1. **Statement**

This document outlines the assessment process for eligible senior medical officers to participate in the advancement process to eminent (MO3) and pre-eminent (MO4) status.

2. **Advancement process**

2.1 **Eligibility**

Medical officers covered by the *Medical Officers (Queensland Health) Award – State 2015* are eligible to apply for advancement to eminent or pre-eminent status, if they:

- are to be registered as or be eligible for registration as a specialist in Australia (excluding Specialist General Practitioner, level 13-17 and Specialist General Practitioner - Senior Status, level 18)
  
  and

- have seven or more years of satisfactory performance as a specialist
  
  and

- have progressed to or been appointed to the classification of Staff Specialist - Senior Status (levels 25 - 27, known as MO2-1 to MO2-3) or are appointed at classification of Recognised Advance Practitioner - Senior Status (levels 24 - 25, known as C3-1 to C3-2).

Staff Specialists - eminent status (MO3) are eligible to apply for assessment for pre-eminent status (MO4).

Eminent and pre-eminent status is portable within Queensland Health from one role to another providing:

- coverage continues under the *Medical Officers (Queensland Health) Award – State 2015* or a succession award
  
  and

- employment status is either full-time or part-time.

MO3 and MO4 level positions cannot be established or advertised.

2.2 **Assessment panel**

For each assessment round an assessment panel will be determined in accordance with the Advancement: Senior medical officers to eminent (MO3) and pre-eminent (MO4) status HR Policy B10.

The Director-General will review the appointment of the chair of each panel for each round.
The assessment panel is responsible for:

- reviewing and moderating applications received in accordance with moderation rules agreed by the panel
- making recommendations to the Director-General and relevant Health Service Chief Executive regarding the appointment of successful applicants to MO3 and MO4 level
- providing a report to the Director-General detailing the panel’s views for the Director-General to make the final determination when a unanimous decision cannot be reached by the panel regarding an application and
- auditing of selected applications.

### 2.3 Independent audit and appeal panel

For each assessment round an independent audit and appeal panel will be established.

The Director-General will review the appointment of the chair of this panel.

The independent audit and appeal panel is responsible for:

- assessing and auditing applications received from a member of the assessment panel and
- reviewing appeals received from the application round.

### 2.4 Audit requirements

For each assessment round, a number of applications will be randomly selected for audit by the assessment panel. As documentary evidence is generally not required to be submitted with an individual’s application, the panel may also request additional documentation from applicants for moderation.

All applicants must be able to provide documentary evidence in support of their application, if requested by the panel, within 14 days of the request. Documentation requested may include, but is not limited to:

- relevant role descriptions/list of duties
- publications
- evidence of completion of qualifications
- research results
- curriculum vitae (CV)
- committee minutes or other relevant documentation
- evidence regarding applicant’s performance.

Where supporting documentation cannot be provided, at the discretion of the panel, an applicant may provide a statutory declaration (provided in accordance with the *Oaths Act 1867*) detailing the reasons for significant difficulty in obtaining documentary evidence.

The applicant is responsible for providing all the necessary documentation to support their application in English, or certified English translations.
2.5 Privacy notice to applicants

Queensland Health is collecting your personal information for the purposes of administering the advancement process to eminent (MO3) and pre-eminent (MO4) status, pursuant to the Advancement: Senior medical officers to eminent (MO3) and pre-eminent (MO4) status HR policy B10.

The application requires you to consent to Queensland Health and relevant parties using your personal information to determine suitability for entry and participation in the advancement process.

The relevant Chief Executive (CE) to the application will be requested to execute an authority confirming there have not been substantiated unsatisfactory performance issues with regards to your engagement during the last five years. A review of your personal information, including making contact with individuals and/or organisations associated with your application (whether identified within your application or not), to confirm your eligibility may be undertaken by Queensland Health and/or another stakeholder party to review the application to determine suitability for entry and participation.

Please note, the panel will likely retain a broad range of stakeholder representatives who will have access to your personal information. An external probity advisor may be engaged to review applications.

A copy of your outcome letter will be given to the relevant Department of Health division/Hospital and Health Service.

Giving consent means your personal information will be disclosed to relevant parties to determine your suitability for entry and participation. Queensland Health may disclose your personal information to professional and/or regulatory bodies to validate your qualifications and/or standing. Queensland Health is obligated to manage your personal information in accordance with the Information Privacy Act 2009 (Qld).

Further information about how Queensland Health is obligated to manage your personal information, is available at https://www.health.qld.gov.au.

2.6 On-line application process

Applicants apply online through the Queensland Health intranet. Applicants should refer to Attachments One and Two for assistance in completing an on-line application.

Alternatively, current Queensland Health applicants that do not have access to the Queensland Health intranet can email the MO3/MO4 Secretariat (MO3/MO4Advancement@health.qld.gov.au) to request an application form.

Only those applicants who have been directly provided with the application form by the MO3/MO4 Secretariat are able to submit their application in this format within the round’s opening and closing dates.

2.7 External applicants

Senior medical officers who have been recently appointed and have commenced or are due to commence employment at C3-1 to C3-2 or MO2-1 to MO2-3 and who meet the eligibility criteria, may apply for eminent or pre-eminent status through an ad-hoc assessment process for attainment of appointment to eminent (MO3) and pre-eminent (MO4) level positions.
The MO3/MO4 Secretariat will provide external applicants with the application form for the applicant to complete manually and return to the MO3/MO4 Secretariat. Attachment Three details the process for completing a manual application.

Applicants who have been employed external to Queensland Health during the past five years prior to the date of their application are required to provide documentary evidence regarding their performance with their other employers.

This evidence is to include information about any substantiated unsatisfactory performance. Evidence can be provided in the form of a letter from the applicant’s previous employer. The letter is to confirm whether or not the applicant has had any substantiated unsatisfactory performance in the last five years.

2.8 Ad-hoc assessments
An ad-hoc assessment process may be conducted for eligible applicants outside the published assessment periods for a defined round.

Requests for ad-hoc assessments must be lodged with the relevant CE within one month of the medical officer’s date of commencement with Queensland Health.

Requests for ad-hoc assessments must be forwarded by the relevant CE to the Director-General for approval.

Offers of employment at the MO3 or MO4 level can only be given if the ad-hoc assessment process has been completed and approval for such appointment is granted by the Director-General.

Attachment Four details the process for ad-hoc assessments.

2.9 Assessment criteria
The assessment criteria is a points-based system used to determine whether an applicant meets the required level as determined by the panel for progression to eminent (MO3) or pre-eminent (MO4) status.

The self-assessment will consist of an applicant allocating points against a number of principles under the defined categories.

The applicant must meet the minimum cut-off score published at the opening of each round for their application to receive consideration by the panel for eminent or pre-eminent status.

This cut-off score may be adjusted at each round and is not an indicator of the minimum score required for appointment to either MO3 or MO4.

Attachment Five contains the current assessment criteria.

2.10 Regional and rural weighting
An additional weighting is applied to applicants applying from regional and remote locations to improve equity of opportunity for specialists working in non-metropolitan areas as follows:

<table>
<thead>
<tr>
<th>Area</th>
<th>Weighting</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>1.0</td>
<td>• Princess Alexandra Hospital</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Royal Brisbane and Women’s Hospital</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Royal Children’s Hospital</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• The Prince Charles Hospital</td>
</tr>
</tbody>
</table>
An applicant requires current appointment from within areas 2, 3 or 4 and continuous or cumulative service of five years or more at that location or at other locations with the same or greater weighting to apply a weighting.

If the continuous/cumulative service of five years has occurred over a variety of weight areas, the area with the lowest weighting applies.

### 2.11 Endorsement of applications

Following the closing date of applications, the MO3/MO4 project team will confirm with the relevant CEs for each applicant that there has not been any substantiated unsatisfactory performance by the medical officer in the last five years.

Applicants must receive the relevant CE’s endorsement for their application to be assessed by the panel.

The MO3/MO4 secretariat may seek confirmation from Conduct Advisory Services regarding any current outstanding matters relating to applicants.

If endorsement cannot be provided for an applicant, the MO3/MO4 secretariat will notify the applicant upon any matters being identified and refer the applicant to their Department of Health division/HHS for further details.

### 2.12 Notification of outcomes

All applicants will be notified in writing of the outcome of their application.

#### 2.12.1 Successful applicants

Successful applicants will be provided with written confirmation of their new status, relevant wage rate and the effective date of payment as approved by the Director-General.

#### 2.12.2 Unsuccessful applicants

An applicant may seek feedback from the panel by providing a request in writing to the MO3/MO4 secretariat within 30 days of the date of their outcome letter.

Feedback will not be provided where an applicant has not met the minimum cut-off score for consideration by the panel.

Unsuccessful applicants may reapply in the next round if eligible.
2.13 Performance review
Eminent (MO3) and pre-eminent (MO4) status medical officers are required to maintain their commitment to the approved levels of performance and review is subject to the local performance and development review processes.

Where the relevant CE or Director of Medical Services (or delegate) has concerns about the individual’s continued performance, these will be addressed with the individual in the first instance through their local processes.

2.14 Appeals
An applicant who believes that the process has not been applied correctly to their application is able to lodge an appeal in writing to the independent audit and appeal panel within 30 days from the date of their notification of outcome letter.

An applicant must first obtain and consider feedback from the panel regarding their application prior to lodging an appeal. Any application for appeal must provide details of the grounds for the appeal.

3. Contacts
- MO3/MO4 Secretariat
- Email: MO3/MO4Advancement@health.qld.gov.au

4. Legislation
- Medical Officers (Queensland Health) Award – State 2015
- Oaths Act 1867

5. Supporting documents
- Advancement: Senior medical officers to eminent (MO3) and pre-eminent (MO4) status HR Policy B10

Version control

<table>
<thead>
<tr>
<th>Version</th>
<th>Date</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>3.0</td>
<td>March 2018</td>
<td>Updated references and naming conventions</td>
</tr>
<tr>
<td>2.0</td>
<td>July 2015</td>
<td>Updated to clarify application process</td>
</tr>
<tr>
<td>1.0</td>
<td>October 2013</td>
<td>New guideline</td>
</tr>
</tbody>
</table>
Attachment One: Tips for completing an application

- Refer to all relevant roles and contributions you have made including those outside Queensland Health.
  - The panel will consider all relevant service against the criteria over the span of your career.
  - Use your CV to copy and paste details of your roles and achievements into the online application tool.
  - If you are unsure whether to use a particular achievement/contribution, contact the MO3/MO4 Secretariat or alternatively allocate these items to Principle 9: Other exceptional achievements for review by the panel.

- Points cannot be claimed more than once for using the same example in numerous criteria.
  - An exception to this is for Criteria 2.4 and 3.2. For example Principle 2.4, an applicant provided significant participation at executive level to establish a new professional organisation and (3.2) within that organisation they have executive level membership (i.e. president, secretary etc).

- Do not use acronyms without initial reference to the full name.
  - Spell out the full name of any organisations and reference the acronym in brackets if you wish to refer to it throughout your application.

- Provide details against each score nominated.
  - Applicants must enter details or brief description (including dates where relevant) supporting each score they have nominated.
  - Scores entered without supporting details may not be counted.

- Observe requirements for minimum qualifying periods.
  - Applicants must meet minimum commitment lengths as specified in the criteria to nominate a score for that item.

- Partial points cannot be allocated if the achievement is currently not fully attained.
  - A maximum score can only be awarded if details fully support the claim and all requirements are met.

- Applicants are required to apply the weightings described in the application for continuous or cumulative commitment to a committee or organisation.

- Points must be entered to one decimal point in the online assessment. For example, 2 must be entered as 2.0 to be accepted.
## Attachment Two: User guide for on-line applications

### Accessing the online application

Go to QHEPS page for the MO3/MO4 Advancement process on Queensland Health Intranet.
Click on the link to the **MO3/MO4 Advancement on-line application**

### Logging on

<table>
<thead>
<tr>
<th>Enter: Novell user login password</th>
<th>Use the same login details you use to access Queensland Health’s IT network (computers)</th>
</tr>
</thead>
</table>

### Difficulties logging on

<table>
<thead>
<tr>
<th>Contact</th>
<th>MO3/MO4 Secretariat Email: MO3/MO4Advancement@health.qld.gov.au</th>
</tr>
</thead>
</table>

### Main menu functions

<table>
<thead>
<tr>
<th>New application</th>
<th>Will appear for first time system login for each new round</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>• Select to enter new application round</td>
</tr>
<tr>
<td></td>
<td>• Enter personal details (in all fields) and agreements</td>
</tr>
<tr>
<td></td>
<td>• Select: <em>Save Details</em> to save and move to next screen</td>
</tr>
<tr>
<td></td>
<td>• Select: <em>Cancel</em> to delete data and re-enter</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Edit application</th>
<th>Select <em>Edit</em> for subsequent logins</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Functions: Edit application, save changes or print</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Print application</th>
<th>Select to print application</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Note: Print function also available from the last screen of application</td>
</tr>
</tbody>
</table>

### Navigation and saving data

<table>
<thead>
<tr>
<th>Continue</th>
<th>Automatically saves data and moves to the next page of the application</th>
</tr>
</thead>
<tbody>
<tr>
<td>Previous</td>
<td>Automatically saves data and moves backward between pages of the application</td>
</tr>
<tr>
<td>Next</td>
<td>Automatically saves data and moves forward between pages of the application</td>
</tr>
<tr>
<td>Save and close</td>
<td>Saves data and returns to the main menu.</td>
</tr>
<tr>
<td>Scrolling</td>
<td>Use the controls on the right hand side of the window to scroll up and down the page</td>
</tr>
<tr>
<td>---</td>
<td>---</td>
</tr>
</tbody>
</table>
| Exit application system | **Step 1:** Select Logout tab (ensure data is saved first)  
**or** Select Save and close tab then Logout tab  
**Step 2:** Click the close box at top right hand corner of screen and again to close the main browser window. |
| Completing your application | **Nominating self-assessment grading points**  
Applicants must nominate a grade point from the point’s allocation range for criteria achieved  
- Single Scores—partial points cannot be allocated  
- Scores must be entered to one decimal place, for example 2 must be entered as 2.0  
- Grading Ranges—allocate appropriate score as defined in the criteria  
- Maximum scores set for some criteria  
- System will default to ‘0’ if no grading point entered |
| Nominating details or further comments | Supporting data must be entered in this field for all criteria achieved and nominated with a grade point.  
**Step 1:** Double click on the Details or further comments field  
A dialogue box will pop up  
**Step 2:** In the dialogue box: Enter a brief description/name and include applicable dates. When recording multiple examples, list on separate
Error messages

The MO3/MO4 on-line system will highlight entries not accepted by:

- displaying a message in red or marked with a red asterisk *
- you will also be prevented from moving to another page until the entry is corrected

Examples of error messages

Message highlighted in red—requirement to complete all mandatory fields

Message highlighted in red—requirement to nominate a location for Area 4
## Non-metropolitan adjustments

### Eligibility for additional weightings

Applicants require:
- current appointment from either areas 2, 3 or 4 and continuous or cumulative service of five years or more at that location or at other locations with the same or greater weighting.

Note: If the continuous/cumulative service of five years has occurred over a variety of weighted areas (i.e. areas 2, 3 or 4), the area with the lowest weighting will apply.

Select the applicable area on this page:
- the application system will automatically adjust the self-assessment score total

### Submit application

**Cut-off score to submit an application**

Applications will be accepted for assessment if their self-assessment score equals **35 or more points**.

**Submit function**

Select **Submit application**.

Applications will be “locked” after the submit function is performed. Users will then only be able to print and view applications.

Contact the MO3/MO4 Secretariat for access to locked applications.

**Print application**

If you wish to print your application:
1. Go to final application screen—select **Print**
2. Go to main menu—select **Print**

**NOTE:** An applicant is not required to provide a hard copy of their application in addition to their on-line application submission.

**Endorsement**

Following the closing of a round, the MO3/MO4 project team will seek endorsement from the relevant Chief Executive for each applicant to confirm that there has been no substantiated unsatisfactory performance by the medical officer in the last five years.

*Red Asterisk—marks incorrect assessment score. E.g. Criteria 2.1 allows maximum score of 4 points—therefore the 10 points nominated is invalid*
<table>
<thead>
<tr>
<th>Contact details</th>
<th>MO3/MO4Advancement@health.qld.gov.au</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>MO3/MO4 Secretariat</strong></td>
<td></td>
</tr>
<tr>
<td>Employee Relations (HR Services)</td>
<td></td>
</tr>
<tr>
<td>Queensland Health</td>
<td></td>
</tr>
<tr>
<td>GPO Box 48</td>
<td></td>
</tr>
<tr>
<td>Brisbane QLD 4001</td>
<td></td>
</tr>
</tbody>
</table>
## Attachment Three: Application form for external/ad hoc applicants

Note: Applicants are required to email the MO3/MO4 Secretariat to obtain the assessment criteria. Only applications from those applicants who have been provided with the assessment criteria directly from the MO3/MO4 Secretariat will be considered by the panel.

<table>
<thead>
<tr>
<th>Completing the assessment criteria</th>
<th>The external/ad hoc application document has been formatted as a Microsoft Word document. The preferred completion method is via data entry directly into the document. The application should be initially saved with the applicants surname as the file name. For ease of completion, the yellow fields are areas requiring data entry from the applicant. Applicants must ensure that these Guidelines and the relevant HR Policy are read prior to commencing the application process.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Endorsement</td>
<td>Applicants who have been employed external to Queensland Health in the past five years prior to the date of their application are required to provide documentary evidence regarding their performance with their previous employer/s from this period. This evidence is to include information about any substantiated unsatisfactory performance.</td>
</tr>
</tbody>
</table>
| Submit application                | **Manual applications:**  
Step 1: Forward copy of electronic version via email to:  
MO3/MO4Advancement@health.qld.gov.au  
Step 2: Forward printed signed copy to the MO3/MO4 Secretariat at:  
Postal address for hard copy applications:  
**MO3/MO4 Secretariat**  
Employment Relations Unit (HR Branch)  
Queensland Health  
Level 4, 33 Charlotte Street  
GPO Box 48  
Brisbane QLD 4001 |
Attachment Four: Process for ad-hoc assessments

Start

- Review HR Policy B10 and applicant guidelines to confirm eligibility.

Prior to offer of employment or within one month of commencement or re-appointment to eligible level—the request for an ad-hoc application must be lodged with the relevant HSCE and be approved by the relevant HSCE or forwarded to D-G or delegate for approval.

Ad-hoc assessment process approved

- NO

End process

- YES

Applicant completes application, signs and returns to MO3/MO4 secretariat.

MO3/MO4 Secretariat provides manual application form to applicant with HR Policy and Applicant Guidelines.

Forward approval of ad-hoc application to the MO3/MO4 Secretariat

- NO

End process

- YES

Secretariat arranges for application to be moderated by assessment panel member/s.

Final moderation score ranked against MO3/MO4 benchmarks to determine recommendation for appointment.

Recommended for advancement

- NO

Unsuccessful: Advice forwarded to applicant and relevant CE.

- YES

Approved/Recommended Applicant

Advice forwarded to applicant and relevant CE for processing.

MO3/MO4 Secretariat seeks Chief Executive endorsement and D-G approval or D-G recommendation for approval to relevant HSCE.

Feedback: Provided can be provided to unsuccessful applicants in accordance with applicant guidelines.

End process

NOTE
Applicant may be requested to provide documentary evidence or additional clarifying information to support self-assessment claims.
### Attachment Five: Assessment criteria

#### Category 1: Outstanding achievement and performance with advanced clinical/professional knowledge

<table>
<thead>
<tr>
<th></th>
<th>Principle: Medically related post-graduate qualifications</th>
<th>Grading range</th>
<th>General: Note: 1.1 to 1.7</th>
</tr>
</thead>
</table>
| 1.1 | Award of a medically related graduate certificate from a Registered Training Authority (RTA) or recognised by the Australian Medical Council or a medical specialty college. (0.5 points per certificate) | (0.5)         | ▪ Nominate points for each individual qualification  
▪ Do not count points twice if a higher qualification gained in the same studies  
▪ No overall maximum for grading points |
| 1.2 | Award of other medically related post graduate qualifications from a registered training authority – Masters. (0.5 to 1 point per qualification) | (0.5–1)       | Examples include:  
▪ Education related degrees for teachers, educators, DCT and research related degrees  
  e.g. Graduate Certificate in Education for Medical and Health Science  
▪ Graduate Certificate for Management (Qld Health or similar)  
▪ Graduate Certificate in Disaster Medicine  
▪ Graduate Certificate in Opiate Treatment  
▪ Graduate Certificate Echocardiography in Perioperative and Critical Care  
▪ Family Planning Certificate  
Do not include:  
▪ MBBS/MBBCh/MBchB or similar Bachelor of Medicine/Surgery  
▪ Bachelor of Science  
▪ Courses: EMST, APLS, ACLS, ATLS, CHRISP, ASSET, PBL Tutoring  
▪ Courses: Part of subspecialty or credentialing  
▪ AMC Certificate or ECFMG Certificate |

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**Guideline – Advancement: Senior medical officers to eminent (MO3) and pre-eminent (MO4) status**  
**Human Resource Services**  
**Chief Human Resources Officer**  
**20 July 2015**  
**PRINTED COPIES ARE UNCONTROLLED**
| 1.3 | Award of a medically related post graduate qualification from a registered training authority – degree, diploma, or other. (1 point per qualification) | (1) | Examples include:  
- Diploma of Obstetrics  
- Diploma of Child Health  
- Diploma in Medical Jurisprudence  
- Diploma of Tropical Medicine  

Do not include:  
- Qualifications of same studies which are later achieved at a higher level e.g. Dips Obs. is not counted if FRANZCOG later obtained |
| 1.4 | Award of an AMC recognised medical specialty qualification. (2 points per specialist qualification) | (2) | Examples include:  
- AMC Recognised specialities including FANZCA, FFPMANZCA, FRACDS(OMF), FACD, FACEM, FRACGP, FACRRM, FRACMA, FRANZCOG, FRANZCO, FRCPA, FRACP, FJFICM, FACHPM, FAFPHM, FAFRM, FRANZCP, FRANZCR, FRACS  

**Note:** Qualifications for same specialties are not to be counted twice. E.g. FRACS and FRCS = 2 points not 4 points |
| 1.5 | Award of a medically related graduate doctorate. (3 points per doctorate) e.g. PhD or MD | (3) | Examples include:  
- Doctorate of Medicine - MD (Australia or comparable) for research or equivalent  

Do not include:  
- MD licensing qualifications from overseas  
- MD qualifications which form part of the “fellowship” or specialty qualifications recognised under criteria 1.4 – may apply to some Indian, European or United States specialist qualifications. |
| 1.6 | Award of subspecialty qualifications upon completion of separate training program to primary specialist qualification (Registered with MBQ) | (2) | Examples include:  
- Applicant with General Surgery qualifications, undertakes additional specified training in Urology and is registerable in both |
<table>
<thead>
<tr>
<th>1.7</th>
<th>Award of non-AMC recognised specialty qualification or other specialty qualifications (fellowship) <strong>by examination.</strong></th>
<th>(0.5-1)</th>
<th>2 points per additional subspecialty qualification</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>1 point per qualification or as determined by the MO3/MO4 Assessment Panel</td>
</tr>
</tbody>
</table>
|  |  |  | **Note:**  
|  | ▪ **Must provide** full details of qualifications/fellowship  
<p>|  | ▪ Qualifications should be listed with recognised practice committee |</p>
<table>
<thead>
<tr>
<th>2.</th>
<th><strong>Principle: Innovation and service development in health</strong></th>
<th><strong>Grading range</strong></th>
<th><strong>General:</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>- Unless otherwise specified, all criteria under this principle require at least a 1 year commitment</td>
</tr>
<tr>
<td>2.1</td>
<td>The establishment and provision of innovative clinical services. Examples:</td>
<td>(0.5 – 2)</td>
<td>Key words establishment of innovative services</td>
</tr>
<tr>
<td></td>
<td>- Outreach</td>
<td></td>
<td>Examples include:</td>
</tr>
<tr>
<td></td>
<td>- Telemedicine</td>
<td></td>
<td>- Outreach</td>
</tr>
<tr>
<td></td>
<td>- Satellite services</td>
<td></td>
<td>- Telemedicine</td>
</tr>
<tr>
<td></td>
<td>- Innovative diagnostic or clinical services for more than one campus</td>
<td></td>
<td>- Satellite services</td>
</tr>
<tr>
<td></td>
<td>- Videoconferencing</td>
<td></td>
<td>- Innovative diagnostics laboratory service</td>
</tr>
<tr>
<td></td>
<td>At a site or sites at the initiative of the individual and beyond a single facility (this implies an ongoing commitment to the advancement of such services).</td>
<td></td>
<td>- Videoconferencing</td>
</tr>
<tr>
<td></td>
<td>Services established:</td>
<td></td>
<td>Do not include:</td>
</tr>
<tr>
<td></td>
<td>- Between 2 - 3 facilities = 0.5 pts</td>
<td></td>
<td>- Pre-existing services/tasks within role</td>
</tr>
<tr>
<td></td>
<td>- Between 3 - 4 facilities = 1 pt</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Benefiting greater than 5 facilities = 2 pts</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Note:</strong></td>
<td><strong>Maximum score = 4</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.2</td>
<td>Development and roll-out of new clinical services, techniques or protocols outside of core duties or innovative to the health service or specialty</td>
<td>(0.25 – 1)</td>
<td>Key words new and outside of core duties</td>
</tr>
<tr>
<td><strong>NOTE:</strong></td>
<td>Not counted implementation of contemporary evidence based clinical practice within discipline or</td>
<td></td>
<td>All achievements considered</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Examples include (but not limited to):</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Establishment of new clinics – e.g. Day Surgery Clinic, Cardiac Clinic, Sleep Disorders etc</td>
<td></td>
</tr>
</tbody>
</table>
| specialty | Establishment of Retrieval Services  
| Facility = 0.25 pts  
| Multiple facilities = 0.5 pts  
| Statewide = 0.75 pts  
| National = 1pt | New surgical techniques  
| Treatment protocols  
| Rehabilitation Programs  
| Development of Screening Service  
| Establishment of Multidisciplinary services |

**Note:** Maximum score = 4

### 2.3 Development of a new clinical practice guideline or significant personal involvement in the intellectual property contained in the guideline for multiple facilities/statewide or national implementation.

**NOTE:** Not counted - feedback or critique of guidelines

- More than one facility = 0.5 pts  
- Statewide = 0.75 pts  
- National = 1pt

**Note:** Maximum score = 4

| (0.5 – 1) | Examples include:  
| Standards, guidelines, protocols  
| Hospital guidelines counted if more than 1 facility/area/statewide service eg PAH Liver Transplant Guideline counted – as statewide service located at PAH  
| Clinical Pathway/Guideline for referrals  
| Educational tools and criteria  
| Position statements |

Do not include:
- "In Press" – unless explicitly accepted for publication  
- Hospital or unit guidelines (except for above example)  
- Feedback or critique of guideline – must be involved in development of guideline

### 2.4 Significant Executive involvement in the development of a new professional organisation with statewide or national membership.

**Examples:**  
- New Specialty Group  
- Learned Society  
- Major Collaborative Group or SIG

**Details required:** Must provide details of group output, membership numbers and frequency of meetings

| (0.5– 1.5) | Definition of new professional organisation:  
| Learned society  
| Major Collaborative or Group  
| Characteristics of an organisation e.g. executive governance  
| Special Interest Group (SIG) |

Must be executive involvement/position - Examples of executive position:
- President, Secretary, Chair, Executive Council/Committee
**Note:** Must have characteristics of an organisation (i.e. corporate governance).
Not included: working parties, committees or subgroups. Refer to user guide for further details

| i. State | 0.5 |
| ii. National | 1 |
| iii. International | 1.5 |

Additional weighting (x 1.5): The Panel may increase or decrease nominated points for new organisations based on impact factor

**Note: Maximum score = 4**

<table>
<thead>
<tr>
<th>2.5 Leadership of a project which was adopted regional/statewide/national</th>
</tr>
</thead>
</table>

Example of leadership roles include: project manager, project sponsor, active involvement in steering committee

| i. | 0.5 points - 4 or more facilities |
| ii. | 0.75 points - statewide |
| iii. | 1 points - national |

Do not include hospital, district or campus projects

**Note: Maximum score = 4**

- **Do not include:**
  - Committees within established organisations
  - Sub-groups within established organisations or committees
  - QH networks or collaborative (allocated to principles 3 or 4)

**Note:** Continued role in executive position of newly established organisation can be claimed in Criteria 3.2 (this duplication is acceptable)

**Ensure project has:**
- Statewide or National implementation
- Leadership by yourself (Indicate if leadership is shared)

**Examples include:**
- Implementation of Statewide IT programs/systems
- Development of Databases for clinical services (statewide or national)
- Health Promotion Program Project
- Fatigue Management Project
- Patient Safety Project

Do not include:
- Local, hospital or campus implemented projects

**Note 1:** Multiple projects can be claimed up to maximum score of 4 points

**Note 2:** Additional points may be allocated by the moderation panel for significant projects (benchmarked against other criteria)
| 2.6 | Provision of clinical services for overseas humanitarian work or award of overseas fellowship full/honorary for provision of clinical knowledge for overseas health systems.  
Panel will assess activity and award appropriate benchmarked score  

**Note:** Maximum score = 4 |
|-------------------------------------|-----------------|
| Panel to score | **Ensure:** full details of activities are provided  
- Nature of activity  
- Specific length and duration of service  
- Location  
- Impact factor  

Examples include:  
- Humanitarian work i.e. *Medecins Sans Frontieres*, Fred Hollow Foundation  
- Visiting specialists to overseas hospitals, universities |

| 2.7 | Authorship or development of a significant clinical database for use in more than one facility:  
Panel will assess activity and award appropriate benchmarked score  

**Note:** Maximum score = 4 |
|-------------------------------------|-----------------|
| Panel to score | **Ensure:** full details of activities are provided  
- Details of database  
- Scope (or population)  
- Location of implementation  
- Impact factor |
### Category 2: Providing professional leadership and significant contribution to the advancement of the health system or profession

#### 3. Exceptional role model/leader within a hospital; specialty; Queensland Health; or similar health system.

Leadership: within organisations which contributes to the prestige and standing of the medical profession:

<table>
<thead>
<tr>
<th>Grading range</th>
<th>General:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>▪ Unless otherwise specified, all criteria under this principle require at least a 1 year commitment</td>
</tr>
</tbody>
</table>

**Note 1:** Committee membership as part of role not counted  
E.g. If terms of reference or implement standard require Clinical Chief Information Officer to chair eHealth Advisory Group, no points allocated for chair of eHealth advisory committee

**Note 2:** Ex-Officio roles not counted  
E.g. President of Medical College with Ex-officio membership to Australian Presidents of Medical College Committee, no points allocated for ex-officio membership of this committee

**Within Queensland Health and/or equivalent:**

| 3.1 Member of a specified Queensland Health or equivalent health system policy/planning committee |
| i. Peak committee (QH or equivalent) = 1 pt |
| ii. Other Non-Peak QH or equivalent health system/Area/Campus/District Committee = 0.5 pt |

**Note:** Maximum score = 8

**Commitment weighting**  
If continuous or cumulative commitment to committee is:
- 5 to 9 years = points x 1.5  
- 10 years or more = points x 2

**Queensland Health or equivalent examples = NHS, NSW Health**

**Peak:** 1 point each (multiple x commitment weighting if applicable)  
Core specialty groups, state steering committees, committees reporting directly to Executive Management Team of Qld Health or equivalent Health Organisation Hierarchy

**Examples include:**
- QH Medical Advisory Panel  
- QH Medical Workforce Committee (e.g. MWAC Combined Chairs of College Committee)  
- QH HBCIS Implementation Steering Committee  
- QH Casemix Advisory  
- QH Rural Health Advisory Council  
- QH Day Surgery Steering Committee  
- QH Pandemic Steering Committee
- QH Specialist Outpatient Strategic Advisory Committee
- QH Risk Management Board
- QH Ministerial Advisory Committee
- QH Patient Safety Centre Advisory Board
- QH Medical Interest Based Bargaining (MIBB)
- QH Patient Transport Advisory Group
- QH eHealth Advisory Group (eHAG)
- QH Disaster Management Committee
- Statewide Speciality Advisory Panels e.g. Intensive Care Services Advisory Panel, Microbiology Discipline Working Party, O&G Services Advisory Panel
- Health Department Clinician Advisory Group
- COAG Committee

**Other:** 0.5 points each (multiple x commitment weighting if applicable)
Working parties or groups, sub-committees from peak committees

Examples include:
- QH Statewide Specialty subgroup committees e.g. Paediatric Rehabilitation Service
- Redesign/Redevelopment Committees for whole hospital/district, not departmental
- Influenza Preparedness Planning group
- QH Influenza Pandemic Expert Advisory committee
- COAG Qld Implementation Committee
- Local Hospital/District committees e.g. Medical Advisory Committee
- Specialty Taskforce
- Specialty Group Workforce Committee
- QH Medical Records Committee
- Private Practice Review Committee for specialty
- Hospital/District Disaster Planning Committee

Do not include:
- Departmental or local unit committees
### 3.2 Member in the executive of a medical professional body:

- **Local:** 0.5
- **State:** 1
- **National:** 2
- **International:** 3

Examples: Medical College, Learned Society, Medical Unions, Hospital Medical Staff Association, Doctors Reform Society.

**Details required:**
- Position title
- Duration in role
- Impact factor of organisation i.e. membership numbers

**Notes to consider when self assessing:**
- Half points to be counted for secondary governance positions – refer user guide
- Chair/president positions of significant organisations may be awarded extra weighting

### State - National – International rules

- Australasian Organisation equivalent to National points: e.g. ANZCA, RANZCOG, RCPA = National/Australasian points
- If representation is a State position of a National Body = State points: e.g. Qld State President of AMA = State points
- If representation is a National position of an International Body = National points

**Counted: For full points - must in an executive position within primary organisation**
- Examples: Chair, Treasurer, CEO, Hon. Secretary, Chairman Board of Censors, Chairman of Council, President, Vice President, Council Member/Councilor or Board of Directors.

- **Local:** 0.5
- **State:** 1
- **National:** 2
- **International:** 3

**Counted: For half points**
- Member of Governance Committee or Executive of a Committee/Subgroup within a medical professional body. E.g. Chair College Continuing Professional Development Committee for subspecialty

**Other Examples:**
- Committees (must be Chair or executive member)
- Regional Committee or faculty
- Executive - representing subgroups within an organisation
### 3.3 Within academic/clinical community

<table>
<thead>
<tr>
<th>Item</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Editorial Board membership of a medically related Peer Reviewed Journal for 2 years or more which is indexed with Excerpta Medica, Mediline or C/NAHL e.g. MJA or BMJ</td>
<td></td>
</tr>
<tr>
<td><strong>Within academic/clinical community</strong></td>
<td></td>
</tr>
<tr>
<td>0.5</td>
<td></td>
</tr>
<tr>
<td>▪ Multiple roles within the same organisation will be counted accumulatively for total years of commitment</td>
<td></td>
</tr>
<tr>
<td><strong>Note: Maximum score = 8</strong></td>
<td></td>
</tr>
<tr>
<td>Commitment weighting: if continuous or cumulative commitment to committee is:</td>
<td></td>
</tr>
<tr>
<td>▪ 5 years to 9 years = points x 1.5</td>
<td></td>
</tr>
<tr>
<td>▪ 10 years or greater = points x 2</td>
<td></td>
</tr>
</tbody>
</table>

**Ensure:** Allocate points for membership of editorial board

**Do not include:**
- Reviewer of journals
- Reviewer of manuscripts, abstracts
- Membership of review panels

| i. Local:                | 0.25 |
| ii. State:               | 0.5  |
| iii. National:           | 1    |
| iv. International:       | 1.5  |

**Notes to consider when self assessing:**
- Chair/president positions of significant organisations may be awarded extra weighting x 0.5
- Multiple roles within the same organisation will be counted accumulatively for total years of commitment

Do not include:
- Non executive positions for committees, special interest groups, Subcommittees
- Executive positions held whilst an undergraduate
- Membership of medically related governance committee – refer to criteria 5.8
- International Trial Group Leader – refer to criteria 5.9
### Notes:
- **Maximum score = 6**
- **Commitment weighting:** If continuous or cumulative commitment to committee is:
  - 5 years to 9 years = points x 1.5
  - 10 years or greater = points x 2
- **Note:** Does not include periodic reviews

### Nominate one of the following: on Section 3.4 to 3.6

<table>
<thead>
<tr>
<th>Section</th>
<th>Nomination</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>3.4</td>
<td>Professor at a University in Australia or equivalent for 1 year or more (this acknowledges contribution to teaching and research activities).</td>
<td>3</td>
</tr>
<tr>
<td>3.5</td>
<td>Associate Professor or Adjunct Associate Professor of a University in Australia or equivalent for 1 year or more (this acknowledges contribution to teaching and research activities).</td>
<td>2</td>
</tr>
<tr>
<td>3.6</td>
<td>Senior Lecturer or Adjunct Senior Lecturer of a University in Australia or equivalent for 1 year more (this acknowledges contribution to teaching and research activities).</td>
<td>1</td>
</tr>
</tbody>
</table>

### Ensure:
- Nominate points in only one of the criteria from 3.4, 3.5, 3.6. This should be for the highest position appointed in the academic community (over multiple years or universities)
  e.g. If an applicant appointed to James Cook as an Assoc. Professor for 2 years and at University of Qld as a Senior Lecturer for 10 years = 2 points nominated in 3.5 only.
- Points can be awarded for appointments previously obtained but not currently held
  e.g. Previously appointed Associate Professor at Monash University for 5 years 1998 - 2002 = 2 points
Category 2: Providing professional leadership and significant contribution to the advancement of the health system or profession

4. **Principle: Exceptional leadership in health quality improvement activities/clinical governance**

<table>
<thead>
<tr>
<th>Grading range</th>
<th>General:</th>
</tr>
</thead>
<tbody>
<tr>
<td>(0.5 - 1)</td>
<td>- Unless otherwise specified, all criteria under this principle require at least a 1 year commitment</td>
</tr>
</tbody>
</table>

*Note 1: Committee membership as part of role not counted e.g. If terms of reference or implement standard require Director of Medical Services to chair Quality and Safety committee, no points allocated for chair of committee*

4.1 Sustained participation in quality assurance; clinical governance or membership of a committee (outside own departmental committees/activities) relating to:

- Quality
- Safety
- Setting Clinical Standards
- Clinical Governance

In the area of health for 2 years or greater

- Chair = 1
- Membership = 0.5

**NOTE 1: Maximum score = 6**

**NOTE 2: Committees relating to education and training - allocate to principle 8**

**Commitment Weighting: if continuous or cumulative commitment to committee is:**

- 5 years to 9 years = points x 1.5
- 10 years or greater = points x 2

**Must be a committee formally recognised in the clinical governance structure.**

**Membership to committee must be 2 years or greater**

**Examples Include:**

- Hospital Accreditation Committee
- Commissioned as member of a Root Cause Analysis Team to conduct Root Cause Analysis (RCA) review – more than 1 RCA
- Active participation in hospital wide Audit Programs e.g. Medication Safety; Pharmacy and Therapeutics
- Accreditation team for professional bodies other than medical colleges or AMC e.g. Thoracic Society of ANZ assessing accreditation of sleep laboratories
- Hospital Death Review Committee
- Hospital Critical Incident Review Committee
- Hospital Resuscitation Committee
- Hospital Patient Equipment and Product Evaluation and Review Committee
- Hospital Credentialing and Scope of Clinical Practice Committee
- Hospital Infection Control Committee (points collectively awarded for participation in same Committee type within area/district)
- Hospital Open Disclosure Committee
<table>
<thead>
<tr>
<th>4.2</th>
<th>Membership of Medication Safety program (or similar) at statewide or national level for 2 years or greater</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>i. Chair</td>
</tr>
<tr>
<td></td>
<td>ii. Membership</td>
</tr>
</tbody>
</table>

**Commitment Weighting:**

If continuous or cumulative commitment to committee is:

- 5 to 9 years = points x 1.5
- 10 years or more = points x 2

<table>
<thead>
<tr>
<th>0.5 - 1</th>
<th>Must be <strong>Statewide or National</strong> level not area or local program</th>
</tr>
</thead>
<tbody>
<tr>
<td>i. 1</td>
<td>Membership to committee must be <strong>2 years or greater</strong></td>
</tr>
<tr>
<td>ii. 0.5</td>
<td></td>
</tr>
</tbody>
</table>

**Examples Include:**

- Medication Safety
- Medication Reform
- Falls Prevention
- Therapeutics Advisory Committee

**Note:** Maximum Score = 3
### 4.3 Regular participation on a Health Research Ethics Committee for 2 years or greater

(0.5 - 1)

**Commitment Weighting:**
- If continuous or cumulative commitment to committee is:
  - 5 to 9 years = points x 1.5
  - 10 years or more = points x 2

**Note:** Maximum Score = 3

Membership to committee must be 2 years or greater

Examples of major tertiary hospitals
- TPCH
- RBWH
- RCH
- Townsville
- Gold Coast
- PAH
- Mater
- UQ/JCU/Griffith/Bond or other tertiary institutions

Include: Scientific sub-committee of HREC

Examples of other research and ethics committees
- College Divisional Ethics and Research Working Party
- Regional Hospitals
- AMAQ

### 4.4 Chair and sustained participation of a QH, College or other medically related body: (exclusive of 4.5)

(1 – 2)

**a. Endorsed project**
**b. Clinical Network**
**c. Clinical Collaborative**

**Note:** Maximum Score = 6 pts

**Commitment weighting:**
- 5 years to 9 years = points x 1.5
- 10 years or greater = points x 2

Achievements are exclusive of 4.5

Examples include:
- Chair CAHS or SAHS or NAHS specialty networks e.g. Chair Radiology Network
- Vice Chair/Deputy = half points
- Chair Specialty Collaborative e.g. Cardiac or Renal Collaborative

See also examples in 4.6 – allocate if chair position held

Do not include:
- “In-house” unit, departmental or local
<table>
<thead>
<tr>
<th>4.5</th>
<th>Member and sustained participation of a QH, College or other medically related body (exclusive of 4.4):</th>
</tr>
</thead>
<tbody>
<tr>
<td>d.</td>
<td>Endorsed project</td>
</tr>
<tr>
<td>e.</td>
<td>Clinical Network</td>
</tr>
<tr>
<td>f.</td>
<td>Clinical Collaborative</td>
</tr>
<tr>
<td>i.</td>
<td>Multiple Facilities/Regional/State = 0.5</td>
</tr>
<tr>
<td>ii.</td>
<td>National = 1</td>
</tr>
<tr>
<td></td>
<td><strong>Note:</strong> Maximum score = 6 pts</td>
</tr>
<tr>
<td></td>
<td>Commitment weighting: if continuous or cumulative commitment to committee is:</td>
</tr>
<tr>
<td></td>
<td>• 5 years to 9 years = points x 1.5</td>
</tr>
<tr>
<td></td>
<td>• 10 years or greater = points x 2</td>
</tr>
<tr>
<td></td>
<td>(0.5 – 1)</td>
</tr>
<tr>
<td></td>
<td>Achievements are exclusive of 4.4</td>
</tr>
<tr>
<td></td>
<td>Points for area i.e. CAHS, SAHS, NAHS = 0.5</td>
</tr>
<tr>
<td></td>
<td>Examples include:</td>
</tr>
<tr>
<td></td>
<td>• Member CAHS or SAHS or NAHS specialty networks NAHS Surgical Network</td>
</tr>
<tr>
<td></td>
<td>• Director of Medical Services Advisory Committee Network (DOMSAC)</td>
</tr>
<tr>
<td></td>
<td>• Statewide Network e.g. Radiology Reform Network</td>
</tr>
<tr>
<td></td>
<td>• College Workforce Project</td>
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<tr>
<td></td>
<td>• Alert Doctors Project Steering Committee</td>
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<tr>
<td></td>
<td>• College Peer Review Group</td>
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<tr>
<td></td>
<td>• Medical College Rural Health Committee</td>
</tr>
<tr>
<td></td>
<td>• Medical Assessment Planning Unit Collaborative (MAPU)</td>
</tr>
<tr>
<td></td>
<td>• Healthcare Improvement Collaborative</td>
</tr>
<tr>
<td></td>
<td>• Member Special Interest Group medically related association/organisation or college e.g. SIG for Cystic Fibrosis Thoracic Society of Australian and New Zealand</td>
</tr>
<tr>
<td></td>
<td>• Member College Training Network</td>
</tr>
<tr>
<td></td>
<td>Do not include:</td>
</tr>
<tr>
<td></td>
<td>• “In-house” unit, departmental or local</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>4.6</th>
<th>Formally appointed Medical Advisor or Medical Consultant to:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>• Commonwealth/State Government departments or agencies</td>
</tr>
<tr>
<td></td>
<td>• State/National/International health related organisations (e.g. Hospitals, National Heart Foundation)</td>
</tr>
<tr>
<td></td>
<td>• Pharmaceutical or Health Technology Organisation</td>
</tr>
<tr>
<td></td>
<td>• Military/Defence Organisations</td>
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<tr>
<td></td>
<td>• Formal advisor to HQCC, Coroner or similar</td>
</tr>
<tr>
<td></td>
<td>E.g. Consultant to NSW Health Department on Cardiac</td>
</tr>
<tr>
<td></td>
<td>0.5</td>
</tr>
<tr>
<td></td>
<td>Points allocation:</td>
</tr>
<tr>
<td></td>
<td>0.5 points per Organisation/Agency for advisorship or consultancy</td>
</tr>
<tr>
<td></td>
<td>E.g. If advisor for MSAC for 2 sub-committees of same organisation or agency</td>
</tr>
<tr>
<td></td>
<td>(count 0.5 only)</td>
</tr>
<tr>
<td></td>
<td>Examples include:</td>
</tr>
<tr>
<td></td>
<td>• Consultant to NSW Health Department on Cardiac Services</td>
</tr>
<tr>
<td></td>
<td>• Medical Advisor to WHO Standing Committee on Malaria</td>
</tr>
<tr>
<td></td>
<td>• Consultancies to subcommittees of Commonwealth Projects</td>
</tr>
<tr>
<td></td>
<td>• Consultant to Defence Force</td>
</tr>
<tr>
<td></td>
<td>• Specific Consultancies to QH or other Jurisdictions (review, report, study)</td>
</tr>
<tr>
<td></td>
<td>• Consultancies to medical/pharmaceutical organisations</td>
</tr>
<tr>
<td></td>
<td>• Consultancies to medical indemnity providers</td>
</tr>
<tr>
<td>Services, Medical Advisor to WHO Standing Committee on Malaria</td>
<td></td>
</tr>
<tr>
<td>---------------------------------------------------------------</td>
<td></td>
</tr>
<tr>
<td><strong>0.5 points per advisorship or consultancy</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Details required:</strong></td>
<td></td>
</tr>
<tr>
<td>▪ Position title</td>
<td></td>
</tr>
<tr>
<td>▪ Duration and frequency in role</td>
<td></td>
</tr>
<tr>
<td><strong>Note: Maximum score = 6 pts</strong></td>
<td></td>
</tr>
<tr>
<td><strong>No Commitment weighting applies</strong></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Chair or member of a Medical Advisory Committee of:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• a significant State or National or International Health Organisation</td>
</tr>
<tr>
<td>• Commonwealth/State Government departments or agencies</td>
</tr>
<tr>
<td>• Hospital Medical Advisory Committee</td>
</tr>
<tr>
<td>E.g. Cancer Fund, Pharmaceutical Benefits Advisory Committee, St Andrews War Memorial Hospital Medical Advisory Committee</td>
</tr>
<tr>
<td><strong>0.5 points per committee</strong></td>
</tr>
<tr>
<td><strong>Note: Maximum score = 3 pts</strong></td>
</tr>
<tr>
<td><strong>Commitment weighting: if continuous or cumulative commitment to committee is:</strong></td>
</tr>
<tr>
<td>▪ 5 years to 9 years = points x 1.5</td>
</tr>
<tr>
<td>▪ 10 years or greater = points x 2</td>
</tr>
</tbody>
</table>

| Consultancies to medical assessment tribunal |
| Chair/member Health Promotion Committee       |
| Advisor to compensation board e.g. QCOMP      |
| Advisor to Health Quality and Complaints Commissioner (HQCC) |
| Advisor to Pharmaceutical Benefits Advisory Committee |

**Note:** NHS terminology-Lead Clinician = Medical Advisor

**Examples include:**
- Chair/Member Commonwealth Medical Services Advisory Committee
- Research Foundations e.g. PAH Research Foundation
- Cancer Fund
- National Heart Foundation
- Asthma Foundation
- Diabetes Australia
- Cystic Fibrosis Queensland

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Guideline – Advancement: Senior medical officers to eminent (MO3) and pre-eminent (MO4) status
Human Resource Services
Chief Human Resources Officer
March 2018

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### Category 3: Outstanding contribution to clinical/professional research and education relevant to the business of the health service

<table>
<thead>
<tr>
<th>5.</th>
<th>Principle: Exceptional/innovative research in health</th>
<th>Grading range</th>
<th>General:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Significant personal contribution to research in health through:</td>
<td></td>
<td>- Unless otherwise specified, all criteria under this principle require at least a 1 year commitment</td>
</tr>
<tr>
<td>5.1</td>
<td>Supervision of 6 or more successful medically related research masters candidates</td>
<td>1</td>
<td>Must be 6 or more successfully completed</td>
</tr>
<tr>
<td>5.2</td>
<td>Supervision of 3 or more successful medically related research doctorate candidates</td>
<td>2</td>
<td>Must be 3 or more successfully completed</td>
</tr>
<tr>
<td>5.3</td>
<td>Receipt of public or private medical research grants at the following levels:</td>
<td>(0.5–1)</td>
<td>Ensure:</td>
</tr>
<tr>
<td></td>
<td>i. <strong>State</strong>: e.g. Smart State Grant, RBWH Foundation Grant</td>
<td></td>
<td>- Exclusive of 5.4 and 5.5</td>
</tr>
<tr>
<td></td>
<td>ii. <strong>National/international</strong>: NHMRC</td>
<td>0.5</td>
<td>- Include grant details and value</td>
</tr>
<tr>
<td></td>
<td>Note: <strong>Maximum score = 2</strong></td>
<td>1</td>
<td>- Do not include travel grants</td>
</tr>
</tbody>
</table>

**Note:**
1. Total points to be counted towards Principle 5 = 15 points
2. Criteria 5.3, 5.4 and 5.5 – research achievements are exclusive of each other
### 5.4 Receipt of quality grants;

 Examples:
 - $20,000 Safe Medication Project = 0.5 pt
 - $250,000 Fatigue Mgmt System Grant = 1 pt

 **Note: Maximum Score = 2**

<table>
<thead>
<tr>
<th>(0.5–1)</th>
<th>Quality grants pertain to:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>• Safety or quality improvement</td>
</tr>
<tr>
<td></td>
<td>• Staff management/ improvements</td>
</tr>
<tr>
<td></td>
<td>• Grants $50,000 or more = 1 pt</td>
</tr>
</tbody>
</table>

 Ensure:
 - Exclusive of 5.3 and 5.5
 - Include grant details and value

### 5.5 Recipient of a peer reviewed, medically related, funding grant of:

 - i. $50,000 to $299,999 = 1 pt
 - ii. $300,000 to 999,999 = 2 pt
 - iii. $1,000,000 or more = 3 pt

 Examples of funding sources may include: NHAndMRC, Smart State Research Grant, Cancer Fund or Heart Foundation or similar.

 **Note: Maximum score = 6**

 Ensure:
 - Exclusive of 5.3 and 5.4
 - Must be peer reviewed
 - Medically related
 - Nominate specific funding and source in detail column

 Do not include:
 - Clinical services funds

### 5.6 Investigator in multi-centre trials and/or studies (clinical, health system or epidemiological)

 - i. 1 to 5 Trials = 0.5 pt
 - ii. greater than 5 Trials = 1 pt

 (0.5–1)

 Ensure:
 - Must be multi-centre trials/studies
 - Nominate number of trials and brief name

### 5.7 Principal investigator on Phase I, II or III national or international medically related research trials.

 - i. 1 to 5 Trials = 1 pt
 - ii. greater than 5 Trials = 2 pt

 (1–2)

 Ensure:
 - Must be Phase I, II, or III trials
 - Nominate number of trials and brief name
 - Principal Investigator at site or overall trial eligible
| 5.8 | Participation in Governance of medically related research: | (0.5–1) | Ensure: Details included |
|     | ▪ Membership of duly constituted Research Granting Body Committee (e.g. Grant Review or Interview committees) |     | ▪ Position title |
|     | ▪ Reviewer of Medically Related Research Grants |     | ▪ Duration and frequency in role |
|     | ▪ Private Practice Research/Study Granting Committee |     | |
| i.  | Local: 0.5 | i. 0.5 | |
| ii. | State/National: 1 | ii. 1 | |
| **Note: Maximum score = 2 points** | | | |

| 5.9 | Leadership of an International Trial Group (1 point) | 1 | Ensure: Details included |
|     | **Note: Maximum score = 1 point** | | ▪ Position title |
|     | | | ▪ Duration and frequency in role |

Total Points to be counted towards Principle 5 = maximum of 15 points
### Category 3: Outstanding contribution to clinical/professional research and education relevant to the business of the health service

**6. Principle:** Exceptional/innovative contributions in publications (journals or textbooks) to health research, training or education

<table>
<thead>
<tr>
<th>Grading range</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>i. 1 to 5</td>
<td>i. 1</td>
</tr>
<tr>
<td>ii. 6 to 20</td>
<td>ii. 2</td>
</tr>
<tr>
<td>iii. Greater than 20</td>
<td>iii. 4</td>
</tr>
</tbody>
</table>

**Note:**
- published or explicitly accepted for publication medically related journals
- Include list of publications (i.e. name, journal, date)
- Save time: Cut and paste list into application from CV

**Examples to include for peer reviewed journals:**
- medically related journals
- periodicals
- clearly medical publications
- book reviews

**Do not count:**
- guidelines
- protocols
- newsletters
- quiz books
- letters to the editor
- “in press” unless accepted explicitly for publication
- abstracts
**6.2 Having been a principal author of chapters published medical textbook/s**

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>i.</td>
<td>1 to 5 textbooks</td>
</tr>
<tr>
<td>ii.</td>
<td>6 to 10 textbooks</td>
</tr>
<tr>
<td>iii.</td>
<td>Greater than 10 textbooks</td>
</tr>
<tr>
<td>i.</td>
<td>2</td>
</tr>
<tr>
<td>ii.</td>
<td>4</td>
</tr>
<tr>
<td>iii.</td>
<td>6</td>
</tr>
</tbody>
</table>

**Note:**
- Include list of textbooks (i.e. name, textbook, publisher, date)
- Same chapter subject in sequential addition of 1 textbook, counts as one textbook in total
- More than 1 chapter in same textbook, counts as 1 textbook in total
- Editor – textbook with multiple authorship equivalent to one textbook
- Save time: Cut and paste list into application from CV

**Do not count:**
- “in press” unless accepted explicitly for publication
- Departmental Guidelines or Protocols
- Flyers
- Supplements

**6.3 Other contributions:**

a. authorship or co-authorship of full textbooks
b. editor of textbook or chapters in a textbook

Panel to allocate relevant score in regard to:
- Impact
- Significance
- National/international publishing
- Level of commitment required to publish book

**Applicants must provide the following details:**
1. Copy of textbook - for full authorship (to be returned to applicant after assessment)
2. Reviews
3. Any other relevant information

**Note:** Panel will assess contribution and award appropriate benchmarked score.

Panel to Score

**Ensure:**
- Full list of publications/textbooks (i.e. name, textbook, publisher, date)
- Save time: Cut and paste list into application from CV
- For full/co - authorship
  - Copy of textbook (to be returned to applicant after assessment)
  - Reviews
  - Any other relevant information
### Category 3: Outstanding contribution to clinical/professional research and education relevant to the business of the health service

<table>
<thead>
<tr>
<th>Principle: Exceptional lecturer/teacher within a hospital/specialty and/or exceptional contribution to clinical training/education</th>
<th>Grading range</th>
<th>General:</th>
</tr>
</thead>
<tbody>
<tr>
<td>7. Demonstrated, significant and ongoing commitment to medically related teaching activities:</td>
<td>0.5</td>
<td>Unless otherwise specified, all criteria under this principle require at least a 1 year commitment</td>
</tr>
<tr>
<td>7.1 <strong>Tertiary training institution</strong> - provision of university level teaching activities for 1 year or greater. Examples include:</td>
<td>0.5</td>
<td>Examples Include:</td>
</tr>
<tr>
<td></td>
<td>- clinical tutoring activities</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- lecturing</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- formal tutorials</td>
<td></td>
</tr>
<tr>
<td>Note: Maximum score = 0.5 points</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

7.2 **Pre-vocational training** – provision of tutorials/lectures or training programs to pre-vocational trainees on a regular and sustained basis for 1 year or greater. |

Grading range = 0.5 points |

**Note: Maximum score = 0.5 points**

**Definition:** Pre-vocational training for: |
- interns, junior or senior house officers
### 7.3 Medical Colleges - Provision of College Training Activities:

- College tutorials/lectures within an institution
- Training programs for fellows and trainees
- Supervision of trainees
- Candidate examination training

Note: Scores are allocated on years of sustained commitment as follows.

**Nominate years of commitment and provide a brief description of activities undertaken in the details column**

<table>
<thead>
<tr>
<th>Years of Commitment</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>2 to 4 years</td>
<td>1</td>
</tr>
<tr>
<td>5 to 9 years</td>
<td>1.5</td>
</tr>
<tr>
<td>10 years or greater</td>
<td>2</td>
</tr>
</tbody>
</table>

Note: Maximum score = 2

### 7.4 Conference/Workshops:

At a state, national or international conference on at least 2 occasions during span of career. Points Allocation:

#### Oral or Poster Presentations

- **a. State** (min. 30 delegates) = 0.25 points
- **b. National/Australasian** = 0.5 points
- **c. International** = 1 points

**Invited Plenary Speaker/Facilitator of a Workshop**

- **i. State** (min. 30 delegates) = 0.5 points
- **ii. National/Australasian** = 0.75 points
- **iii. International** = 1.25 points

Ensure:

- No duplication between college and hospital achievements for 7.1 and 7.2

Examples include:

- Regular tutorials e.g. emergency intubation
- Principal organiser for a series of lectures or training program
- Training programs for fellows and trainees
- College Training Supervisor for specialist trainees
- Group tutorials for college exam candidates
- Informal bedside tutorial sessions
- Journal Clubs
- Provision of Continuing Education Program (CME), Maintenance of Professional Standards (MOPS) or other Professional Development education
- Regular speaker at college lecture series
- Preceptor for trainees
- Provision of exam practice sessions

Ensure:

- List of presentations include - name, conference, venue, date (estimate if necessary)
- Save time: Cut and paste list into application from CV

National – International Rules

- Australasian organisation conference held in Australia or Australasian = National
- Australasian organisation conference held elsewhere of Australasia = International
- International organisation conference held in Australia = International
- New Zealand = National/Australasian (refer to previous Conference leave approval policy. NZ considered national and not requiring Ministerial approval)
Chair or convenor of scientific meeting or conference

i. District/hospital symposium (more than 1 day)/State = 0.5 points
ii. National/Australasian = 1 points
iii. International = 2 points

Note: Minimum score = 1
Maximum score = 9

7.5 Key note addresses:
Leading plenary paper, presented by yourself, as subject matter expert with national or international reputation.

At a national or international medical conference at the invitation of the organizing body
a. National/Australasian (min 50 delegates) = 1 points
b. International = 2 points

Oration:

i. Hospital = 0.5 points
ii. College: national/Australasian = 1 point
iii. College: international = 2 points

Invited speaker – allocate to 7.3

- Asia/Pacific = International

Examples include:
- Medical college meetings
- National or international health organisations
- Panel member at conferences
- Allocate points per posters/presentation – multiple points apply for presentations with different content at same conference

Do Not Include:
- Lecturer or Presenter for EMST, APLS, ACLS, ATLS, CHRISP, ASSET, PBL or other similar courses
- Local conferences or workshops
- Hospital symposia

7.5 (2 - 6) Ensure:
- List of keynote addresses include - name, conference, venue, date (estimate if necessary)
- Save time: Cut and paste list into application from CV

National – international rules
- Australasian organisation conference held in Australia or Australasian = National
- Australasian organisation conference held elsewhere = International
- International organisation conference held in Australia = International
- New Zealand = National/Australasian (refer to previous Conference leave approval policy. NZ considered national and not requiring Ministerial approval)
- Asia/Pacific = International

Do not include:
- Speaker at college training program course
- Local conferences or workshops
| Note: Keynote address/oration on at least 2 occasions during span of career |
| Minimum score = 2 |
| Maximum score = 6 |

7.6 **International medical graduate training**: provision of IMG training for 1 year or greater, including preparation for AMC or fellowship examinations.
- Grading range = 0.5 points
- **Note: Maximum score = 0.5 points**

7.7 **Development of a new published curriculum or a recognised training program (at course or program level)**.
- Implementation at:
  - i. Facility = 0.5 pts
  - ii. Multiple facilities (Districts) or statewide = 0.75 pts
  - iii. National = 1pt
- **Note: Maximum score = 2**

7.8 ** Provision of lectures or presentations at recognised vocational training courses or workshops on a regular and sustained basis**: Examples include: EMST, APLS, ACLS, ATLS, CCRISP, ASSET, CRuSE, PBL, PHTLS, Emergo Training or similar
- **Note: Course or training event must occupy more than 1 day duration.**
- **Examples include: (but not limited to)**
  - EMST, APLS, ACLS, ATLS, CCRISP, ASSET, CRuSE, PBL, PHTLS, Emergo Training or similar courses
### Courses

Note: Course or training event must occupy more than 1 day duration.

- **i.** 1 to 2 courses/workshops per year = 0.5 points
- **ii.** 3 to 5 courses/workshops per year = 1 points
- **iii.** 6 or more courses/workshops per year = 2 points

**Commitment weighting:** if continuous or cumulative commitment to course/workshop is:
- **•** 5 years to 9 years = points x 1.5
- **•** 10 years or greater = points x 2

**Note:** Maximum score = 4

### Provision of education and training to other health professionals or the community on a regular and sustained basis:

Examples include: in-service training for nursing or allied health professionals; lectures or presenter at local conferences/workshops.

- **i.** 2 to 4 years commitment = 0.5 points
- **ii.** 5 to 9 years commitment = 0.75 points
- **iii.** 10 years or greater commitment = 1 point

**Note:** Maximum score = 1

**Details required:**
- Name of course/training event
- Participation level (period of contribution)

**Examples include: (but not limited to)**
- In-service training for health professionals (e.g. nursing, allied health, other medical officers)
- Lecturer or presenter local conferences, workshops, consumer organisations, Skills Development Centre
- Lecturer Family Medicine Programme

**Details required:**
- Name of course/training event
- Participation level (period of contribution)
## Category 3: Outstanding contribution to clinical/professional research and education relevant to the business of the health service

### Principle: Exceptional lecturer/teacher within a hospital/specialty and/or exceptional contribution to clinical training/education

<table>
<thead>
<tr>
<th>8.</th>
<th>Demonstrated, significant and ongoing commitment to organisation and quality assurance of medically related training activities:</th>
<th>Grading range</th>
<th>General: Unless otherwise specified, all criteria under this principle require at least a 1 year commitment</th>
</tr>
</thead>
</table>
| 8.1  | Membership of medical college, AMC or postgraduate medical council accreditation or standards teams | (0.5-1)       | Examples include:  
- College assessors or interviewer for overseas specialist/trainees for more than 3 occasions  
- IMG/OTD – Area of need assessment > 2  
- PMCQ accreditation team  
- College accreditation team  
- Selection panel for specialty (area/state level only)  
Ensure:  
To include dates and membership status in details column |
|      | i. Chair = 1 point  
ii. Member = 0.5 points                      |              |                                                                                                                                  |
|      | **Weighing:**  
Total occasions participated are greater than 10 = score x 2 weighting                                      |              |                                                                                                                                  |
|      | **Note:** Maximum score = 2                                                                                      |              |                                                                                                                                  |
| 8.2  | Membership of a quality or standards committee relating to training or education.  
Examples include: Post Graduate Medical Council, College Standards Committee for Continued Education | (0.5-1)       | Examples include:  
- Medical College Standards Committee for Continued Education  
- Post Graduate Medical Council Committee (do not duplicate with above)  
Do not include:  
- Health department committees – allocated these to 8.3 |
|      | ▪ Chair = 1  
▪ Membership = 0.5                                                                                           |              |                                                                                                                                  |
|      | **Note 1:** Maximum score = 3                                                                                     |              |                                                                                                                                  |
### 8.3 Membership of a health department committee relating to training and education

Examples include: METAG, Hospital Medical Education Committee, Library Committee

<table>
<thead>
<tr>
<th>Points per committee</th>
<th>Note: Maximum score = 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>0.5</td>
<td>Commitment weighting: if continuous or cumulative commitment to committee is:</td>
</tr>
<tr>
<td></td>
<td>• 5 years to 9 years = points x 1.5</td>
</tr>
<tr>
<td></td>
<td>• 10 years or greater = points x 2</td>
</tr>
</tbody>
</table>

#### Examples include:
- Hospital Medical Education Committee
- Queensland Health METAG
- Training Committee for Regional and Rural Rotations

#### Do not include:
- Department/Unit training committee e.g. Department of Cardiology Registrar Training Committee

### 8.4 Membership of university committee/s

Examples include: curriculum committees, examination committees and school committees

<table>
<thead>
<tr>
<th>Points per committee</th>
<th>Note: Maximum score = 1</th>
</tr>
</thead>
<tbody>
<tr>
<td>0.5</td>
<td>Commitment weighting: if continuous or cumulative commitment to committee is:</td>
</tr>
<tr>
<td></td>
<td>• 5 years to 9 years = points x 1.5</td>
</tr>
<tr>
<td></td>
<td>• 10 years or greater = points x 2</td>
</tr>
</tbody>
</table>

#### Examples include:
- Medical Library Committee
- UQ MBBS Interview/Admissions Committee
- Faculty Board
- Examination or Curriculum Committee

### 8.5 Co-ordination of a recognised training program for 2 years or more

#### Examples include:
- Coordinate Advance Surgical Training in South East Region

<table>
<thead>
<tr>
<th>Points per committee</th>
<th>Note: Maximum score = 4 points</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1 – 2)</td>
<td>i. Hospital/Facility/District = 1</td>
</tr>
<tr>
<td></td>
<td>ii. State = 1.5</td>
</tr>
<tr>
<td></td>
<td>iii. National = 2</td>
</tr>
<tr>
<td></td>
<td>i. 1</td>
</tr>
<tr>
<td></td>
<td>ii. 1.5</td>
</tr>
<tr>
<td></td>
<td>iii. 2</td>
</tr>
<tr>
<td>Commitment weighting: if continuous or cumulative commitment to committee is:</td>
<td></td>
</tr>
<tr>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>• 5 years to 9 years = points x 1.5</td>
<td></td>
</tr>
<tr>
<td>• 10 years or greater = points x 2</td>
<td></td>
</tr>
</tbody>
</table>

| 8.6 | Chief examiner or chair of a panel of national examiners or board of censors/education for specialist college | 2 | Examples include:  
• Censor in Chief – RACS  
• Chair Court of Examiners - ACEM |
| 8.7 | Membership of a panel of national examiners or board of censors/education for a specialist medical college for 2 years or greater | 1 | Ensure:  
• Membership is 2 years or greater  
• List dates of commitment |
| 8.8 | AMC examiner for 2 years or greater | 0.5 | Ensure:  
• Membership is 2 years or greater  
• List dates of commitment |
| 8.9 | Surveyor for a ACHS, NATA or similar accreditation entity for 2 years or greater | (0.5-1) | Ensure:  
• Membership is 2 years or greater  
• List dates of commitment  
Examples:  
• ACHS  
• NATO  
• ISO |

Note: Maximum score = 3 point
### Category 4: Other exceptional achievements in health

<table>
<thead>
<tr>
<th>9. Principle: Other exceptional achievements in health</th>
</tr>
</thead>
<tbody>
<tr>
<td>The panel may consider other exceptional achievements of benefit to the health system and/or medical profession at their discretion.</td>
</tr>
</tbody>
</table>

**Note:**
- Demonstrated achievements allocated points elsewhere in this application must not be counted again in this principle
- List all details of the exceptional achievement (including dates)
- Don’t limit yourself to the examples given below

**Examples include:**

**Distinguished service honours and formal recognition of outstanding service or professional excellence**
- Centenary Award
- Community Service – Health Related (International)
- Scott Frame Award for Pre-Hospital Trauma Life Support
- District Service Award
- Life Membership – Surf Lifesaving
- Queensland Health Medallions/Certificates for Distinguished Service or Australian Day Awards
- Humanitarian Overseas Service Medal
- Defence Force Service Medal
- Public Service Medal
- International/National College: Research / Teaching Excellence / Administration Award etc
- AMA Medal or other awards for Distinguished Service / Outstanding Achievement
- Queenslander of the Year
- Order of St John
- OAM – Medal of the Order of Australia (for services to medicine or the health system)
- AM – Member in the Order of Australia (for services to medicine or the health system)
- AO – Officer in the Order of Australia (for services to medicine or the health system)
- AC – Companion in the Order of Australia (for services to medicine or the health system)
- Australian of the Year
- Clinical Excellence Award
Other exceptional innovative achievements – recognition by Queensland Health, jurisdiction, medical colleges, AMA etc

- Research – Recognition of achievements (Including Society Research Award)
- Patents
- Extensive involvement of world class major clinical services
- Major broad recognisable and influential initiatives/achievements in medicine/health care system

Other medically relevant achievements

- Chief Medical Officer special events: major sporting events, COAG, Papal visit etc
- Investigator of the year

Do not include:

- Member of organising committee for conference, scientific meeting
- Academic prizes in undergraduate or postgraduate training