wishes to present for a subsequent assessment.

4.8.7 If a candidate is ill during the external long case assessment, the chair, Examination Committee must be notified. If appropriate, the candidate’s program will be rescheduled within the assessment, or the candidate will be advised to withdraw. No special consideration will be given to a candidate who elects against advice to continue with the assessment.

4.8.8 Prospective candidates with a chronic illness or disability which they believe may impact detrimentally on their performance in the external long case assessment will be considered for assistance appropriate to their disability, provided that this assistance does not compromise the fairness or reliability of the assessment. If a trainee believes that such consideration should be given to their particular circumstances, a fully documented application should be submitted to the chair, Examination Committee at least four weeks prior to the published assessment closing date. Further action will be at the discretion of the FPM board on the advice of the chair, Examination Committee.

4.8.9 The presence of medical or compassionate grounds as justification for a partial or full refund of the external long case assessment fee will be determined by the chair, Examination Committee on behalf of the FPM board, provided that the refund is applied for within seven days of withdrawal or failure to appear.

4.9 Clinical case study

4.9.1 Trainees must complete one clinical case study (CCS) during the two years (88 weeks) of training.

4.9.2 The trainee must follow the requirements for submission of the clinical case study as outlined in the FPM Training Handbook.
4.10 Fellowship Examination

4.10.1 The examination is conducted annually.

4.10.2 Trainees may present for the examination if they have:

- Completed two in-training assessments.
- Applied on the approved form and paid the fellowship examination fee by the closing date.

4.10.2 Candidates who withdraw their application in writing before the closing date of the examination may be refunded the fee paid.

4.10.3 Candidates who withdraw from the examination on or after the closing date or who fail to attend the examination will forfeit the examination fee.

4.10.4 Candidates may withdraw on medical or compassionate grounds before the examination. If on medical or compassionate grounds a candidate is unable on the day to present for the examination, the candidate must submit a written notice and provide evidence of cause within seven days of the examination. A new application must be submitted if the candidate wishes to present for a subsequent examination.

4.10.5 If a candidate is ill during the examination, the chair, Examination Committee must be notified. If appropriate, the candidate's program will be rescheduled within the examination, or the candidate will be advised to withdraw. No special consideration will be given to a candidate who elects against advice to continue with the examination.

4.10.6 Prospective candidates who have chronic illness or disability that they believe may impact detrimentally on their performance in the examination will be considered for assistance appropriate to their disability, provided that this assistance does not compromise the fairness of the examination. If a trainee believes that such consideration should be given, a fully documented application should be submitted to the chair, Examination Committee at least four weeks prior to the published examination closing date. Further action will be at the discretion of the FPM board on the advice of the chair, Examination Committee.

4.10.7 The presence of medical or compassionate grounds as justification for a partial or full refund of the examination fee will be determined by the chair, Examination Committee on behalf of the FPM board, provided that the refund is applied for within seven days of withdrawal or failure to appear.
4.11 Fees

4.11.1 The annual training fee

4.11.1.1 Trainees commencing the FPM training program must pay the non-refundable annual training fee (ATF). This is calculated on a monthly pro rata basis from the calendar month in which approved training commences and must be paid within four calendar weeks of commencing, and by January 31 in each subsequent calendar year.

4.11.1.2 Trainees failing to pay the ATF by January 31 (or within four weeks of commencing the FPM training program) will enter interrupted training between January 31 and the receipt of payment by the Faculty. Trainees experiencing financial hardship should contact the Faculty prospectively; each case will be considered on an individual basis.

4.11.1.3 Trainees who have not paid the ATF by February 28 in any calendar year, other than the first year of approved training, will have their status changed to “not financial”. This will render them unable to accrue any training program requirements.

4.11.1.4 Trainees who undertake an approved period of at least 52 calendar weeks in part-time training are entitled to a pro rata ATF based on the percentage of full-time equivalent rounded to the nearest tenth (see by-law 4.14.1). If this period of part-time training crosses two calendar years, the pro rata ATF will be charged at the ATF applying to each calendar year. Where an ATF for any part of the period has already been paid a credit will be issued.

4.11.1.5 Trainees in prospectively approved interrupted training of at least 13 weeks including normal leave will pay a reduced ATF based on the number of months in training.

4.11.1.6 Trainees who fail to pay the ATF by March 31 of the year in which the ATF applies will be deemed to have withdrawn from the training program and their training record will be archived. To recommence training they must apply to the Faculty assessor justifying renewal of their application; a new application fee will apply. Those accepted will not be liable for fees covering the period during which they were not in training.

4.11.1.7 Trainees are required to pay the full ATF for the calendar year beginning January 1 in which they will complete training. Following admission to Fellowship the trainee will receive credit, on a pro rata monthly basis, for the unused portion of the ATF.
4.11.2  Registration maintenance fee

4.11.2.1 The non-refundable registration maintenance fee (RMF) applies only to trainees in interrupted training (see by-law 4.14.2). It is due from January 1 and must be paid by January 31. Trainees failing to pay the RMF by March 31 of that year will be deemed to have withdrawn from training.

4.11.2.2 Trainees who after January 1 in a calendar year commence a prospectively approved period of at least 13 consecutive weeks of interrupted training will be eligible for the RMF. Trainees who prior to January 1 have prospective approval for this future period of interrupted training will be invoiced at the start of this calendar year for the RMF that applies to them.

4.11.2.3 Trainees undertaking interrupted training for a period of less than 13 consecutive weeks are not eligible for the RMF and must pay the full ATF.

4.11.2.4 The RMF will be calculated on a pro rata basis based on the total number of months spent in interrupted training. If this consecutive period of interrupted training crosses two calendar years, the pro rata RMF will be charged at the RMF applying to each calendar year.

4.11.2.5 A pro rata RMF is calculated starting from the calendar month in which a trainee commences interrupted training. The RMF does not apply to a month during which a period of interrupted training ends and approved training is also resumed. A pro rata ATF is calculated starting from the month in which the interrupted training period finished.

4.11.2.6 Trainees in interrupted training who return to a training position earlier than planned must pay the additional ATF owing within four weeks of recommencing training. Failure to pay the additional ATF within four weeks will result in the trainee remaining in interrupted training. Trainees entering approved interrupted training are entitled to receive a refund of any excess ATF within four weeks.

4.11.2.7 Trainees who fail to pay the RMF within three calendar months of the commencement of the period to which the RMF applies will be deemed to have withdrawn from the training program and their training record will be archived. To recommence training they must apply to the Faculty assessor justifying renewal of their application; a new application fee will apply. Those accepted will not be liable for fees covering the period during which they were not in training.

4.12  Recognition of prior experience

4.12.1 Trainees may be granted a maximum of six months recognition of prior experience (RPE) towards the practice development stage.

4.12.2 Trainees will be granted recognition of prior experience only for direct experience accumulated within the three years preceding commencement of the core training stage, in training positions of no less than one quarter (11 weeks) excluding normal leave.
4.12.3 Direct experience in pain medicine must be obtained in a Faculty-accredited unit or in a multidisciplinary unit(s) with equivalent facilities and staffing. Workplace-based progressive feedback equivalent to those of the FPM training program must have been completed.

4.12.4 Trainees must submit their application to the Faculty assessor prior to commencement of the core training stage. Granting of recognition of prior experience is contingent upon completion of the core training stage.

4.12.5 Recognition of prior experience requires payment of a pro-rata ATF based on the months of approved training time, payable within four weeks of commencing the practice development stage.

4.13 Normal leave

4.13.1 Normal leave includes annual leave, sick leave, parental leave, study leave and examination leave.

4.13.2 Normal leave may be no more than eight weeks per calendar year.

4.13.3 Trainees who require a period of leave in excess of eight weeks must apply for interrupted training (see by-law 4.14.2).

4.14 Variations in training program

4.14.1 Part-time training

4.14.1.1 Application for part-time training must be made in writing prospectively to the Faculty assessor. Each application will be considered on an individual basis.

4.14.1.2 The trainee must provide evidence that the application for part-time training is supported by the director of the training unit.

4.14.1.3 Trainees undertaking part-time training must complete all requirements of the training program, within five years of commencement of the core training stage.

4.14.1.4 Part-time training must be at a minimum of 0.5 full-time equivalent per week.

4.14.1.5 Normal leave for part-time trainees will be on a pro-rata basis.
4.14.2 **Interrupted training**

4.14.2.1 Any period of leave in excess of the permitted normal leave (see by-law 4.13) constitutes interrupted training.

4.14.2.2 Application for interrupted training must be made prospectively to the Faculty assessor on the approved form.

4.14.2.3 In circumstances in which prospective application is not possible, applications must be made at the earliest opportunity.

4.14.2.4 During interrupted training, the trainee:

- May not accrue training time.
- May not perform workplace based progressive feedback.
- May not submit in-training assessments.
  but
- May submit the clinical case study.
- May attempt long case assessments.
- May attempt the fellowship examination.

4.15 **Trainees with illness or disability**

4.15.1 Trainees may be unable to perform their duties adequately due to illness or disability. They may also need special assistance as a result of ongoing disability. Trainees with illness or disability may contact the Faculty for special consideration based on their individual circumstances.

4.15.2 Trainees have a responsibility to ensure that they are fit to practise in accordance with standards set by the relevant regulatory authorities.

4.15.3 Fellows supervising trainees who are ill or disabled must ensure that patients are not put at risk or trainees disadvantaged.

4.15.4 Maintenance of confidentiality and the protection of the trainee’s privacy must be ensured. The exceptions are the mandatory reporting requirements to external regulatory authorities, and where immediate patient safety is at risk.

4.15.5 Trainees should notify the general manager, Faculty of Pain Medicine, of any illness or disability that would preclude the safe practice of pain medicine, including:

- Dependence on or inappropriate use of alcohol.
- Use of, or dependence on, recreational and/or non-prescribed drugs.
- Treatment with prescribed drugs likely to compromise the safe practice of medicine.
4.15.6 At the start of each calendar year, and as part of the application to present for any Faculty examination and external long case assessment, trainees are required to make the following declaration:

I certify that:

a) I have no illness or disability that would preclude the safe practice of pain medicine, including dependence on or inappropriate use of alcohol or recreational and/or non-prescribed drugs, and/or treatment with prescribed drugs likely to compromise the safe practice of pain medicine.

or

I have informed the Faculty of any illness or disability that would preclude the safe practice of pain medicine, including dependence on or inappropriate use of alcohol or recreational and/or non-prescribed drugs, and/or treatment with prescribed drugs likely to compromise the safe practice of pain medicine, and I am receiving appropriate medical care.

and

b) I undertake to notify the Faculty if I develop an illness or disability that would preclude the safe practice of pain medicine, including dependence on or inappropriate use of alcohol or recreational and/or non-prescribed drugs, and/or treatment with prescribed drugs likely to compromise the safe practice of pain medicine.

Signature:

4.15.7 Trainees applying for the certificate of completion of training and admission to fellowship are again required to make the above declaration, together with the following:

a) I acknowledge that any condition which could preclude the safe practice of pain medicine, including personal drug or chemical dependence, may prevent my admission to fellowship.

and

b) I agree that all communications made by the Faculty Board or any of its officers, and all answers made and all communications of every kind in relation to this my application for admission to fellowship of the Faculty of Pain Medicine, ANZCA shall for all purposes be absolutely privileged.

Signature:

4.16 Trainee performance review

4.16.1 On occasion the performance of a trainee may require an independent review to determine their future in the training program. Details of the trainee performance review (TPR) process are outlined in the FPM Training Handbook.
4.16.2 The TPR process must be initiated:

4.16.2.1 When FPM representatives perceive that local remedial measures under by-law 4.7.5 and 4.7.6 have failed to resolve a trainee’s problems.

4.16.2.2 When conditions have been imposed by a relevant registration authority on a trainee’s practice, or his or her registration has been suspended or removed (by-law 4.17).

4.16.2.3 When, in the absence of any report of concerns by FPM office bearers, and acting on own motion powers under a common law duty of care, a majority of the dean and two nominated board members believe that there are reasonable grounds on other evidence for believing that the trainee’s performance raises a risk to patient safety, or that there are other reasonable concerns about the trainee’s performance (for example, substantiated academic dishonesty).

4.16.2.4 When a trainee wishes to initiate this process because the trainee perceives that interpersonal relationships in the workplace have broken down and are preventing a fair and valid assessment of his or her performance and progress.

4.16.3 A TPR review team will be determined and may, if considered appropriate or necessary, utilise information deriving from assessments conducted within the FPM training program. The trainee is obligated to do all things reasonably necessary to make applicable information deriving from assessments available to the review team, while remaining free to comment on these assessments and raise any material concerns.

4.16.4 Other than in the circumstances specified in by-law 4.17, the review team is required to recommend:

4.16.4.1 That the trainee continues in training without conditions; or

4.16.4.2 That the trainee continues in training subject to meeting certain conditions or requirements (for example, agreeing to undergo remediation); or

4.16.4.3 That the trainee is removed from the FPM training program.

4.16.5 The review team will submit a report and recommendation to the general manager, Faculty of Pain Medicine, who will table it for consideration by the board. The decision of the board will be communicated to the trainee, supervisor of training or practice development stage supervisors, and other bodies as appropriate, including where necessary registration authorities and/or employing authorities.
4.16.6 If the decision of board is that the trainee is to continue in training subject to meeting certain conditions or requirements the trainee will be suspended from normal training as from the date of the board’s decision.

4.16.6.1 It is the trainee’s responsibility to comply with all conditions or requirements, under the supervision and with the support of relevant supervisor of training/practice development stages, and under the oversight of the chair, Education Committee.

4.16.6.2 When all recommended processes have been completed, the supervisor of training/practice development stage supervisor must submit a final report to the general manager, Faculty of Pain Medicine. This report will provide a global assessment taking account of the trainee’s compliance with all requirements of the TPR process, and based on all assessments undertaken during the TPR. The report will be considered by the board, for a final determination on the outcome of the TPR.

4.16.6.3 If there has been satisfactory compliance with the recommendations, and the trainee has achieved the required level of performance, the trainee may resume normal training from the date of the board’s decision.

4.16.6.4 If there has not been satisfactory compliance with the recommendations, and/or the trainee has not achieved the required level of performance, the trainee will be removed from the FPM training program from the date of board’s decision.

4.17 **Trainees under conditions, suspended or removed from the register by the registration authority**

4.17.1 Medical practitioners may have conditions placed on their practice or may be suspended or removed from registration by the relevant registration authority. This may result from health related issues or be the outcome of a disciplinary process.

4.17.2 Trainees subject to the imposition of conditions, suspension or removal have an obligation to inform the Faculty that this is the case.

4.17.3 When the Faculty is advised by the trainee or otherwise becomes aware that a trainee within the FPM training program is subject to such conditions, suspension or removal, the following will occur:

4.17.3.1 If **conditions** are placed on a trainee’s practice, the trainee will be placed in interrupted training from the date the conditions are imposed. At the earliest opportunity a trainee performance review (TPR) (see by-law 4.16) must be undertaken, the trainee being advised of any concerns the Faculty may have arising out of the registration authority’s decision and being given an
opportunity to respond to these concerns. The TPR will determine whether the trainee may resume approved training while the registration authority’s conditions are in place, and if so, whether any conditions should be imposed in addition to those determined by the registration authority, including a possible requirement for special supervision. This TPR process must take account of concerns for patient safety, trainee welfare, the effect of conditions on the clinical experience required by the trainee if training is to resume, and the trainee’s prior record with the Faculty.

4.17.2 If suspended from the medical register, a trainee will be placed in interrupted training from the date of such suspension. Should the trainee have the suspension lifted, and wish to return to practice and to resume the FPM training program, they must advise the Faculty of this in writing within 26 weeks of the suspension being lifted, and a TPR (see by-law 4.16) must be undertaken to determine FPM’s requirements for the resumption of training. In the absence of such advice, after 26 weeks following lifting of the suspension the trainee will be deemed to have withdrawn from the FPM training program.

4.17.3 If removed from the medical register, a trainee will be removed from the FPM training program and not permitted to continue in training.

4.17.4 If a trainee has completed all requirements of the FPM training program and is applying for the certificate of completion of training or admission to fellowship at the time the registration authority’s decision is imposed:

4.17.4.1 Where the applicant does not hold current registration to practise at the time of application they will not receive the certificate of completion of training or be admitted to fellowship.

4.17.4.2 Where the applicant has conditions imposed on their practice, a TPR (see by-law 4.16) must be undertaken to determine whether conferment of the certificate of completion of training or admission to fellowship may proceed or must be deferred until the imposed conditions are lifted.

4.18 Withdrawal from training

4.18.1 Trainees intending to withdraw from the FPM training program should advise the general manager, Faculty of Pain Medicine, in writing.

4.19 Prizes

4.19.1 Barbara Walker Prize for Excellence in the Fellowship Examination

4.19.1.1 The Barbara Walker Prize for Excellence in the Fellowship Examination may be awarded to the top candidate provided that a mark of at least 70% has been achieved.
4.19.2.3 A re-presenting candidate is eligible to be awarded the Barbara Walker Prize for Excellence in the Fellowship Examination.

4.19.2 Merit List

4.19.2.1 A certificate that recognises a pass with merit in the fellowship examination may be awarded to the meritorious candidate(s).

4.19.2.2 Candidates who have shown excellence in the examination and have achieved a mark in the top 10% of the candidature will be eligible for inclusion on the merit list.

4.19.2.3 A re-presenting candidate is eligible for inclusion on the merit list.

4.20 Ability to change the rules or individual applications of the rules

4.20.1 Trainees may apply to the Faculty assessor for exemptions to by-law 4; these will be considered on a case-by-case basis.

4.20.2 Any such exemptions will not set any precedent for future decision regarding by-law 4.

4.21.0 Reconsideration, review and appeal

4.21.1 Any person who is dissatisfied with a decision made under by-law 4 may apply to have that decision reconsidered. Such applications must be made within six months of the decision in question. The processes of reconsideration, review and appeal will follow ANZCA regulations 30 and 31.