

Activities Report

2010



Royal Australian and New Zealand College of
Obstetricians and Gynaecologists

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Glossary

ACT	Australian Capital Territory
AoN	Area of Need
ASM	Annual Scientific Meeting
AUS	Australia
CGO	Certification in Gynaecological Oncology
CMFM	Certification in Maternal Fetal Medicine
COGU	Certification in Obstetrics and Gynaecological Ultrasound
CPD	Continuing Professional Development
CREI	Certification in Reproductive Endocrinology and Infertility
CU	Certification in Urogynaecology
DIMIA	Department of Immigration and Multicultural and Indigenous Affairs
DRANZCOG	Diploma of RANZCOG
FRANZCOG	Fellowship of RANZCOG
MRANZCOG	Member of RANZCOG
GP	General Practitioner
IMG	International Medical Graduate
ITP	Integrated Training Program
NSW	New South Wales
NT	Northern Territory
NZ	New Zealand
O&G	Obstetrics and Gynaecology
OSCE	Objective Structured Clinical Examination
OTD	Overseas Trained Doctor
OTS	Overseas Trained Specialist
OTV	Occupational Training Visas
PGY2	Post Graduate Year Two
PR&CRM	Practice Review and Clinical Risk Management
QLD	Queensland
RANZCOG	Royal Australian and New Zealand College of Obstetricians and Gynaecologists
SA	South Australia
TAS	Tasmania
VIC	Victoria

RANZCOG 2010 Activities Report

Introduction

The Royal Australian and New Zealand College of Obstetricians and Gynaecologists (RANZCOG) is dedicated to the establishment of a high standard of practice in obstetrics and gynaecology and women's health.

The College trains and accredits doctors throughout Australia and New Zealand in the specialties of obstetrics and gynaecology so that they are capable - professionally and psychologically - of providing the highest standards of health care.

The College also supports research into women's health and acts as an advocate for women's health care by forging productive relationships with individuals, the community and professional organisations, both locally and internationally.

The Vision of the College:

RANZCOG will pursue excellence in the delivery of health care to women and their families throughout their lives.

RANZCOG will achieve its Vision by:

- Innovative training,
- Certification,
- Accreditation, and
- Continuing education supported by active evaluation of the effectiveness of those programs.

This inaugural Activities Report is provided to the community to be a comprehensive account of College activities throughout 2010. It focuses on providing details of the Obstetric and Gynaecological workforce, as well as information regarding training of Fellows, Subspecialists, and Diplomates across Australia and New Zealand, breaking down data into useful subcategories, such as geographical locations, gender, and age demographics.

Fellowship Training Program

The primary role of RANZCOG is to train and accredit doctors throughout Australia and New Zealand in the specialties of obstetrics and gynaecology so that they are capable - professionally and psychologically - of providing the highest quality health care for women.

Postgraduate training toward Fellowship of the College and recognition as a specialist in Obstetrics and Gynaecology in Australia and New Zealand is offered by RANZCOG to any graduate from an Australian or New Zealand medical school who has completed PGY2 or above, and who is successful in gaining a place on the College training program through the competitive application process. International Medical Graduates who have completed the requirements necessary to obtain the Australian Medical Council certificate are also eligible to apply. Generally, applicants should have full registration with the Medical Board of Australia or the Medical Council of New Zealand, and be able to meet any relevant residency requirements.

The MRANZCOG/FRANZCOG Training Program consists of a four year Integrated Training Program (ITP) followed by a two year Elective Program. The College does have a Recognition of Prior Learning policy (available at <http://www.ranzcog.edu.au/prospective/pdfs/RPL-policy.pdf>) that can result in a shortening of the time taken to complete the program.

FRANZCOG Training Program Review Working Party

In 2010, the College Executive and Council endorsed a comprehensive review of the FRANZCOG Training Program, with the intention of "...ensure(ing) that it is educationally sound and able to meet the changing workforce needs of Australia and New Zealand into the foreseeable future, noting the environment in which women’s healthcare is now delivered." This review includes an examination of the current structure of the Training Program, the methods of assessment, and the outcomes of the Training Program.

Table 1. Applications for 2010 FRANZCOG training positions by region and gender

	NSW ACT*	VIC	QLD	SA NT*	WA	TAS	AUS	NZ	Total
Applications	54	53	51	31	24	16	229	22	251
Interviews	32	32	24	9	20	6	123	21	144
Female offers	15	21	13	4	3	0	56	13	69
Male offers	6	3	6	-	2	2	19	4	23
All offers	21	24	19	4	5	2	75	17	92

** Combined ITPs that have rotations to both regions*

Chart 1. FRANZCOG trainees by year and gender

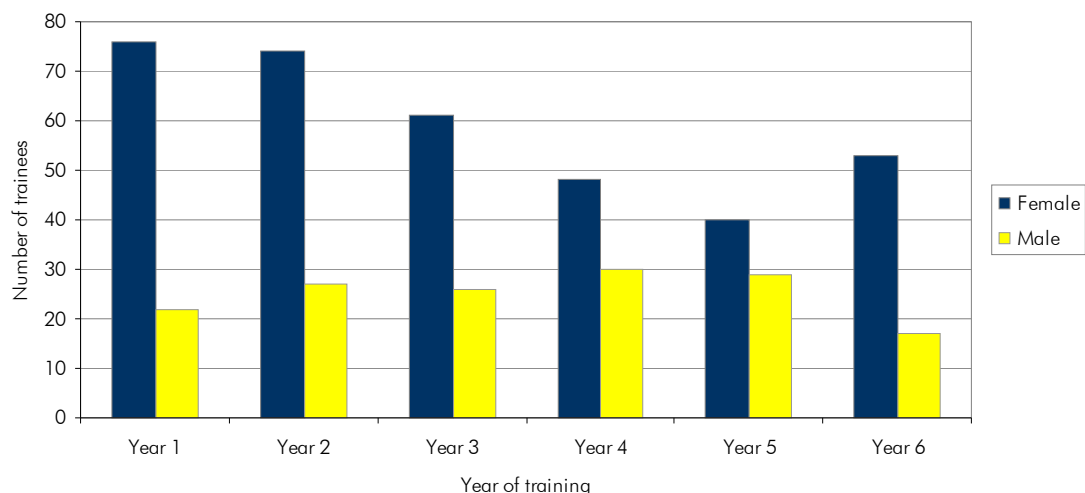


Table 2. Total numbers of FRANZCOG trainees in accredited positions in 2010

	NSW	VIC	QLD	SA	WA	TAS	NT	ACT	AUS	NZ	Total
Year 1	23	25	17	5	5			2	77	21	98
Year 2	22	26	19	4	5	2	1	2	81	20	101
Year 3	20	21	19	5	5	3		1	74	13	87
Year 4	21	11	18	6	4	1		2	63	15	78
Year 5	20	17	15	1	2	1		3	59	10	69
Year 6	26	20	9	2	4	2		1	64	6	70
TOTAL	132	120	97	23	25	9	1	11	418	85	503

Table 3. FRANZCOG Trainees in Year 1, 2010

YEAR 1	NSW	VIC	QLD	SA	WA	TAS	NT	ACT	NZ	Total
Female	18	22	14	4	2	0	0	1	15	76
Male	5	3	3	1	3	0	0	1	6	22
Part-time Female										
Part-time Male										
Leave >6 months Female		2								2
Leave >6 months Male										
Ceased training Female	1									1
Ceased training Male										

Table 4. FRANZCOG Trainees in Year 2, 2010

YEAR 2	NSW	VIC	QLD	SA	WA	TAS	NT	ACT	NZ	Total
Female	19	19	8	4	4	1	1	2	16	74
Male	3	7	11	0	1	1	0	0	4	27
Part-time Female										
Part-time Male										
Leave >6 months Female	2		3	1						6
Leave >6 months Male										
Ceased training Female					1					1
Ceased training Male										

Table 5. FRANZCOG Trainees in Year 3, 2010

YEAR 3	NSW	VIC	QLD	SA	WA	TAS	NT	ACT	NZ	Total
Female	13	15	11	5	4	2	0	0	11	61
Male	7	6	8	0	1	1	0	1	2	26
Part-time Female		1		1						2
Part-time Male										
Leave >6 months Female	3		4						2	9
Leave >6 months Male										
Ceased training Female	1	1	1							3
Ceased training Male										

Table 6. FRANZCOG Trainees in Year 4, 2010

YEAR 4	NSW	VIC	QLD	SA	WA	TAS	NT	ACT	NZ	Total
Female	11	8	9	5	2	0	0	2	11	48
Male	10	3	9	1	2	1	0	0	4	30
Part-time Female	2	1	1	1					1	6
Part-time Male										
Leave >6 months Female	4	6	1						3	14
Leave >6 months Male	2									2
Ceased training Female										
Ceased training Male										

Table 7. FRANZCOG Trainees in Year 5, 2010

YEAR 5	NSW	VIC	QLD	SA	WA	TAS	NT	ACT	NZ	Total
Female	14	8	7	0	2	1	0	1	7	40
Male	6	9	8	1	0	0	0	2	3	29
Part-time Female	1									1
Part-time Male										
Leave >6 months Female	2	1	3						2	8
Leave >6 months Male	1									1
Ceased training Female	1									1
Ceased training Male					1					1
Private practice* Female	1				1					2
Private practice* Male		1	1	1						3

Table 8. FRANZCOG Trainees in Year 6, 2010

YEAR 6	NSW	VIC	QLD	SA	WA	TAS	NT	ACT	NZ	Total
Female	18	16	7	1	3	1	0	1	6	53
Male	8	4	2	1	1	1	0	0	0	17
Part-time Female		2							1	3
Part-time Male										
Leave >6 months Female		2	1						2	5
Leave >6 months Male										
Ceased training Female		1								1
Ceased training Male	2		1							3
Private practice* Female		2								2
Private practice* Male										

*Training in private practice for at least 6 months in 2010

Hospital Accreditation

The Integrated Training Program (ITP) is based in major teaching hospitals, outer suburban and rural/provincial hospitals accredited for such training by the College. A combination of these different types of hospitals forms a consortium, each known as an Integrated Training Program. An ITP would normally comprise at least two sites and could be offered by:

- A tertiary hospital and a number of peripheral/rural hospitals;
- Two or more tertiary hospitals;
- All of the teaching hospitals within a state or region;
- Three or more hospitals, at least one of which is a tertiary hospital, in different states or regions;
- Three or more hospitals, at least one of which is a tertiary hospital, in different countries.

A rigorous initial application process, involving both State and Federal Training Accreditation Committees, is required to become an accredited training site within an ITP.

The objectives of accreditation of RANZCOG training sites are:

- To ensure that the core requirements for clinical and educational experience as defined in the RANZCOG curriculum are being met for all trainees in participating hospitals in each ITP.
- To assist the hospitals in their role as training providers – not just service providers – by identifying factors that are adversely affecting their capacity to deliver effective and supported training to RANZCOG trainees.
- To work with the hospital – and with the relevant local Training and Accreditation Committee – to formulate strategies which will maximise training opportunities and ensure efficient and safe service delivery provision by RANZCOG trainees

A follow-up accreditation visit takes place at the end of the first year of accreditation. A regular four-yearly re-accreditation cycle is in place which involves either paper-based or site re-accreditations. There are 90 accredited ITP training sites, 77 in Australia and 13 in New Zealand

Table 9. Summary of Re-accreditation visits for 2010

Initial re-accreditation hospital visits	Australia	NZ	Total
Re-accreditation visits completed in 2010	13	1	14
Number of sites given full 4 year accreditation rating	5	1	6
Number of sites given provisional 4 year accreditation	8	0	8
Number of sites given provisional 3,2, or 1 year accreditation	0	0	0

Diplomate Training Programs

The DRANZCOG training program offers training for Australian doctors who are currently in their second or subsequent postgraduate year and who wish to:

- Provide shared ante and postnatal care with specialist obstetricians, GP obstetricians or a specialist hospital
- Provide office gynaecology
- Provide family planning
- Manage the antenatal care of low to moderate risk patients
- Perform normal deliveries and assisted deliveries
- Perform basic gynaecological procedures

GP Diploma (DRANZCOG)

The diploma qualification involves a six-month training program for general practitioners/residents who wish to provide shared ante and postnatal care with specialist obstetricians, GP obstetricians or a specialist hospital.

Advanced GP Diploma (DRANZCOG Advanced)

This qualification involves the attainment of skills in advanced obstetrics and gynaecology, which will be practiced predominantly by rural GPs. It requires an additional six-month training program after completing the DRANZCOG, offering extended training for GP obstetricians in addition to the skills obtained through the DRANZCOG program.

The Diploma program involves a minimum of 6 months of hospital-based O&G training. Trainees who have satisfactorily completed, or are in the process of completing prospectively approved training must apply to sit the DRANZCOG Written and Oral Examinations. Each examination is held twice a year and candidates must pass the Written Examination before sitting the Oral Examination.

Diploma Review

The curriculum and training program for the DRANZCOG and DRANZCOG Advanced have been extensively reviewed and, in July 2010, the College Council accepted and passed a new three (3) tier model of post-nominal qualifications for what is collectively known as the Diploma Training Program. The DRANZCOG and DRANZCOG Advanced will be complemented by a Certificate of Women’s Health for doctors who wish to increase their knowledge in aspects of women’s health that centres primarily on office-based care. It is anticipated that the model will be implemented for enrolments in the first half of 2011.

Table 10. DRANZCOG Trainees, 2010

	NSW	VIC	QLD	SA	WA	TAS	NT	ACT	Total
DRANZCOG									
Female	46	70	28	8	38	2	8	3	203
Male	11	25	6	2	8	3	4	0	59
Subtotal	57	95	34	10	46	5	12	3	262
DRANZCOG Advanced									
Female	4	5	12	2	6	0	1	0	30
Male	0	8	7	0	3	2	0	0	20
Subtotal	4	13	19	2	9	2	1	0	50
TOTAL	61	108	53	12	55	7	13	3	312

Subspecialty Training Programs

RANZCOG offers five subspecialty training programs of three years duration in particular areas of practice:

Certification in Reproductive Endocrinology and Infertility (CREI) A certified REI subspecialist should demonstrate the comprehensive management of patients with reproductive endocrine disorders and infertility.

Certification in Maternal Fetal Medicine (CMFM) A certified MFM subspecialist should demonstrate advanced knowledge of the obstetrical, medical and surgical complications of pregnancy and their effect on both the mother and the fetus, and expertise in the most current approaches to diagnosis and treatment of patients with complicated pregnancies.

Certification in Gynaecological Oncology (CGO) A certified gynaecological oncologist subspecialist should demonstrate comprehensive management of women with a genital malignancy.

Certification in Urogynaecology (CU) A certified subspecialist in Urogynaecology should demonstrate comprehensive management of patients with urogynaecological disorders.

Certification in Obstetrical and Gynaecological Ultrasound (COGU) A certified COGU subspecialist should demonstrate advanced knowledge in all aspects of ultrasound diagnosis relating to obstetrics and gynaecology, including ultrasound guided interventional diagnostic and therapeutic techniques.

Table 11. Accredited Subspecialty training units by region

	NSW	VIC	QLD	SA	WA	TAS	NT	ACT	AUS	NZ	Total
CREI	2	3	1	2	1				9	3	12
CMFM	7	2	2	1	1			1	14	2	16
CGO	4	3	2	2	1			1	13		13
CU	3	3	3		1				10		10
COGU	4	2							6		6
TOTAL	20	13	8	5	4			2	52	5	57

Table 12. Applications for 2010 Subspecialty training positions

	CREI	CMFM	CGO	CU	COGU	Total
Applications	6	9	3	5	4	27
Interviews	5	9	3	5	4	26
Female offers	4	4	1	3	4	16
Male offers	-	3	2	1	-	6
All offers	4	7	3	4	4	22

Table 13. Active Subspecialty Trainees 2010

Year 1	NSW	VIC	QLD	SA	WA	ACT	NZ	Total
CREI	2				1			3
CMFM						1	2	3
CGO	1							1
CU	2	2						4
COGU	1	1						2
Subtotal	6	3	0	0	1	1	2	13
Year 2	NSW	VIC	QLD	SA	WA	ACT	NZ	Total
CREI	2	1					3	6
CMFM	3		1				1	5
CGO	2		1					3
CU								
COGU	1	2						3
Subtotal	8	3	2	0	0	0	4	17
Year 3	NSW	VIC	QLD	SA	WA	ACT	NZ	Total
CREI	6	2	1	1			3	13
CMFM	3	1		1				5
CGO	2	1						3
CU		3	1					4
COGU	2	1						3
Subtotal	13	8	2	2	0	0	3	28
TOTAL	27	14	4	2	1	1	9	58

Table 14. Subspecialty trainees by year of training and gender

		Year 1	Year 2	Year 3	Total
CREI	Female	3	6	7	16
	Male	0	0	6	6
CMFM	Female	1	5	4	10
	Male	2	0	1	3
CGO	Female	1	0	2	3
	Male	0	3	1	4
CU	Female	3		2	5
	Male	1		2	3
COGU	Female	2	3		5
	Male	0	0	3	3
TOTAL		13	17	28	58

Accreditation and Re-accreditation of Subspecialty training sites

During 2010, five new units were accredited for Subspecialty training and seven units were re-accredited by their respective Subcommittees. Site visits were conducted to four REI training units and to two MFM units as per the terms of their accreditation.

Table 15. Subspecialty training sites re-accredited in 2010

Subspecialty	NSW	QLD	Singapore	NZ	Total
CREI	1			3	4
CGO			1	1	2
COGU	1				1

Table 16. Subspecialty training sites – initial accreditation in 2010

Subspecialty	NSW	QLD	Total
CMFM	2		2
COGU	1		1
CU	1	1	2

Examinations

The MRANZCOG Written Examination is part of the assessment for the MRANZCOG qualification. The MRANZCOG Written Examination currently consists of two papers:

- A multiple choice question (MCQ) paper of 120 questions.
- A short answer question paper consisting of 12 questions, all of equal value.

Both papers are standard set on an examination by examination basis.

The MRANZCOG Oral Examination is part of the assessment for the MRANZCOG qualification. The MRANZCOG Oral Examination is a highly structured examination, consisting of 10 stations, designed to assess the clinical competence (including reasoning and judgment) of a candidate in the examination, diagnosis and management of clinical problems. The examination is standard set on an examination by examination basis.

Table 17. MRANZCOG Examination Pass Rates, 2010

	No. of candidates	No. passed	Pass rate (%)
MRANZCOG Written Examination	166	100	60.2
MRANZCOG Oral Examination	89	78	87.6

The DRANZCOG Written Examination is made up of 150 questions in multiple choice format. The DRANZCOG Oral Examination is an Objective Structured Clinical Examination (OSCE).

Table 18. DRANZCOG Examination Pass Rates, 2010

	No. of candidates	No. passed	Pass rate (%)
DRANZCOG Written Examination	193	133	68.9
DRANZCOG Oral Examination	140	129	92.1

A written examination is part of the assessment for each Subspecialty qualification. **Subspecialty written examinations** are held in August. The three-hour examination comprises 12 short answer questions (SAQs), or a mixture of SAQs and short essay-type questions.

An oral examination is also part of the assessment for each Subspecialty qualification. **Subspecialty oral examinations** take approximately 3 hours and 20 minutes. Candidates rotate through nine stations, each of 15 minutes' duration.

*Table 19. Subspecialty Examination Pass Rates, 2010**

	No. of candidates	No. passed	Pass rate (%)
Subspecialty Written Examinations	17	12	58.8
Subspecialty Oral Examinations	11	7	63.6

* Pursuant to College policy, where small numbers may impinge on the rights of individuals under relevant privacy principles and legislation, data related to individual examinations is not published. As such, only overall data for subspecialty written and oral examinations conducted during 2010 is provided.

Overseas Trained Doctors/ International Medical Graduates

RANZCOG is the body formally appointed by the Medical Board of Australia to conduct assessments of International Medical Graduates (IMGs) who possess overseas qualifications in obstetrics and gynaecology and who wish to be recognised as a specialist in this field in Australia. Assessment is undertaken of the comparability of an applicant’s training, qualifications and experience relative to that of an Australian trained specialist. The College also undertakes such assessments in New Zealand for the Medical Council of New Zealand in the capacity of a Branch Advisory Body (BAB) to the Council.

Elevation to Fellowship of the College is governed by regulations that may be found in the College Training Program Handbook, available at <http://www.ranzcog.edu.au/publications/pdfs/education/Training-Handbook.pdf> .

The Area of Need (AoN) process aims to meet gaps in service delivery in Australia, primarily in rural areas where there is an acute shortage of practitioners, including obstetricians and gynaecologists. The College undertakes assessment of IMGs with overseas specialist qualifications relative to a specific position description to determine whether the applicant is able to safely undertake the AoN position in question.

Further information in regard to specific aspects of the IMG assessment processes conducted by the College may be found at <http://www.ranzcog.edu.au/overseas/index.shtml>

Table 20. Applications from OTS/IMG in 2010 – AUSTRALIA

Applications received from OTS/IMGs in 2010	Number	%
OTS Applications*	51	
AoN applications	7	
Not eligible for interview	5	9.8
Eligible for interview**	46	90.2

** Includes applications assessed concurrently with AoN*

*** One applicant deemed eligible for interview did not proceed*

Table 21. Assessment Outcomes for OTS/IMG in 2010 – AUSTRALIA

Assessment Outcomes	Number	%
Substantially comparable - no period of oversight	6	13.3
Substantially comparable with a period of oversight	22	48.9
Partially comparable	10	22.2
Not comparable	7	15.5
Suitable for AoN	7	100%

Table 22. Applications from OTS/IMG in 2010 – NEW ZEALAND

New Zealand IMG Interview Outcomes in 2010	Number	%
Equivalent	10	83%
As satisfactory as	-	-
Neither Equivalent nor As satisfactory as	2	17%

Occupational Training Visas/ Short-Term Training Visas

Occupational Training Visas (OTVs) are available from the Australian Government's Department of Immigration & Multicultural and Indigenous Affairs (DIMIA) and allow overseas trained doctors to get training in obstetrics and gynaecology in short-term positions in Australian hospitals (i.e. usually of 12 - 24 months duration).

The College received 28 applications for OTVs and all of these were successful.

Workforce

RANZCOG collects annual demographic data on the fellowship. This data has enabled the College to gain a greater understanding of the age gender composition of the fellowship. Results have demonstrated that in Australia and New Zealand:

- There is increasing feminisation of the specialist obstetric and gynaecology workforce. In 2000, 57% of trainees were female; this has risen to 71% in 2010. During the same period the % of female Fellows has increased from 22% in 2000 to 40% in 2010, and
- The Australian obstetric workforce is ageing with the number of Fellows over 60 years increasing from 287 in 2005 to 398 in 2010.

In addition, RANZCOG has conducted regular workforce surveys in 2000, 2003 and 2006. In 2009 an on line practice profile was introduced to provided information on the nature and scope of obstetric and gynaecology practice in Australia and New Zealand.

The following data has been collated from the College database and records, in order to show the changing demographics of the O&G workforce. More detailed reporting on workforce data will be available in the Practice Profile report, due to be released in June 2011.

Chart 2. Australian and New Zealand Fellows by gender and age group

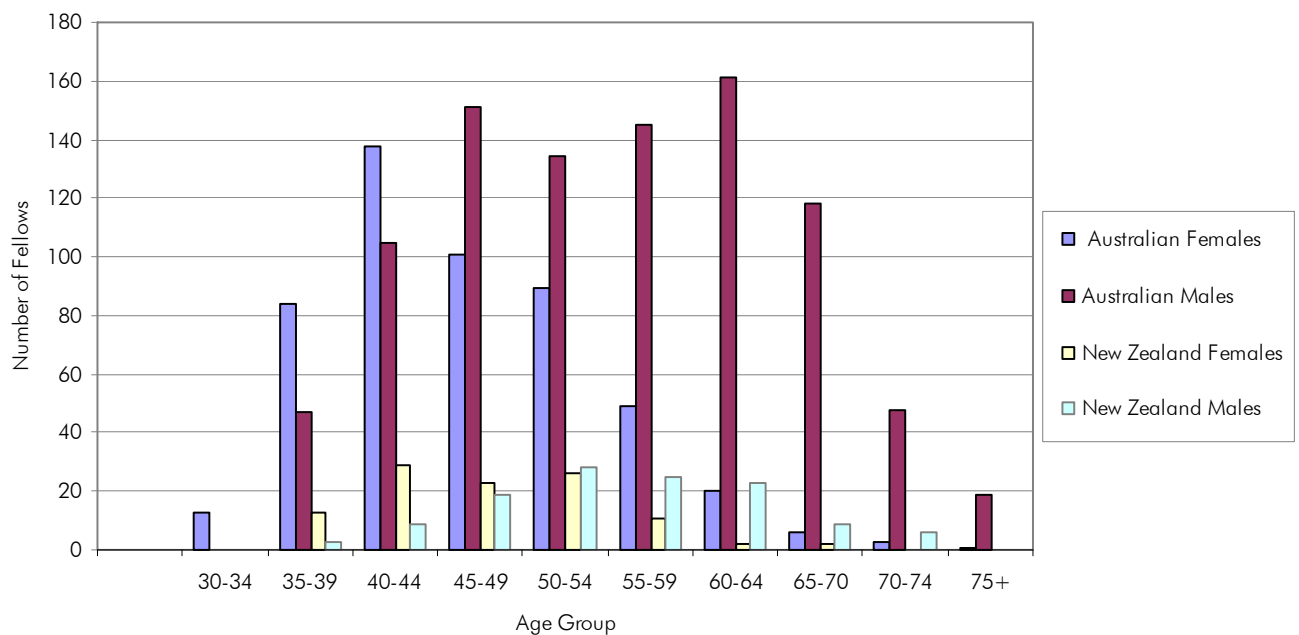


Chart 3. Comparison of the age distribution of the 2005 and 2010 O&G Workforce

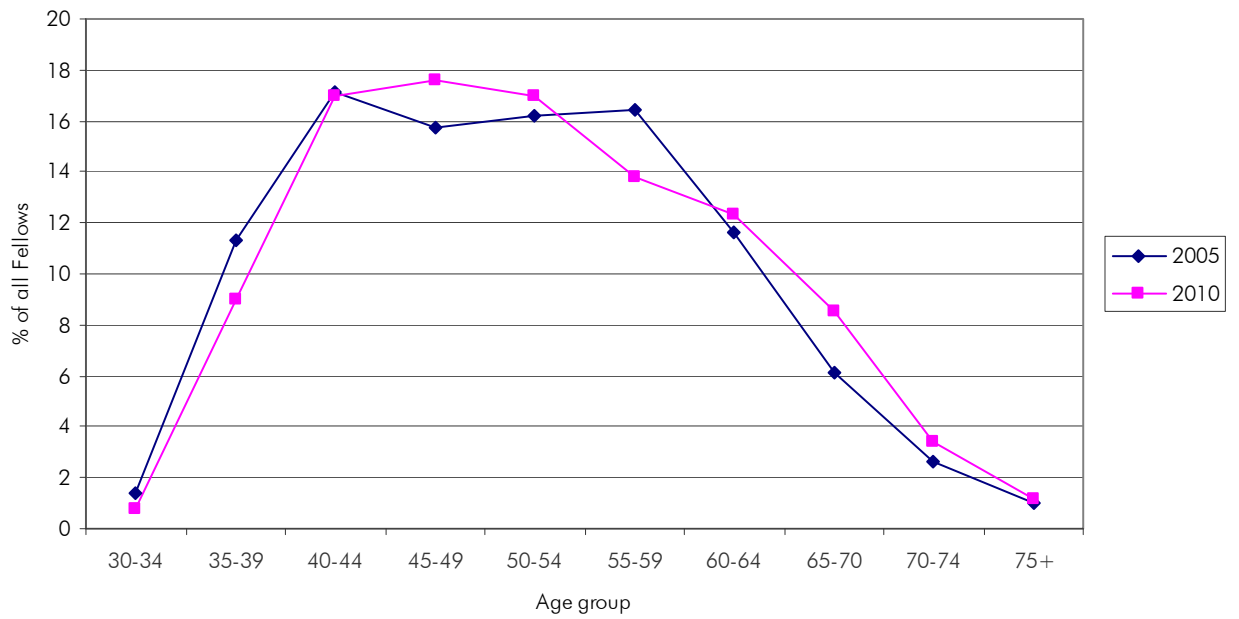


Chart 4. Comparison of the gender distribution of the 2005 and 2010 O&G Workforce

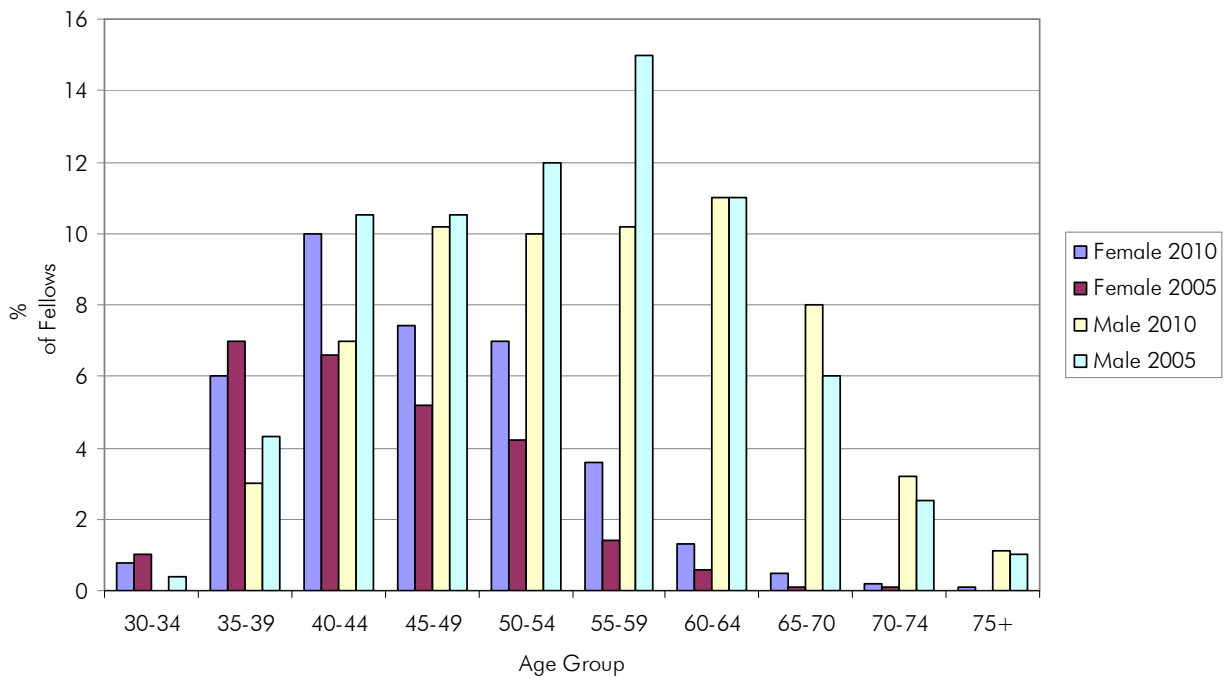


Table 23. The Changing O&G Workforce – 2005-2010

Age group	AUS	NZ	Total 2010	2010%	Total 2005	2005%	% change since 2005
30-34							
Female	13		13	0.8	14	1.0	-0.3
Male	0		0	0.0	5	0.4	-0.4
Total	13		13	0.8	19	1.4	-0.6
35-39							
Female	84	13	97	5.8	95	7.0	-1.2
Male	47	3	50	3.0	58	4.3	-1.3
Total	131	16	147	8.8	153	11.3	-2.5
40-44							
Female	138	29	167	10.0	90	6.6	3.4
Male	105	9	114	6.8	143	10.5	-3.7
Total	243	38	281	16.8	233	17.2	-0.3
45-49							
Female	101	23	124	7.4	71	5.2	2.2
Male	151	19	170	10.2	143	10.5	-0.4
Total	252	42	294	17.6	214	15.8	1.8
50-54							
Female	89	26	115	6.9	57	4.2	2.7
Male	134	28	162	9.7	157	11.6	-1.9
Total	223	54	277	16.6	214	15.8	0.8
55-59							
Female	49	11	60	3.6	19	1.4	2.2
Male	145	25	170	10.2	202	14.9	-4.7
Total	194	36	230	13.8	221	16.3	-2.5
60-64							
Female	20	2	22	1.3	8	0.6	0.7
Male	161	23	184	11.0	151	11.1	-0.1
Total	181	25	206	12.3	159	11.7	0.6
65-69							
Female	6	2	8	0.5	2	0.1	0.3
Male	118	9	127	7.6	81	6.0	1.6
Total	124	11	135	8.1	83	6.1	2.0
70-74							
Female	3		3	0.2	2	0.1	0.0
Male	48	6	54	3.2	34	2.5	0.7
Total	51	6	57	3.4	36	2.7	0.8
75+							
Female	1		1	0.1		0.0	0.1
Male	19		19	1.1	9	0.7	0.5
Total	20		20	1.2	9	0.7	0.5
Unknown		11	11	0.7	17	1.3	-0.6
Total Female	504	106	610	36.7	362	26.7	10.3
Total Male	928	122	1050	63.2	996	73.3	-10.3
Grand TOTAL	1432	228	1660	N/A	1358	N/A	23.0

Table 24. Number of Fellows who retired in 2010

	ACT	NSW	NT	QLD	SA	TAS	VIC	WA	AUS	NZ	Total
Female	0	0	0	0	0	0	0	0	0	0	0
Male	0	5	0	6	2	2	6	1	22	3	25

Table 25. New Fellows by Region, Gender and Age Group in 2010

Age Group	ACT	NSW	NT	QLD	SA	TAS	VIC	WA	AUS	NZ	Overseas	Total
30-34												
Female		3		1	1	1	3	1	10			10
Male					1				1			1
Total		3		1	2	1	3	1	11			11
35-39												
Female	1	6		1			3		11	1	1	13
Male		2			2		3	1	8		1	9
Total	1	8		1	2		6	1	19	1	2	22
40-44												
Female		6		1	1		6	2	16	1		17
Male		3		1			2	3	9			9
Total		9		2	1		8	5	25	1		26
45-49												
Female		2			1		1		4	2		6
Male		4		3	1	1	2		11			11
Total		6		3	2	1	3		15	2		17
50-54												
Female							2	1	3			3
Male							1	1	2	1		3
Total							3	2	5	1		6
55-59												
Female												
Male								1	1		1	2
Total								1	1		1	2
60+												
Female												
Male								1	1	1		2
Total								1	1	1		2
Unknown												
Female										1		1
Male											1	1
Total										1	1	2
Total Female	1	17		3	3	1	15	4	44	5	1	50
Total Male		9		4	4	1	8	7	33	2	3	38
Grand Total	1	26		7	7	2	23	11	77	7	4	88

Associate Members

Associate Membership is open to any medical practitioner who holds a specialist qualification in the area of obstetrics or gynaecology that was not awarded by RANZCOG and who is practising unsupervised providing specialist women's health services in Australia, New Zealand or the Pacific Islands. Associate Members are required to participate in and satisfactorily complete CPD activities of the College.

Educational Affiliates

Registered medical practitioners working as a specialist in obstetrics and gynaecology or more broadly in Women's Health in Australia or New Zealand who are not a Fellow of RANZCOG, and are not eligible for Associate Membership may apply to become an Educational Affiliate; for example, AoN practitioners in Australia and IMGs practising in New Zealand under a provisional vocational scope of practice. An Educational Affiliate is encouraged but not required to participate in ongoing CPD.

Table 26. New Associate Members and Educational Affiliates in 2010

Associate Members	0
Educational Affiliates	28

Table 27. Ratio of O&G per population in 2010

Region	No. of active O&Gs	Population	Ratio of O&G per population
ACT	27	358 900	1:13293
NSW	451	7 238 800	1:16051
NT	13	229 700	1:17669
QLD	289	4 516 400	1:15628
SA	116	1 644 600	1:14178
TAS	31	507 600	1:16374
VIC	384	5 547 500	1:14447
WA	121	2 296 400	1:18979
AUS Total	1432	22 342 400	1:15602
NZ	239	4 370 000	1:18285

Sources: Australian Demographic Statistics, June Quarter 2010; Statistics New Zealand June 30 estimates; RANZCOG Annual Statistics, Dec 2010.

Continuing Professional Development

RANZCOG continuing professional development (CPD) program is designed to facilitate three endeavours: training, continuing education and review. Practitioners' regular review of practice is followed up by setting priorities for change, and acting in order to effect these changes. The rewards are in the satisfaction and energy that come with new achievements.

The program offers Fellows guidance in planning education pathways and clinical practice improvement that are best suited to their own professional needs and interests.

In 1986, RANZCOG fellowship become linked to a mandatory program of continuing education and recertification and in 1999, it became a three year cyclic CPD program.

Fellows/Subspecialist are required to accrue 150 points in continuing professional development activities per three year cycle with a minimum of 25 of those points in the area of practice review and clinical risk management (PR&CRM). Each year five per cent of the Fellowship are randomly selected for a verification check. These Fellows are asked to provide verification documentation to support their claims.

In 2010:

- 323 Fellows and 40 Subspecialists completed their 3 year CPD cycle
- 16 were randomly selected for a Verification Check. 15 of these successfully completed the check and one received an exemption, having commenced a new CPD period as result of being certified as a subspecialist.

Appeals

The RANZCOG Appeals process is a two-tier process that enables a person who is aggrieved by a College decision to request an informal review followed by a formal appeal in respect of the decision. Formal appeals may be lodged according to one or more of the following grounds:

- (a) that an error in law or in due process occurred in the formulation of the original decision;
- (b) that relevant and significant information, whether available at the time of the original decision or which became available subsequently, was not considered or not properly considered in the making of the original decision;
- (c) that irrelevant information was considered in the making of the original decision;
- (d) that procedures that were required by College policies to be observed in connection with the making of the decision were not observed;
- (e) that the original decision was made for an improper purpose;
- (f) that the original decision was made in accordance with a rule or policy without regard to the merits of the particular case;
- (g) that the original decision was clearly inconsistent with the evidence and arguments put before the body making the original decision.

The Appeals Procedures may be accessed at Section 19 of the College Regulations, available in the RANZCOG Training Program Handbook at <http://www.ranzcog.edu.au/publications/pdfs/education/Training-Handbook.pdf> .