



ANZCA
FPM

Regulation 36

ANZCA Diploma of Advanced Diving and Hyperbaric Medicine

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36. ANZCA Diploma of Advanced Diving and Hyperbaric Medicine

Subject to constitution clause 7 and regulation 35.

36.1. Applicability

Regulation 36 applies to all trainees undertaking the ANZCA Diploma of Advanced Diving and Hyperbaric Medicine (ANZCA Dip Adv DHM, hereafter “the diploma”) from 31 July 2017. Trainees registered for the ANZCA certificate in DHM prior to 31 July 2017 will be transitioned to the ANZCA Dip Adv DHM with credit as outlined in this regulation.

36.2. Overview

This regulation provides for the conduct of training leading to the ANZCA Dip Adv DHM and the continuing professional development requirements for diplomates and holders of the ANZCA certificate of DHM (training discontinued 31 July 2017).

DHM is a highly specialised area of medicine that is not part of mainstream university medical training in Australia and New Zealand.

The two main areas of DHM are:

1. Diving medicine: the prevention and treatment of diving-related injury, and
2. Hyperbaric medicine: the treatment of medical conditions with hyperbaric oxygen treatment (HBOT).

36.3. Definitions and abbreviations

An accredited diving and/or hyperbaric medicine unit (hereafter “accredited unit”) is one authorised by ANZCA to provide one or more trainees with supervised training experience leading to the ANZCA Dip Adv DHM.

The ANZCA DHM training agreement is a legally binding formal statement of the mutual obligations and expectations of the College and the trainee. This document must be signed by the trainee in order to register with the College and then annually acknowledged in order to maintain training registration.

The *ANZCA Advanced DHM curriculum* (“the curriculum”), the *ANZCA Handbook for Advanced DHM Training* and the *ANZCA Handbook for Advanced DHM Accreditation* (“the handbooks”) complement this regulation and set out in detail the requirements expected of trainees and accredited units for training and accreditation leading to the ANZCA Dip Adv DHM. The curriculum and handbooks are maintained electronically and the current versions are on the ANZCA website. Should there be conflict between this regulation and the handbooks, this regulation takes precedence.

The clinical placement review process comprises formal meetings between the trainee and their DHM supervisor of training after at least every 26 calendar weeks of training. Its purpose is to review trainee performance and progress. More frequent meetings may occur as required.

The DHM roles in practice are medical expert, communicator, collaborator, leader and manager, health advocate, scholar and professional. Details of these roles and their importance in the training program are outlined in *The ANZCA Advanced DHM curriculum*.

A DHM trainee is a registered medical practitioner, registered with the college for the diploma who has paid the required fees, signed a DHM training agreement and taken up a training appointment in an accredited unit.

The date of commencement of training is the date of first taking up a training appointment as a trainee in an accredited unit.

Time in this regulation, except where otherwise specified, refers to full-time equivalent (FTE) time.

Volume of practice defines the specific clinical activity requirements of the curriculum. Full details are set out in *The ANZCA Handbook for Advanced DHM Training*.

Workplace-based assessments (WBAs) are assessments that focus on trainee performance within the workplace of an accredited hyperbaric medicine unit, using a suite of assessment tools. They are formative assessments that inform the regular clinical placement review process. The WBA requirements are specified in the curriculum and *The ANZCA Handbook for Advanced DHM Training*.

36.4. Eligibility for award of the diploma

Prior to award of the diploma, trainees must have completed all training requirements as outlined in this regulation, the curriculum and *The ANZCA Handbook for Advanced DHM Training* including having been awarded a prerequisite specialist qualification acceptable to ANZCA Council. The ANZCA Diploma of Advanced DHM does not lead to eligibility for the award of ANZCA Fellowship or membership.

36.5. Time limit on training completion

36.5.1. All training requirements must be completed within five calendar years of the date of commencement of training.

36.5.2. Where a prerequisite specialist qualification has not been awarded within five calendar years of the date of commencement of DHM training, all training requirements must be completed within five years of this commencement date and a certificate of completion of training requirements is conferred. However, the diploma will not be awarded until the pre-requisite specialist qualification has been awarded.

36.5.3. If the pre-requisite specialist qualification is not awarded within five years of the date of completion of all diploma training requirements, the trainee will be deemed withdrawn from training.

36.6. Governance

ANZCA Council has overall governance of the diploma, delegating various functions to the ANZCA DHM Subcommittee and the education training and assessment (ETA) committees as outlined in regulation 2 and relevant terms of reference. All aspects of the curriculum, including the DHM examination, are developed and regularly reviewed by the ANZCA DHM subcommittee in accordance with its terms of reference. The DHM community is a small one and all functions are managed in accordance with the *ANZCA conflict of interest* policy.

36.7. Training prerequisites

To register for training, prospective trainees must either hold or have completed 104 weeks (FTE) of training for award of FANZCA, FACEM, FCICM, FRACP, FRACGP, FRNZCGP, FACRRM FAFRM (RACP) and FFPMANZCA or another qualification recognised by the ANZCA Council for this purpose. Applications in respect of other qualifications should be made to the DPA assessor via the TA unit as outlined in *The ANZCA Handbook for Advanced DHM Training*.

36.8. Trainee selection

ANZCA does not appoint trainees to accredited DHM units. The employing authority undertakes such appointments. As a condition of ANZCA accreditation, the employing authority undertakes to appoint DHM trainees according to the selection principles in *The ANZCA Handbook for Advanced DHM Training*.

36.9. Registration as a DHM trainee

36.9.1. Trainees must register for training within four calendar weeks of commencing training and pay relevant fees on registration. Failure to register within the four week timeframe may lead to time not being recognised towards training. Applications should be made to the ANZCA Training Assessment (TA) unit and include documentation as outlined in the *ANZCA Handbook for Advanced DHM Training*.

36.9.2. Although a recognised specialist qualification is required for award of the ANZCA Dip Adv DHM, trainees may commence DHM training prior to the award of the specialist qualification. However, they cannot be awarded the ANZCA Dip Adv DHM until the specialist qualification has been awarded and relevant documentation of such award is provided to ANZCA. It is recommended that this documentation is forwarded to ANZCA once the specialist qualification is obtained, rather than waiting for the application for award of the ANZCA Dip Adv DHM.

36.10. Fees

36.10.1. DHM fees include a once-off registration fee, an annual training fee, an examination fee and an annual diploma/certificate holder fee.

36.10.2. Fees are determined by ANZCA Council on an annual basis and published on the ANZCA website.

- 36.10.3. The non-refundable registration fee must be paid within four calendar weeks of commencing training (AVT). Credit will not be given for any training undertaken earlier than four calendar weeks prior to receipt by the College of the registration fee.
- 36.10.4. Trainees must pay the annual training fee by January 31 each calendar year following registration.
- 36.10.4.1. Failure to pay the annual training fee by January 31 will result in the interval between January 31 and the receipt of payment by the College being counted as interrupted training. Trainees experiencing financial hardship which makes payment impossible within the timeframe required should apply prospectively to the director of professional affairs (assessor) for special consideration. Each case will be considered on an individual basis.
- 36.10.4.2. Trainees who have not paid the annual training fee by February 28 in any calendar year will have their status changed to “not financial” and will be unable to access College resources on the website.
- 36.10.4.3. Trainees who fail to pay the annual training fee by March 31 in any calendar year will be deemed to have withdrawn from the training program and their training record will be archived. Should they subsequently wish to recommence training they will be required to submit an application for resumption to the director of professional affairs (assessor) justifying their renewed registration, and a new registration fee will apply. Those accepted for renewed registration will not be liable for fees covering the period during which they were unregistered, but they will be unable to claim any credit as recognised prior learning for training which may have been undertaken during this time.
- 36.10.5. Medical practitioners applying for recognition of prior learning under regulations 36.22 or 36.34 for training experience that pre-dates the commencement of diploma training must pay the non-refundable preliminary assessment fee.
- 36.10.6. Following assessment of recognition of prior learning, medical practitioners must pay the non-refundable recognition of prior learning award fee in order to receive the credit.
- 36.10.7. The examination fee must be paid at the time of application to sit the examination.
- 36.10.8. The examination withdrawal fee will apply to trainees withdrawing from an examination, as specified in regulation 36.19.4.

- 36.10.9. Medical practitioners who hold the diploma or the ANZCA certificate in DHM (ANZCA Cert DHM) must pay the annual diploma/certificate holder fee by January 31 each calendar year following award of the diploma.

36.11. Supervision, Clinical Supervisors and Supervisors of Training

- 36.11.1. All clinical care undertaken by DHM trainees must be supervised at all times as outlined in *The ANZCA Handbook for Advanced DHM Training* and in accordance with AS/NZ standard 4774.2.
- 36.11.2. DHM clinical supervisors are specialists, other than the supervisor of training, with relevant expertise in diving and hyperbaric medicine who have committed to clinical supervision of DHM trainees. Each DHM supervisor signs a commitment form acknowledging their familiarity with diploma training requirements and relevant ANZCA policies, along with their willingness to supervise the clinical experience of trainees, undertake workplace-based assessments and provide feedback on performance.
- 36.11.3. Each accredited unit will nominate a DHM supervisor of training (SOT) to oversee the training provided by that unit. The SOT is nominated by the accredited unit's clinical head and approved by the DHM subcommittee. The SOT is a registered medical practitioner who holds FANZCA, FACEM, FCICM or another specialist qualification acceptable to ANZCA Council for this purpose, and the ANZCA Dip Adv DHM. He or she must not be a candidate for any College examination and must have skills and experience appropriate for the appointment. Appointments will normally be for three years in the first instance, with the possibility of renewal for up to three further three year terms. Each SOT is required to sign a supervisor of training agreement. The agreement outlines the College's obligations to the SOT and the SOT's obligations to ANZCA.
- 36.11.4. DHM SOTs undertake clinical and educational supervision for DHM trainees in their accredited unit. SOTs as officers of the College and acting on its behalf must follow ANZCA processes and ensure appropriate documentation of meetings with trainees and any advice provided. Such documentation should be securely stored. Detailed requirements and processes to be followed by SOTs and units are in *The ANZCA Handbook for Advanced DHM Training*.
- 36.11.5. Where no specialist in the accredited unit holds an ANZCA DHM qualification, co-supervision is undertaken by an on-site DHM clinical supervisor (who signs off the trainee's clinical experience and undertakes workplace-based assessments) and an offsite DHM supervisor of training (who provides other educational support for the trainee including the clinical placement review process). Co-supervision arrangements for the DHM trainee must be approved prospectively by ANZCA within four calendar weeks of the date of commencement of training.

36.12. Curriculum, learning resources and training components

- 36.12.1. *The ANZCA Advanced DHM Curriculum* outlines training aims, learning outcomes and how these are assessed.
- 36.12.2. The DHM Subcommittee develops and annually updates a list of recommended teaching and learning resources that is made available on the ANZCA website.
- 36.12.3. Diploma training requirements include the following main elements: supervised clinical experience (time), volume of practice, formative workplace based assessments, a logbook, a portfolio, clinical placement reviews, courses and the DHM examination.

36.13. Clinical experience (time)

- 36.13.1. Trainees must complete 44 weeks full time equivalent (FTE) training time in an ANZCA accredited unit. Leave does not count towards this training time.
- 36.13.2. For training time to count, each attachment to an accredited unit must be for a minimum continuous period of at least one week FTE and include completion of the clinical placement review process. For example, if training at 0.2 FTE, for time to be counted there must be a minimum of at least five consecutive calendar weeks and the clinical placement review process. If training at 0.5 FTE, this requires a minimum of at least two consecutive calendar weeks and the clinical placement review process.

36.14. Volume of practice

Clinical experience must include a log of a minimum volume of practice as outlined in *The ANZCA Handbook for Advanced DHM Training*.

36.15. Formative workplace based assessments

Workplace-based assessments must be completed as outlined in the curriculum and *The ANZCA Handbook for Advanced DHM Training*.

36.16. Logbook and portfolio

Each trainee will maintain a logbook and portfolio that collates evidence of completion of training requirements as outlined in *The ANZCA Handbook for Advanced DHM Training*.

36.17. Clinical placement reviews

The clinical placement review (CPR) process must be completed as outlined in *The ANZCA Handbook for Advanced DHM Training*. CPRs must occur at least every 26 calendar weeks while undertaking clinical experience.

36.18. Courses

- 36.18.1. Trainees will complete the South Pacific Underwater Medicine Society (SPUMS) Diploma in DHM that includes a formal project completed to a publishable standard.
- 36.18.2. In order to reflect the two sub-disciplines of DHM (Diving Medicine and Hyperbaric Medicine), two periods of formal instruction must be successfully undertaken to satisfy the requirements of the ANZCA Dip Adv DHM. This allows formal training from a range of specialists in the field. It is recommended that one course is taken early in training and the other completed at any time up until the end of training.
 - 36.18.2.1. Each of these courses must meet the standard as detailed in *The ANZCA Handbook for Advanced DHM Training*. One course should be primarily Diving Medicine-oriented, whilst the other must be primarily Hyperbaric Medicine-oriented. Each course should involve a certificate of satisfactory completion.
 - 36.18.2.2. The DHM Subcommittee advises the TA unit to ensure that a list of preapproved courses recognised for this component of the ANZCA Dip Adv DHM is maintained on the ANZCA website.
 - 36.18.2.3. Applications for recognition of non-preapproved courses that meet the standard outlined in the handbook should be made prospectively to the TA unit. These applications will be assessed by the DPA assessor in consultation with the chair of the DHM Subcommittee (or nominee).
- 36.18.3. An advanced life support course, or equivalent, must have been completed within the 52 calendar weeks prior to date of completion of other training requirements, as detailed in *The ANZCA Handbook for Advanced DHM Training*. An EMAC course within the previous 104 weeks will also meet this requirement.

36.19. DHM examination

- 36.19.1. The DHM examination is a summative assessment designed to identify whether the trainee has achieved the knowledge, skills and attributes required for award of the diploma. The examination will be held on dates, at times and in venues to be determined by ANZCA Council. The examination comprises a written component and a viva section. Examinable material is set out in detail in the curriculum.
- 36.19.2. Candidates for the examination must have completed at least 26 weeks FTE clinical experience as part of DHM training at the date of application or must do so by the date of the written section of the examination. In the latter circumstance, the trainee must provide a written statement from his or her supervisor of training certifying that he or she will have completed all eligibility requirements by that date. The trainee does not need to be currently in a training post to sit the examination, although this is encouraged.

- 36.19.3. Application must be received by the manager training and assessments by the closing date that will be published at least 26 weeks prior to the DHM examination. Applications must be made on the official form and include the examination fee and all required documents. Applicants must have paid all outstanding fees.
- 36.19.4. Any candidate may withdraw his or her application in writing before the date of the written examination. Withdrawal from the examination after the closing date for applications will be subject to an examination withdrawal fee. Withdrawal on medical or compassionate grounds should be accompanied by evidence of cause within seven days of the relevant component of the examination and will be handled in accordance with processes and principles of the ANZCA vocational training program outlined in [regulation 37](#) which may include waiving the examination withdrawal fee.
- 36.19.5. The prospective candidate with a chronic illness or disability that he or she believes may impact detrimentally on performance in the examination should submit an application for consideration. If the trainee believes that such consideration should be given to his or her particular circumstances, a fully documented application should be submitted to the chair of examinations via the training assessment unit at least 18 weeks prior to the published examination closing date. Further action will be at the discretion of ANZCA Council on advice from the chair of examinations. Illness or disability will be handled in accordance with the processes and principles of the ANZCA vocational training program outlined in [regulation 37](#).
- 36.19.6. Any trainee who has been unsuccessful in three attempts at the DHM examination will not be permitted to re-sit the examination, will be deemed withdrawn from training towards the diploma and will be unable to re-register for training.
- 36.19.7. Panel of examiners and courts of examiners
- 36.19.7.1. There will be a panel of DHM examiners with members appointed by the DHM Subcommittee.
- 36.19.7.2. The tenure of appointment of each examiner will be three years (including any probationary period) and will date from 1 January following the appointment with the possibility of subsequent reappointment for up to three further three-year terms. Such reappointments will be made by the DHM Subcommittee.
- 36.19.7.3. Courts of examiners will be appointed for individual examinations by the chair of the DHM Subcommittee (or nominee). Selection will consider relevant conflicts of interest.

- 36.19.7.4. Courts of examiners will normally be selected from the current panel of examiners, but in exceptional circumstances a recently retired examiner for the DHM examination may fill a vacancy on a court of examiners at the discretion of the chair of the DHM Subcommittee (or nominee).

36.20. Leave

- 36.20.1. Leave encompasses all leave (such as annual leave, sick leave, parental leave, study leave and examination leave).
- 36.20.2. Leave from DHM training for longer than 26 calendar weeks requires that the trainee participates in a trainee re-entry to practice program as outlined in *The ANZCA Handbook for Advanced DHM Training*.
- 36.20.3. Whilst on leave, trainees can undertake any requirements of training apart from accruing time towards the required minimum 44 weeks FTE clinical experience.

36.21. Part-time training

- 36.21.1. Part-time training is permitted to a minimum of 20 per cent of the commitment of a full-time trainee in the same department or institution (i.e. 0.2 FTE). The entire diploma may be completed on a part-time basis.
- 36.21.2. Part-time training must be applied for prospectively and, to count towards DHM training, must have been approved by the director of professional affairs (assessor). Applications should be made to the TA unit.
- 36.21.3. Whilst part-time training is permitted, trainees are not able to claim more than one FTE equivalent for any training time completed.

36.22. Recognition of prior learning

- 36.22.1. A medical practitioner who has completed supervised DHM training experience that predates the commencement of DHM training may apply to have such experience recognised towards diploma training. Recognition and credit may be given for relevant clinical experience, courses or qualifications undertaken prior to commencement of diploma training. Applicants with significant DHM-related research experience may seek exemption from completing the SPUMS diploma as detailed in the *ANZCA Handbook for Advanced DHM Training*.

Award for clinical experience (time) is up to a maximum of 13 weeks (FTE). Such clinical experience must have been equivalent to that of an ANZCA DHM trainee at the time the experience was accrued, and undertaken in a unit accredited by ANZCA for the DHM Certificate at the time the experience was undertaken or else the experience must have been in a unit recognised as acceptable for postgraduate vocational training by a specialist college, university or similar authority acceptable to ANZCA.

36.22.2. Application should be made to the TA unit, including full original documentation or copies certified by a justice of the peace or equivalent authority or letters from relevant supervisors and employing authorities confirming details of experience (including leave taken). This should include, as relevant, confirmation that the training undertaken was in a unit recognised for postgraduate vocational training by a specialist college, university or similar authority acceptable to ANZCA. Refer to the *ANZCA Handbook for Advanced DHM Training* for detailed documentation requirements.

Applications will be assessed by the DPA assessor in consultation with the chair of the DHM Subcommittee (or nominee) as required.

36.22.3. All clinical experience towards the diploma must be undertaken in Australia and/or New Zealand, unless recognition of prior learning is granted under regulation 36.22.

36.23. Completion of training and award of ANZCA Dip Adv DHM

The trainee who has completed all training requirements as set out in this regulation, the curriculum and *The ANZCA Handbook for Advanced DHM Training* is eligible to apply for the ANZCA Dip Adv DHM. Such application should be to the DPA assessor via the ANZCA TA unit in writing and should include:

- Evidence of completion of a prerequisite specialist qualification (if not already provided to the college)
- Completed clinical placement review forms confirming all dates of completed clinical experience (including details about part-time arrangements) and leave dates. This must include a satisfactory final CPR assessment
- A printed copy of the logbook file and portfolio
- Original or certified copy of the SPUMS diploma
- Course completion certificates
- Any outstanding fees
- A declaration of fitness to practice.

36.24. Trainee support process and the trainee performance review processes

If, for whatever reason, the trainee is not progressing as expected through the training program, supportive interventions that use the same principles as in the [ANZCA vocational training program](#) should be put in place. Potential sources of such difficulty include examination failure, clinical performance below that expected, and personal difficulties or ill-health. Advice should be sought from the ANZCA training and assessment unit. More information is in the *ANZCA Handbook for Advanced DHM Training*.

36.25. Continuing professional development

It is a requirement for registration in Australia and New Zealand that specialists undertake continuing professional development that is relevant to their scope of practice and in accordance with the standards of the Medical Board of Australia and the Medical Council of New Zealand, respectively.

36.26. Accreditation of DHM units for training

- 36.26.1. ANZCA accredits suitable units for training time towards the diploma.
- 36.26.2. Some units are accredited for a maximum of 44 weeks FTE training time towards the diploma. Trainees may work in these units beyond the 44 weeks FTE of training time required for the diploma and accrue volume of practice and workplace based assessments. Details of the accreditation process, including the criteria used, the data required and the processes to be followed are in the *ANZCA Handbook for Advanced DHM Accreditation*.
- 36.26.3. Some units are accredited for a maximum of 22 weeks FTE training time towards the diploma. Trainees may work in these units beyond the 22 weeks of accredited training time and accrue volume of practice and workplace based assessments. However, no more than 22 weeks training time in a 22-week unit may be counted towards the required 44 weeks training time for the diploma. Details are in the *ANZCA Handbook for Advanced DHM Accreditation*.
- 36.26.4. Accreditation applies to the unit and does not specify the number of trainees that can work in the facility, unless this is limited by supervisory capacity.
- 36.26.5. All training towards the diploma may be completed at one accredited 44 week accredited training unit.

36.27. Withdrawal from training

- 36.27.1. Trainees who wish to withdraw from training should advise the college of this in writing, specifying reasons for withdrawal. This should be directed to the ANZCA TA unit and will be advised to the DHM subcommittee.
- 36.27.2. Trainees who exceed the five-year limit on completing training will be deemed to have withdrawn from training.
- 36.27.3. Trainees who have withdrawn or been withdrawn from training may subsequently re-apply for the program. An exception is where withdrawal is due to three unsuccessful attempts at the DHM examination or where the trainee has been removed from training as the result of a trainee performance review process.

36.28. Trainees with illness or disability

- 36.28.1. Trainees have a responsibility to ensure that they are fit to practise, and must seek medical advice if they are uncertain about their fitness to practise. The college does not determine fitness to practice; this is a matter for the trainee's treating medical practitioner, his or her employer, and the relevant regulatory authority granting registration to practise. The college expects to be notified of any illness or disability that would preclude safe DHM practice. Maintenance of confidentiality and privacy are paramount obligations to trainees with illness or disability; however, in cases where patient safety may be affected, the college reserves the right to notify medical boards/councils or other appropriate authorities.
- 36.28.2. On registration for the diploma, on admission to the examination and on application for the diploma, trainees are required to make a declaration of fitness to practice in DHM and an undertaking to notify the college of any future illness or disability that might compromise safe practice.

36.29. Trainees under conditions, suspended or removed from the register by a registration authority, or under other limitations (voluntary or imposed) which affect the trainee's practice

- 36.29.1. Trainees must inform ANZCA if they are subject to:
- 36.29.1.1. Agreed undertakings to limit practice.
 - 36.29.1.2. Imposition of conditions.
 - 36.29.1.3. Suspension of registration.
 - 36.29.1.4. Removal of registration.
- 36.29.2. When ANZCA becomes aware that:
- 36.29.2.1. Conditions are placed on a trainee's practice or undertakings have been agreed to limit the trainee's practice, the trainee will be placed in interrupted training from the date the conditions are imposed.
 - 36.29.2.1.1. At the earliest opportunity a trainee performance review (TPR) (regulation 37.31) must be undertaken.
 - 36.29.2.2. A trainee has been suspended from the medical register, they will be placed in interrupted training from the date of the suspension, with the addition that they will not be entitled to:
 - 36.29.2.2.1. Undertake any assessment with the ANZCA vocational training program.
 - 36.29.2.2.2. Accrue or be credited with any training undertaken during the period of suspension from the ANZCA vocational training program.

36.29.2.2.3. Should the trainee have the suspension lifted, and wish to resume approved vocational training (AVT), they must advise ANZCA of this in writing within 26 weeks of the date of the suspension being lifted.

36.29.2.2.4. A TPR (regulation 37.31) must be undertaken to determine whether the trainee may resume AVT.

36.29.2.2.5. If the trainee has not advised ANZCA that they wish to return to AVT within 26 weeks of the date of the suspension being lifted, the trainee will be removed from the ANZCA vocational training program.

36.29.2.3. If the trainee has been removed from the medical register, they will be removed from the ANZCA vocational training program.

36.29.3. If a trainee has completed all requirements of the ANZCA vocational training program and is applying for admission to fellowship at the time the registration authority's decision is imposed:

36.29.3.1. If the applicant does not hold current registration to practise at the time of application they will not be admitted to fellowship.

36.29.3.2. If the applicant has undertakings agreed with or conditions imposed on their practice by a relevant registration authority, a TPR (regulation 37.31) must be undertaken to determine whether admission to fellowship may proceed or consideration must be deferred until the agreed undertakings or imposed conditions are lifted.

36.30. Reconsideration, review and appeal

Any person who is dissatisfied with and adversely affected by a decision made under this regulation may apply to have the decision reconsidered. Subsequent applications may be made for review and then appeal. All such applications must be made under regulations [30](#) and [31](#).

36.31. Decisions about training

All applications for training, prospective approval of part-time training, recognition of prior learning, application to sit the examination, award of the diploma and any exception to this regulation in relation to DHM training should be made in writing to the TA unit.

36.32. Interpretation and non-binding decisions

36.32.1. Any decision, approval, consent or exercise of any discretion, by ANZCA Council or other committee or authority under regulation 36 will be considered on a case-by-case basis, having regard to the particular circumstances of each case.

36.32.2. Notwithstanding regulation 36, ANZCA Council may exercise or dispense other decisions after consideration of relevant circumstances.

36.32.3. Any such decision, approval, consent or exercise of discretion will not be binding on any other or future decisions or set any precedent for other or future decisions regarding regulation 36.

36.33. Communications

All enquiries, applications and communications regarding regulation 36 must be made in writing and, unless otherwise specified in this regulation, addressed to the general manager Training Assessment unit, Australian and New Zealand College of Anaesthetists, 630 St Kilda Rd, Melbourne, Victoria 3004, Australia.

36.34. Transitional requirements for trainees in training for the ANZCA certificate of DHM prior to 31 July 2017

36.34.1. All trainees registered with ANZCA prior to 31 July 2017 will receive credit for training components completed as part of training towards the ANZCA certificate of DHM as outlined in the *ANZCA Handbook for Advanced DHM Training*. Such trainees must complete all remaining requirements for the ANZCA Dip Adv DHM by July 31, 2023.

Applications for credit should be made in writing to the ANZCA TA unit. Applications made after August 28, 2017 will be considered under regulation 36.22.

36.35. Transitional requirements for those not registered for the ANZCA certificate training who have undertaken supervised experience in ANZCA accredited units between 1 August 2013 and July 31, 2017

36.35.1. Medical practitioners (“applicants”) who meet current requirements for registration as a DHM trainee, but who did not register as DHM trainees prior to August 1, 2013, and who have been in supervised positions in ANZCA-accredited DHM units before July 31, 2017, may apply to have this experience recognised towards DHM training. Credit may also be given for other courses, qualifications or research experience, completed prior to July 31, 2017, that are equivalent to diploma training components. Such applicants must complete all remaining requirements of the ANZCA Dip Adv DHM within five calendar years of the date of registering for the diploma. Applications made after August 28, 2017 will be considered under regulation 36.22.

36.36. Transitional award of diploma and recognition of prior experience

36.36.1. Holders of the ANZCA certificate of DHM and highly experienced practitioners of DHM are eligible for recognition of prior experience towards the ANZCA Dip Adv DHM as outlined in the guidelines for transitional award of diploma and recognition of prior experience. Applications for credit should be made in writing to the ANZCA TA unit and must be submitted prior to January 31, 2019.

Version control register

Version	Author	Approved by	Approval date	Sections modified	Next review
1.0	DHM Project Group	Council	February 2017	N/A	2017
1.01	TA unit	ETAEC	July 2017	36.10.3, 36.10.4, 36.10.4.1, 36.10.4.2, 36.10.4.3, 36.10.5, 36.10.6, 36.10.7, 36.10.8, 36.10.9.	2017
1.02	Education Unit	ETAEC	August 2017	36.22, 36.34, 36.35, 36.36	2017
1.03	Education Unit	ETAEC	October 2017	36.7	2018
1.4	Education Unit	EEMC	November 2021	36.11.13, 36.18.3, 36.22.3, 36.24, 36.29	2022