

## **EQUIVALENCE COMMITTEES - CLINICAL RADIOLOGY and CLINICAL ONCOLOGY**

### **TERMS OF REFERENCE**

#### **Overall purpose**

The Equivalence Committees evaluate applications for GMC specialist registration in accordance with the relevant CESR (Certificate of Eligibility for Specialist Registration) application and evaluation process set by the GMC. The Clinical Radiology Equivalence Committee also evaluates applications for subspecialty registration in the GMC approved subspecialty of Interventional radiology.

The Equivalence Committees report to the relevant Specialty Training Board (STB).

#### **Terms of Reference**

1. Undertake the evaluation of new and review applications for specialist registration and subspecialty registration in accordance with a format determined by the GMC;
2. Provide a recommendation for approval or rejection of an application;
3. Provide recommendations for additional training, examinations, assessment or other tests of competence where the recommendation is to reject an application;
4. Develop and review advice to potential applicants;
5. Respond to appeals, queries and consultations at the request of the STB, GMC or other relevant party

#### **Membership**

The minimum number of medical members on each committee is five.

Medical members of the committee must be members of the relevant Faculty in good standing with the RCR, resident in the UK, on the GMC specialist register with a current licence to practise and in active clinical practice in a substantive NHS consultant post. No minimum period in a substantive consultant post is required.

Members are appointed following advertisement. Applications are made by submission of a CV and short statement indicating the applicant's interest in and experience of specialty training in the UK. Appointments are decided by the relevant MDET, in conjunction with an existing member of the Equivalence Committee (the Chair if the MDET has delegated that office) and one member of the STB.

All medical members will serve a first four year term, with the option to serve a second four year term with the agreement of the Chair.

A Lay Member may also form part of the committee, who will be appointed and serve according to the general RCR process in operation at the time for such appointments.

Where necessary, a suitably qualified medical member may be co-opted by the committee for a particular application or a particular period.

The Medical Director, Education and Training of the Faculty (MDET) is the Chair of the relevant committee for their term of office as MDET. The MDET may delegate the office

of Chair to a medical member or members of the committee, in which case the MDET will be an ex-officio member of the committee.

### **Chair**

Where the MDET delegates the Chair, expressions of interest in the appointment shall be sought from the current Equivalence Committee membership by way of a short statement setting out their interest in the post. The MDET will appoint the Chair, or Joint Chairs, in consultation with others they consider appropriate.

The Chair is responsible for ensuring that the purpose and terms of reference are observed, engaging all members of the committee and resolving queries in respect of general policy and individual applications where required, in conjunction with the staff lead.

Because of the specific expertise and experience desirable for this appointment, it is usual for the Chair to be appointed from within the current membership of the committee. However, if for any reason this is not possible, external applications for a medical member and Chair will be sought. The Chair's term of office will coincide with their term of office on the Equivalence Committee.

### **Operation**

Medical and lay members are required to evaluate the application against the standards set down by the GMC.

All members must sign a Confidentiality Agreement before participating in the work of the Equivalence Committee, and are expected to take appropriate steps to ensure confidentiality of the application, in accordance with current Data Protection legislation.

Applications are reviewed electronically through the GMC evidence upload system. Each application consists of a substantial amount of electronic documents and will take approximately one-two hours to review initially.

The **Clinical Radiology Equivalence Committee** deals with applications by email; application details are sent to a group of members who reply with their individual recommendations against a set deadline and the outcome is usually resolved by email. Members might expect three or four applications per month. Virtual meetings of the members looking at an application are arranged as required if circumstances make this necessary.

The **Clinical Oncology Equivalence Committee** meet virtually as required depending on when applications are received. Members might expect to deal with approximately eight and ten applications per year. The Chair usually attends all meetings; other members attend as available.

Medical members of the Equivalence Committee may claim up to four CPD points per application evaluated with the potential for additional points if learning from an individual application is particularly significant.