



**AANZHPBA Post-Fellowship Education & Training  
Program in HPB Surgery  
Training Regulations Handbook  
2023**



<b>1. INTRODUCTION.....</b>	<b>4</b>
1.1 TERMS AND DEFINITIONS .....	4
1.2 OVERVIEW OF REGULATIONS FOR THE AANZHPBA PFET PROGRAM .....	5
1.3 ADMINISTRATION AND OWNERSHIP .....	6
<b>2. PROGRAM OVERVIEW .....</b>	<b>6</b>
2.1 PROGRAM AIMS .....	6
2.2 PROGRAM DESCRIPTION.....	7
<b>3. SELECTION .....</b>	<b>7</b>
3.1 APPLICATION AND ELIGIBILITY .....	8
3.2 SELECTION .....	8
3.3 CURRICULUM VITAE .....	8
3.4 REFEREE REPORTS .....	9
3.5 INTERVIEWS .....	9
3.6 POSITION OFFERS .....	9
3.7 DIVERSITY AND SOCIAL EQUITY .....	10
3.8 ALLOCATION TO HOSPITAL UNITS .....	10
<b>4. TRAINEE ADMINISTRATION.....</b>	<b>11</b>
4.1 REGISTRATION, MEMBERSHIP AND TRAINING FEES .....	11
4.2 LEAVE .....	11
4.3 INTERRUPTION.....	12
<b>5. PROGRAM REQUIREMENTS .....</b>	<b>13</b>
5.1 OVERVIEW OF PROGRAM REQUIREMENTS.....	13
5.2 TRAINING TERMS AND POSTS .....	14
5.3 CURRICULUM .....	14
5.4 LOGBOOK OF SURGICAL EXPERIENCE .....	15
5.5 CASE MIX .....	16
5.6 RESEARCH REQUIREMENT .....	16
5.7 PORTFOLIO OF TRAINING .....	17
5.8 EDUCATIONAL ACTIVITIES.....	17
5.9 MID-TERM INTERVIEW.....	18
5.10 PFET YEAR 1-2 PROGRESSION .....	19
5.11 HOSPITAL POST EVALUATION .....	19
<b>6. ASSESSMENT.....</b>	<b>20</b>
6.1 FORMATIVE ASSESSMENT .....	20
6.2 SUMMATIVE ASSESSMENT .....	20
6.3 PROCEDURAL BASED ASSESSMENTS (PBAs) .....	20
6.4 NON-PROCEDURAL ASSESSMENTS (NPAs) .....	21
6.5 CONDUCTING ASSESSMENTS .....	21
6.6 MID-TERM TRAINING ASSESSMENT .....	22
6.7 UNSATISFACTORY MID-TERM ASSESSMENT.....	23
6.8 END OF TERM TRAINING ASSESSMENT .....	24
6.9 UNSATISFACTORY END OF TERM ASSESSMENT .....	25
6.10 EXAMINATION .....	26
<b>7. PROBATIONARY TRAINING AND PERFORMANCE MANAGEMENT .....</b>	<b>27</b>
7.1 PROBATIONARY TRAINING .....	28
7.2 PERFORMANCE MANAGEMENT AND REVIEW PROCESS .....	28

<b>8. APPEALS</b> .....	<b>29</b>
8.1 APPEALS PROCESS .....	30
<b>9. PROGRAM COMPLETION</b> .....	<b>30</b>
9.1 CERTIFICATION .....	30
9.2 EXIT INTERVIEW .....	30
<b>10. RECOGNITION OF PRIOR LEARNING</b> .....	<b>30</b>
10.1 TRAINING OUTSIDE THE AANZHPBA PROGRAM .....	30
10.2 RURAL PFET PROGRAM .....	31
<b>11. ASSOCIATED DOCUMENTS</b> .....	<b>31</b>
<b>12. CONTACTS</b> .....	<b>31</b>
12.1 AANZHPBA – TRAINING COMMITTEE .....	31

## 1. Introduction

### 1.1 Terms and definitions

<b>Term</b>	<b>Definition</b>
AANZHPBA	Australian and Aotearoa New Zealand Hepatic, Pancreatic & Biliary Association
AANZHPBA PFET program	Structured 2-year program providing post fellowship training in HPB Surgery within AANZHPBA accredited posts according to the curriculum as set by the AANZHPBA Training Committee
Board	AANZHPBA board of directors
Curriculum	Curriculum for the AANZHPBA Post Fellowship Education & Training Program as set by the AANZHPBA Training Committee
End of Term	End of a 12 month training term within a HPB post
Examination Committee	Examination Committee of the AANZHPBA Board
Executive Officer	Executive Officer of AANZHPBA
Examination	Examination covering the breadth of the AANZHPBA PFET Program Curriculum, undertaken in the second year of training
HPB	Hepatopancreatobiliary
HPB post	Hospital unit accredited by the AANZHPBA for training in HPB Surgery within the AANZHPBA PFET program
HPB Training	Training in HPB Surgery within an AANZHPBA accredited post according to the curriculum as set by the AANZHPBA Training Committee
HPB Surgeon	A specialist surgeon who has obtained postgraduate training and experience in the multidisciplinary approach to the diagnosis and treatment of patients with HPB disorders and provides leadership and devotes a major portion (over 50%) of their professional practice to these activities as well as HPB education and research.
HPB Unit	A surgical unit with a significant workload in HPB surgery, including preoperative work-up, operative care and post op follow-up, of a wide range of HPB surgical diseases within a multidisciplinary setting. At least two of the consultants on the unit will be formally accredited HPB surgeons.

Medbook	IHPBA online logbook platform
Mid-Term date	Mid-way point of each 12 month Training Term, 6 months from commencement of the term
IHPBA	International HepatoPancreatoBiliary Association
NPA	Non-Procedural Assessment
PBA	Procedural Based Assessment
PFET	Post Fellowship Education and Training
RACS	Royal Australasian College of Surgeons
Research requirement	Research activities that form a mandatory component of the AANZHPBA PFET program
RPFET	Post Fellowship Education and Training in Rural Surgery
RPL	Recognition of prior learning
Supervisor	Coordinates management, education and training of accredited trainees in accredited training posts. Monitors performance, completes assessments and identifies and documents performance management.
Syllabus	Syllabus within the Curriculum for the AANZHPBA Post Fellowship Education & Training Program
Training Term	Each training term is 12 months duration from the start date of employment in an accredited training post
Trainee	AANZHPBA Post Fellowship Education & Training Program Trainee
Training Committee	Training Committee of the AANZHPBA Board

## 1.2 Overview of Regulations for the AANZHPBA PFET Program

1.2.1 The Regulations encompass the rules, procedures, policies, administrative processes and principles for the control and conduct of the AANZHPBA PFET program.

1.2.2 All Trainees, Supervisors, Training Committee members and Board members are required to comply with these Regulations

1.2.3 The information in these Regulations is as accurate as possible at the time of publication. The Board reserves the right to make reasonable changes to these

Regulations at any time. As the regulations are subject to change, the most current version is available on the AANZHPBA website (link). All persons are advised to ensure they are consulting the most current version.

1.2.4 All Trainees must be familiar with the applicable policies, which are specifically referred to throughout these Regulations.

1.2.5 In the event of any discrepancy between the Training Regulations and another related policy, the Training Regulations shall take precedence.

### 1.3 Administration and ownership

1.3.1 The AANZHPBA is the body that conducts and administers the AANZHPBA PFET program in Australia and Aotearoa New Zealand.

1.3.2 The AANZHPBA Training Committee is responsible for delivery of the AANZHPBA PFET program, the accreditation of HPB posts, the selection of trainees into the program and allocation to HPB posts, and the assessment of Trainees while in these posts.

1.3.3 The AANZHPBA is the educational provider and not the employer. The AANZHPBA does not guarantee employment but simply allocates training positions. The contract of employment is with the hospital and not the AANZHPBA. Trainees must abide by the specific employment conditions with individual hospitals. The Trainee is responsible for notifying the AANZHPBA Training Committee of changes to their employment status.

## 2. Program Overview

### 2.1 Program Aims

2.1.1 The purpose of the AANZHPBA PFET program is to provide a structured educational and training experience in HPB Surgery. The program enables trainees to achieve expertise in the understanding, diagnosis, and management (including the necessary surgical skills) of diseases of the liver, pancreas, and biliary tract.

2.1.2 The AANZHPBA PFET program is designed to enable trainees to achieve competency in the domains of medical and technical expertise, clinical judgement, communication, collaboration, management and leadership, health advocacy, scholar and teacher, professionalism and ethics and cultural safety, leading to competent independent practice as a specialist HPB Surgeon.

2.1.3 The program is designed to follow the current FRACS for General Surgery training. It is an expectation of the RACS that a qualified surgeon is knowledgeable in the management of HPB surgery, therefore, this fellowship and subsequent curriculum will not restate those learning objectives required of all general surgeons, but rather build upon these concepts.

2.1.4 Graduates of the AANZHPBA PFET program, will be able to provide comprehensive, state-of-the-art medical and surgical care to patients with surgical disorders/disease of the liver, pancreas, biliary tract, duodenum and spleen.

## 2.2 Program Description

2.2.1 The AANZHPBA PFET program provides core knowledge and expertise to prepare its graduates to be expert HPB surgeons, who work in collaboration with a multidisciplinary team, to provide comprehensive care for HPB patients as well as leadership in the surgical, medical and lay communities in matters pertaining to HPB disease.

2.2.2 Trainees will work within Specialty HPB Units and gain exposure to a multidisciplinary team of HPB Surgeons, Gastroenterologists, Hepatologists, Medical Oncologists, Radiation Oncologists, Interventional Radiologists and Pathologists, through MDT meetings and collaborative care of patients with complex HPB disease.

2.2.3 Trainees will gain exposure to a broad case mix of HPB Surgical conditions and procedures and will participate in initial assessment, pre-operative decision making, perioperative management and patient follow-up.

2.2.4 Trainees will be actively involved in the management of emergency surgical patients with a focus on HPB surgical emergencies. Some, posts will offer training in Trauma Surgery and management of HPB injuries within Tertiary Trauma Centres.

2.2.5 During training, Trainees will participate in educational activities that form part of the AANZHPBA PFET Program. Trainees will attend the ANZPBA fellowship Training weekend and participate in the AANZHPBA Journal Club.

2.2.6 Throughout the program, Trainees will have opportunities to develop skills in clinical research and participate in research projects in the field of HPB Surgery.

## 3. Selection

### 3.1 Application and eligibility

3.1.1 Candidates who have successfully completed FRACS or equivalent in General Surgery and have appropriate medical registration (in Australia or Aotearoa New Zealand) are eligible to apply for entry to the AANZHPBA PFET program (except where 3.1.2 applies). Applicants must be citizens or permanent residents of Australia or Aotearoa New Zealand.

3.1.2 The following candidates are ineligible for application to the AANZHPBA PFET program:

- a. Candidates either currently on the RPFET program or who have been trainees of the RPFET program during the last 3 years.
- b. Candidates applying for entry to the RPFET program in the same year

3.1.3 Details of the application process are available on the AANZHPBA website [www.AANZHPBA.com](http://www.AANZHPBA.com)

3.1.4 Applications for the AANZHPBA PFET program generally open in April for the following year.

### 3.2 Selection

3.2.1 Trainee selection aims to identify those doctors with the values, attitudes and aptitude required to become competent hepato-pancreatico-biliary surgeons. The selection process will involve assessment of an applicant’s knowledge, skills, and behaviour and takes into account their clinical experience, academic and other life achievements.

3.2.2 Applications will be considered by the Training Committee of the AANZHPBA.

3.2.2 Selection of candidates into the HPB Fellowship program will be determined by the following selection tools:

Curriculum Vitae (CV)	40%
Referees reports	30%
Interview	30%

### 3.3 Curriculum vitae

3.3.1 During scoring of an application, points will be awarded to the following:

- a. Experience in general surgery



- b. Experience in HPB surgery
- c. Time from FRACS or equivalent
- d. Higher degree
- e. Research- esp HPB research
- f. Publications – manuscript type, quality of journals etc
- g. Presentations at national or international meetings
- h. Administrative involvement and organisational activities
- i. Leadership activities
- j. Teaching activities

### 3.4 Referee reports

3.4.1 A minimum of three referees with accurate contact details including mobile phone number must be provided.

3.4.2. Referee reports are obtained through structured telephone questionnaires with at least 2 of the nominated referees.

### 3.5 Interviews

3.5.1 Candidates will be shortlisted on the basis of CV scoring and referee reports. Only shortlisted candidates will be offered an interview.

3.5.2 Structured interviews of shortlisted applicants will be conducted by members of the AANZHPBA Board and Training Committee.

3.5.3 Interviews will be conducted either via videoconferencing or in-person.

3.5.4 Interviews usually take place in May or June for entry to the program the following year.

### 3.6 Position offers

3.6.1 Following scoring of the interviews, applicants are ranked and Training posts are offered in accordance with the final ranking,

3.6.2 The number of positions offered each year will be dependent upon the availability of accredited positions and quality of candidates.

3.6.3 Successful candidates will be notified once selection has been finalised by the Training Committee.

3.6.4 Applicants who are not offered a position on the AANZHPBA PFET program, will be notified in writing of their performance in selection, their overall ranking, and suggestions for strengthening future applications.

### 3.7 Diversity and Social Equity

3.7.1 The AANZHPBA is committed to increasing the diversity of the HPB surgical workforce and endorses use of diversity, workforce planning, availability and stability or other social equity objectives as valid considerations in selecting Trainees.

### 3.8 Allocation to hospital units

3.8.1 Allocation of Trainees to hospital posts is determined by the AANZHPBA Training Committee.

3.8.2 Allocations depend on post availability and are subject to acceptance by the Hospital Unit.

3.8.3 Allocations take into consideration the various strengths and opportunities provided by different posts and the need to provide a balanced and equitable training experience for all Trainees.

3.8.4 Trainees may be allocated to any of the AANZHPBA accredited posts across Australia and Aotearoa New Zealand.

3.8.5 Posts outside Australia and Aotearoa New Zealand are highly sort after. Trainees may apply for allocation to one of these posts in the 2<sup>nd</sup> year of the program. Allocation is determined by the Training Committee following a competitive selection process.

3.8.6 In general, to ensure a diverse training experience, trainees will not be permitted to complete both training years in the same state. Likewise, requests for allocation to a post in the same hospital in which registrar training was undertaken will usually be denied.

3.8.7 Trainee requests for specific posts that align with their individual training goals (eg ERCP experience) and personal circumstances are taken into consideration, however the Training Committee does not guarantee that Trainees will be allocated their requested post. Preference is given to 2<sup>nd</sup> year Trainees and then 1<sup>st</sup> year Trainees according to ranking at selection.

## 4. Trainee Administration

### 4.1 Registration, membership and training fees

4.1.1 Trainees are required to have successfully completed the Surgical Education and Training (SET) Program Requirements for General Surgery and hold FRACS or equivalent.

4.1.2 Trainees are required to hold specialist registration in General Surgery from the Medical Board of Australia without conditions or undertakings, or Vocational Registration in General Surgery from the Medical Council of Aotearoa New Zealand without conditions.

4.1.3 Trainees must hold Associate Membership with the AANZHPBA for the duration of the training program, with membership dues fully paid. Associate Membership fees and the membership application form can be found on the AANZHPBA website:

<https://www.AANZHPBA.com/member-application/>

4.1.4 The AANZHPBA Board is responsible for the determination of PFET fees as well as the invoicing and collection of these fees.

4.1.5 PFET dues must be fully paid within the terms specified by the AANZHPBA Board. Failure to pay these fees on time will result in automatic dismissal from the AANZHPBA PFET program.

### 4.2 Leave

4.2.1 Trainees undertaking full-time training are permitted a maximum of twelve (12) weeks of leave per twelve-month term subject to approval by the employing hospital.

4.2.2 The maximum leave entitlement is inclusive of, but not limited to, combined annual, personal, compassionate, parental, study, exam, conference, and carer's leave.

4.2.3 Periods beyond this may result in the term not being accredited towards training. Where a Trainee takes more than twelve (12) weeks leave during a twelve-month term, the term may be deemed assessable if the supervisor and consultants have been able to adequately assess the Trainee and the logbook numbers. In this scenario the Trainee will still undertake an End of Year Assessment.

4.2.4 Trainees wishing to take more than twelve (12) weeks of leave in one (1) year must receive prior approval for either interruption of training or extension of leave from the AANZHPBA Training Committee in accordance with Section 4.3 of these Regulations, and subject to approval by the employing hospital.

4.2.5 Trainees who take more than twelve (12) weeks leave from training without the prior approval of, or notification to, the AANZHPBA Training Committee, will be considered as having abandoned their post. In this event, the AANZHPBA Training Committee will provide **ten (10) days'** notice to the Trainee, for attendance at a meeting to consider their continued participation in the training program. Should the Trainee not respond, or not attend the meeting, the Trainee will be dismissed from the AANZHPBA PFET program.

### 4.3 Interruption

4.3.1 A Trainee may defer their second year of training after satisfactory completion of their first year of placement. Deferment of the first year of training is not allowed.

4.3.2 Training may be interrupted for either 12 or 24 months, for a maximum period of two (2) years.

4.3.3 Interruption of training will be granted for PhD/research, family leave and placement to a non AANZHPBA accredited HPB or Transplant Unit (eg overseas).

4.3.4 All requests for interruption of training must be made in writing using the Application for Interruption of Training Form and submitted to the AANZHPBA Executive Officer.

4.3.5 All requests for interruption will be considered by the Training Committee.

4.3.6 Trainee requests for interruption to training for the following year should be submitted by the Training Committee at least six (6) months prior to the start of the following training year. Requests submitted outside of this time frame will be considered in exceptional circumstances.

4.3.7 Trainees will be formally notified by the Training Committee as to whether their request has been approved or otherwise. Trainees are advised not to undertake any action until formal notification from the Training Committee has been received.

4.3.8 Extensions to interruption to training must adhere to the same criteria as new requests. Failure to do so may result in the request being denied.

4.3.9 Should a Trainee resign from a position of employment, they must also resign from the PFET Training Program. Only under exceptional circumstances will approval be granted to allow interruption of training during a Training Term. In this instance, prior written approval must be obtained from the Training Committee prior to resignation from the position of employment. Trainees should not resign from employment, before contacting their Supervisor of Training for support, advice, and assistance.

## 5. Program Requirements

### 5.1 Overview of Program Requirements

5.1.1 Summarised below are the overall requirements for completion of the AANZHPBA PFET program.

<b>Requirement</b>	<b>Quantity/Description</b>
Rotation	Satisfactory completion of two (2) twelve-month terms in an accredited HPB training post
Curriculum	Satisfactory completion of the curriculum requirements
Research	Satisfactory completion of research requirements
Logbook	One (1) per twelve-month training term with an adequate case load of HPB cases.
PBA (Procedure Based Assessment)	Completion of two (2) per twelve-month training term.
Attendance at specialty meeting	Attend the annual AANZHPBA conference each year
Attendance and participation in educational activities organised by the AANZHPBA	Participate in the annual AANZHPBA Trainees' Weekend (or alternate educational activity as set by the AANZHPBA Training Committee) each year Attendance and participation in AANZHPBA Journal Club Meetings
Examination	Achieve an overall pass in the Examination.

## 5.2 Training terms and posts

5.2.1 Trainees are required to satisfactorily complete a minimum of two (2) years of HPB Surgical Training within posts accredited by the ANZHPA Training Committee. This needs to consist of at least two different locations for training of at least one year each. A minimum of one of the years must be in Australia or Aotearoa New Zealand.

5.2.2 Trainees who do not complete both terms satisfactorily may be required to undertake additional training terms as determined by the AANZHPBA, in accordance with the AANZHPBA PFET Program Training Regulations.

5.2.3 If ERCP and EUS training is included, this must satisfy the conjoint committee requirements and may require an additional period of training.

5.2.4 If liver/pancreas transplantation training is required, a further 12 months of training is required in conjunction with the Section of Transplantation Surgery.

5.2.5 Additional research training for a higher degree will not replace the clinical training requirements.

## 5.3 Curriculum

5.3.1 Trainees are required to be familiar with the AANZHPBA PFET Curriculum and Syllabus.

5.3.2 Details of the Curriculum and Syllabus are available on the AANZHPBA website ([link](#)).

5.3.3 The AANZHPBA Training Committee is responsible for the development, maintenance and updating of the Curriculum.

5.3.4 The Curriculum will be reviewed every three to five years.

5.3.5 The goals and objectives of the AANZHPBA curriculum are to achieve the following core competencies in HPB training.

- a. Collaboration and teamwork
- b. Communication
- c. Cultural competence and cultural safety
- d. Health advocacy

- e. Judgement and clinical decision making
- f. Leadership and management
- g. Medical expertise
- h. Professionalism
- i. Scholarship and teaching
- j. Technical expertise

#### 5.3.6 Training is delivered through:

- a. Procedural experience in HPB Surgery.
- b. Clinical experience in the management of HPB Surgical patients including initial outpatient assessment, preoperative decision making, perioperative management, and patient follow-up.
- c. Clinical experience in the management of emergency surgical patients with a focus on HPB surgical emergencies and HPB trauma.
- d. Collaboration with a multidisciplinary team including interventional radiologists, pancreatobiliary endoscopists, gastroenterologists, hepatologists, transplant surgeons, medical oncologists, radiation oncologists, and pathologists including participation in structured multidisciplinary conferences.
- e. Participation in a program consisting of conferences, case discussions, lectures, debate series, and journal club, covering not only clinical surgical problems but also nonsurgical, basic science, clinical research, and ethical problems.
- f. Participation in clinical and/or basic science research projects in the field of HPB Surgery
- g. Participation in Procedural Based Assessments and informal Non-Technical Assessments.

#### 5.3.7 The Syllabus for the AANZHPBA PFET program consists of five (5) modules:

- I. Anatomy
- II. Pathophysiology
- III. Perioperative care
- IV. Clinical
- V. Research and education

5.3.8 At the start of the Training Term, it is the responsibility of the Trainee to discuss with their Supervisor all clinical and training experiences that might be available, as well as the unit and Trainee expectations for the coming 12 months.

## 5.4 Logbook of Surgical Experience

5.4.1 Trainees are required to maintain accurate and complete of logbooks using the prescribed platform. The logbook must be maintained according to the specified data fields.

5.4.2 In determining minimum logbook experience, the emphasis will be on obtaining competence rather than achievement of procedural numbers alone. However, it is expected that a Trainees logbook would include a minimum of 20 liver resections and 10 pancreas resections per year. There should be an adequate case load of HPB cases, the case-mix which will vary depending on the complexity and profile of the unit.

5.4.3 The Trainee's logbook data will be reviewed at the Mid-Term Assessment, Mid-Term Interview and evaluated as part of the End of Term Assessment.

5.4.4 The logbook must be verified by the Supervisor prior to submission to the AANZHPBA. The Supervisor may seek input from other members of the Unit, to adequately evaluate and verify logbook data.

5.4.8 The trainee is responsible for submitting the completed logbook to the AANZHPBA Executive Officer within fourteen (14) days of the Mid-Term Date and within fourteen (14) days of the Term ending.

5.4.9 Any unsatisfactory performance relating to the logbook data will be reported to the AANZHPBA Training Committee and may result in non-accreditation of the term.

5.4.10 Failure to submit a complete, accurate and verified logbook by the due dates will result in non-accreditation of the term.

## 5.5 Case Mix

5.5.1 While case mix at certain posts may not offer exposure to all areas of the Syllabus (depending on the complexity and profile of the unit), the operative and non-operative case mix should cover most areas of HPB Surgery as defined in the Syllabus and be adequate to reach the required proficiency.

## 5.6 Research requirement

5.6.1 All trainees must complete a mandatory Research Requirement within the 2-year program as outlined in the AANZHPBA PFET Research Requirement Policy.



5.6.2 Trainees must obtain pre-approval from their Supervisor and the Training Committee to ensure their research project is appropriate prior to commencement of the research project.

5.6.3 The AANZHPBA PFET Application for Approval of Research Project Form must be completed and submitted to the AANZHPBA Executive Officer by whichever is earlier:

- a. within fourteen (14) days of the Mid-Term date in **PFET Year 1**
- b. at least fourteen (14) days prior to the Mid-Term Interview in **PFET Year 1**

5.6.4 Trainees must apply for recognition of completion of the research requirement, using the Application for Recognition of Completion of Research Requirement Form. The application must be verified and signed by the Supervisor prior to submission.

5.6.5 The Trainee is responsible for submitting their Application for Recognition of Completion of Research Requirement to the AANZHPBA Executive Officer a minimum of **eight (8) weeks prior** to sitting the Examination in PFET Year 2, however it is strongly recommended Trainees submit the application prior to commencement of the 2<sup>nd</sup> PFET Year.

5.6.6 Applications for completion of the research requirement will be considered by the AANZHPBA Training Committee for approval.

5.6.7 The research requirement must be certified as complete by the AANZHPBA Training Committee for successful completion of the AANZHPBA PFET program.

## 5.7 Portfolio of Training

5.7.1 The trainee will maintain an up-to-date portfolio of their training, which will include:

- a. Surgical logbook experience
- b. Record of research activities
- c. Record of all completed PBAs (whether successful or not)
- d. Documentation relating to any period of performance management or probationary training
- e. All completed formative and summative assessment forms and results

5.7.2 The Portfolio of Training will be reviewed at the Mid-Term Training Assessments, Mid-Term Interviews and End of Term Training Assessments.

## 5.8 Educational activities

5.8.1 All Trainees must attend the AANZHPBA Annual Scientific Meeting each year (except while allocated to a training post outside of Australia and Aotearoa New Zealand).

5.8.2 It is mandatory for trainees to attend and participate in the AANZHPBA Trainees' Weekend (or alternate educational activity as set by the Training Committee) each year (except while allocated to a training post outside of Australia and Aotearoa New Zealand).

5.8.3 Attendance and participation in AANZHPBA Journal Club meetings is mandatory (except while allocated to a training post outside of Australia and Aotearoa New Zealand). Journal Club meetings generally occur once every three months and are held within each State/Region. Key articles are selected by the AANZHPBA Training Committee and assigned to Trainees on a state basis for presentation and discussion.

## 5.9 Mid-Term Interview

5.9.1 Trainees are required to attend a Mid-Term Interview with representatives of the AANZHPBA Training Committee.

5.9.2 The Mid-Term Interview is generally conducted at the AANZHPBA Training Weekend. The Mid-Term Interview is usually a face to face meeting, but may be conducted via videoconference when considered necessary by the Training Committee. Mid-term interviews for Trainees in posts outside Australia and Aotearoa New Zealand will be conducted via videoconference.

5.9.3 The purpose of the Mid-Term interview is to:

- a. Check on Training progress to ensure Trainees are on track to meet requirements
- b. Obtain feedback on the training experience, to identify and address any issues

5.9.4 The Trainee's Portfolio of Training including Mid-Term logbook, record of PBAs, record of research activities and Mid-Term Training Assessment will be reviewed at the Mid-Term Interview. In the first year of training, the PFET Year 1 to 2 Progression Form will also be reviewed.

5.9.5 It is the responsibility of the Trainee to submit their complete and accurate Portfolio of Training (and PFET Year 1 to 2 progression form if applicable) to the AANZHPBA Executive Officer, by whichever is earlier:

- a. within fourteen (14) days of the Mid-Term date
- b. at least fourteen (14) days prior to the Mid-Term Interview

5.9.6 The Training Committee must report any Trainee logbook or performance assessment issues identified at the Mid-Term Interview to the AANZHPBA Board.

5.9.7 At the interview, the Trainee will be provided with an opportunity to report on their training experience in their current post (eg. primary operator opportunities, supervision, support, workplace experience, unit culture) and raise any concerns or issues.

5.9.8 The Training Committee must report any concerns identified in the Interview with regard to Trainee experience to the AANZHPBA Board.

5.9.9 The Board will conduct an investigation into any serious concerns reported and provide feedback to the Supervisor and Trainee of the outcome of this investigation.

## 5.10 PFET Year 1-2 Progression

5.10.1 In PFET Year 1, Trainees must complete the AANZHPBA PFET Year 1 to 2 progression form and submit this form in accordance with section 5.9.5.

5.10.2 The PFET Year 1 to 2 Progression Form will be reviewed at the Mid Term Interview and used to guide discussion about individual Training needs and career objectives.

5.10.3 The PFET Year 1 to 2 progression form and discussion will be taken into account when allocating Hospital posts for PFET Year 2.

5.10.4 Towards the end of PFET Year 1, Trainees will meet with a representative of the Training Committee to review training progress and identify specific training goals for PFET Year 2. This will generally occur via videoconference.

5.10.4 A summary of these goals will be forwarded to the Trainee's Hospital Supervisor for PFET Year 2, prior to the commencement of the Training Term.

## 5.11 Hospital post evaluation

5.11.1 Towards the end of each Training Term, Trainees must complete the AANZHPBA PFET Trainee Hospital Post Evaluation Form.

5.11.2 The Trainee Hospital Post Evaluation Form must be submitted to the AANZHPBA Executive Officer within further (14) days of the end of the 12-month training Term, in accordance with section 6.8.7.

## 6. Assessment

### 6.1 Formative Assessment

6.1.1 Formative assessments aim to identify areas of good performance and areas of performance that require improvement to achieve competency. Formative assessments also provide opportunities to improve performance.

6.1.2 Formative assessments within the AANZHPBA PFET Program consist of:

- a. Procedural Based Assessments (PBAs)
- b. Non-Procedural Assessments (NPAs)
- c. Mid-Term Assessments

6.1.3 Additional assessments may be required as part of a Performance Management Plan.

### 6.2 Summative Assessment

6.2.1 Summative assessments within the AANZHPBA PFET Program consist of:

- a. End of Term Assessments
- b. Examination

6.2.2 The Summative Assessments aim to determine whether a trainee has demonstrated satisfactory performance in the RACS competencies to permit accreditation of each Term of Training and successful completion of the AANZHPBA PFET Program.

### 6.3 Procedural Based Assessments (PBAs)

6.3.1 PBAs are a method of assessing technical competence in performing surgical procedures (or components thereof).

6.3.2 PBAs are formative and provide feedback to the trainee to enable improvement in surgical technique and intra-operative decision making.

6.3.3 Regular PBAs should be conducted throughout each Training Term with the Supervisor and other HPB Surgeons on the Unit. Selected procedures should be HPB Surgical procedures of complexity appropriate to the Trainee's point of time along the 2-year Training Program.

6.3.4 In the event of multiple unsatisfactory PBAs, Trainees should be counselled and given an opportunity to improve in the relevant skills before being reassessed. This process may be repeated until significant improvement is demonstrated.

6.3.5 At a minimum, Trainees are required to successfully complete the **two (2) mandatory PBAs during each 12-month Term** set by the Training Committee.

6.3.6 A record of mandatory PBAs completed within the first six (6) months of the Term must be submitted to the Executive Officer by whichever is earlier:

- a. within fourteen (14) days of the Mid-Term date
- b. at least fourteen (14) days prior to the Mid-Term Interview

6.3.7 Mandatory PBAs completed within the second six (6) months of the Term must be submitted to the Executive Officer within fourteen (14) days of the end of the 12-month training Term.

6.3.8 Trainees must also retain a record of all completed PBAs in their Portfolio of Training.

#### 6.4 Non-Procedural Assessments (NPAs)

6.4.1 NPAs are a method of assessing competence in clinical management of surgical patients, encompassing knowledge, judgement and decision making.

6.4.2 NPAs are formative and provide feedback to the Trainee to enable improvement in clinical skills.

6.4.3 Regular NPAs should be conducted throughout each Training Term with the Supervisor and other HPB Surgeons on the Unit. At a minimum, it is expected two (2) NPAs would be completed in each 6 month training period.

6.4.4 NPAs may be conducted either informally (during clinical meetings, on ward rounds) or in a more structured and formal manner.

6.4.5 In the event of multiple unsatisfactory NPAs, Trainees should be counselled and given an opportunity to improve in the relevant areas of knowledge and clinical decision making before being reassessed. This process may be repeated until significant improvement is demonstrated.

6.4.6 Specific documentation is not required to record performance on NPAs conducted throughout the term, but should be incorporated in the Mid-Term and End of Term Assessments.

#### 6.5 Conducting Assessments

6.5.1 All Formative and the End of Term Summative Assessments of Trainees are conducted by the Supervisor, with the input of other consultants on the Unit who have directly observed the Trainee.

6.5.2 The Supervisor may also seek input from other persons who had contact with the trainee (eg nurses, allied health, administrative staff, junior medical staff)

6.5.3 If the Supervisor is due to be on leave during the time of Mid-term or End of Term assessment, it is the responsibility of the Trainee to make arrangements to complete the assessment form with their Supervisor, at an earlier stage.

6.5.4 Assessments are best undertaken at a face-to-face meeting to discuss the performance of the Trainee, and to reach consensus on the assessment of each competency listed on the assessment form. Although the assessment form may be completed by the Supervisor in the absence of the Trainee, the Supervisor must subsequently meet with the Trainee to discuss the assessment.

6.5.5 Any deficiencies should be addressed and documented with a clear strategy to rectify these deficiencies.

6.5.6 Trainees are required to participate in the assessment process. Failure of a trainee to fully participate or adhere to the requirements of the assessment process in a timely manner, will result in non-accreditation of training, and commencement of Probationary Training.

## 6.6 Mid-Term Training Assessment

6.6.1 The Mid-Term Training Assessment is to be completed at the end of the first six (6) months of each 12-month term.

6.6.2 The Supervisor will seek the input of all consultants on the Unit who have directly observed the trainee to reach consensus on the assessment of the Trainee's performance.

6.6.3 A review of the Trainee's logbook, completed PBAs and NPAs and progress towards the research requirement, will be undertaken as part of this assessment

6.6.4 The Supervisor will meet with the trainee to discuss the assessment. It is the joint responsibility of the Trainee and Supervisor to ensure this occurs.

6.6.5 The AANZHPBA PFET In Training Assessment Form must be used to guide and document the feedback and assessment of the Trainee. The form can be found on the AANZHPBA website.

6.6.6 The In Training Assessment Form must be signed by both the Supervisor and Trainee and the Trainee must indicate whether they agree or disagree with the assessment.

6.6.7 It is the responsibility of the trainee to ensure the completed and signed In Training Assessment Form together with the Logbook, documentation of research activities, and record of all mandatory PBAs completed in the first six (6) months of the Term, are submitted to the AANZHPBA Executive Officer, by whichever is earlier:

- a. within fourteen (14) days of the Mid-Term date
- b. at least fourteen (14) days prior to the Mid-Term Interview

6.6.8 If the required completed and signed Formative Assessments are not submitted to the Executive Officer within the specified time frame, the period of training will be deemed unsatisfactory and will therefore be unaccredited. This may result in the Trainee's period of training being extended within the AANZHPBA PFET program as determined by the Training Committee.

6.6.9 When areas of performance are identified as "Borderline", "Not competent" or "Unsatisfactory", the Supervisor will discuss this with the Trainee and an appropriate remedial plan, which will include a Performance Management Plan, will be agreed to.

6.6.10 Unsatisfactory grades in any part of the Mid-Term Assessment will be reviewed by the AANZHPBA Training Committee.

## 6.7 Unsatisfactory Mid-Term Assessment

6.7.1 An unsatisfactory Mid-Term Assessment is defined as any of the following:

- a. An overall "Unsatisfactory" grade on the In Training Assessment Form
- b. Non submission of a complete and accurate Portfolio of Training including all documentation required for the Mid-Term Assessment within the specified time period, as outlined in Section 6.6.7.

6.7.2 If a Trainee has been assessed as achieving an overall "Unsatisfactory" grade on the Mid-Term Assessment:

6.7.2.1 A meeting between the Supervisor and the Trainee must be held where the reasons for the unsatisfactory performance are enunciated.

6.7.2.2 A written report is sent to the ANZHPA Training Committee for review.

6.7.3 In the event of an unsatisfactory Mid-Term Assessment the Training Committee will determine whether the Trainee is to be dismissed from the program

or may continue on the program on a period of Probationary Training with an agreed Performance Management Plan (in accordance with section 7). In this instance the period of probationary training will commence immediately.

6.7.4 The Trainee has the opportunity for an appeals process by applying in writing to the AANZHPBA Board via the Executive Officer.

## 6.8 End of Term Training Assessment

6.8.1 Just prior to completion of each 12-month Term of Training in HPB Surgery, the Trainee will participate in an End of Term Training Assessment.

6.8.2 The Supervisor will seek the input of all consultants on the Unit who have directly observed the trainee to reach consensus on the Summative Assessment of the Trainee's performance.

6.8.3 A review of the Trainee's logbook, all completed PBAs and NPAs, and progress towards the research requirement will be undertaken as part of this assessment.

6.8.4 The Supervisor will meet with the trainee to discuss the assessment. It is the joint responsibility of the Trainee and Supervisor to ensure this occurs.

6.8.5 The AANZHPBA PFET In Training Assessment Form must be used to guide and document the feedback and assessment of the Trainee. The form can be found on the AANZHPBA website.

6.8.6 The In Training Assessment Form must be signed by the Supervisor and Trainee and the Trainee must indicate whether they agree or disagree with the assessment.

6.8.7 It is the responsibility of the trainee to ensure the completed and signed In Training Assessment Form, together with the complete and accurate Logbook, documentation of any research activities, record of all mandatory PBAs (completed since the Mid-Term date), and the Trainee Hospital Post Evaluation Form are submitted to the AANZHPBA Executive Officer, within fourteen (14) days of the end of the 12-month training Term.

6.8.8 If the required completed and signed Formative and Summative Assessments and other documentation as outlined in these regulations are not submitted to the Executive Officer within the specified time frame the Term of training will be deemed unsatisfactory and will therefore be unaccredited. This may result in the Trainee's period of training being extended within the AANZHPBA PFET program as determined by the Training Committee and AANZHPBA Board.



6.8.9 The AANZHPBA Training Committee is responsible for reviewing all Assessment forms and other documentation related to a Trainee’s performance and completion of program requirements. Following review of these documents the Training Committee will determine if a Term is to be accredited. The Training committee may undertake further review prior to determination if required.

6.8.10 The Training Committee will determine a final outcome of either

- a. Satisfactory- in which case the Term will be accredited
- b. Unsatisfactory (refer Section 6.9)

6.8.11 The Training Committee will notify the Trainee of the outcome.

## 6.9 Unsatisfactory End of Term Assessment

6.9.1 An unsatisfactory End of Term Assessment is defined as any of the following:

- a. An overall “Unsatisfactory” grade on the End of Term In Training Assessment form.
- b. Non submission of a completed assessment form or any other documentation required for the End of Year Assessment within the specified time period as outlined in these regulations.
- c. Failure to complete all Term requirements as outlined in Section 5.1.1.

6.9.2 In the event of an Unsatisfactory End of Term Assessment a panel must be formed, and trainee interviewed, to make a final recommendation to the AANZHPBA Board if the Term should be either:

- a. Accredited
- b. Not accredited

6.9.3 The panel will consist of the Trainee, the Chair of the AANZHPBA Training Committee (or representative), the Supervisor and one additional member of the AANZHPBA Trainee Committee. The Trainee may invite an advocate who is a Fellow of the College but who must not be a practicing lawyer. The proceedings of the interview are to be duly documented. The interview will address the following:

- a. Details of unsatisfactory performance
- b. Response of the Trainee
- c. Recommendation of the Panel with regard to accreditation of the Term

6.9.4 The Trainee will be provided with a minimum ten (10) working days’ notice of the meeting and will be informed that the purpose of the meeting is to review Section 6.9.3 a to c.

6.9.5 The Trainee will be provided with an agenda and the opportunity to make a formal written submission to the panel. The submission must be received at least two (2) days prior to the meeting.

6.9.6 The Trainee, Panel, Training Committee and AANZHPBA Board will be provided with the minutes of the meeting. The Trainee may be asked if they believe the minutes are an accurate reflection of the meeting. Any changes they suggest can be attached to the minutes. No new information will be considered at this time by the Trainee for inclusion in the minutes.

6.9.7 The final decision regarding Accreditation of the term and any further action will be determined by the AANZHPBA Board in accordance with AANZHPBA PFET Program Training Regulations and Policies.

6.9.8 In the event the term is not accredited, the Training Committee will determine whether the Trainee is to be dismissed from the program or may continue on the program on a period of Probationary Training with an agreed Performance Management Plan (in accordance with Section 7). In this instance the period of Probationary Training will commence immediately, and the trainee will be required to undertake an additional (3<sup>rd</sup>) Term of Training.

6.9.9 The Trainee has the opportunity for an appeals process by applying in writing to the AANZHPBA Board via the Executive Officer.

## 6.10 Examination

6.10.1 A formal Examination is currently undertaken towards the end of the second year of fellowship training.

6.10.2 Trainees must familiarise themselves with the AANZHPBA PFET Examination Policy and adhere to the requirements outlined in the policy.

6.10.3 The Examination is based on the Curriculum.

6.10.4 The format of the Examination consists of two sections. Section 1 will be 15 short answer questions to be completed in 2 ½ hours. Section 2 will be two 30-minute VIVAS. The VIVAS will involve clinical scenarios and imaging relevant to HPB practice.

6.10.5 The date for the Examination will be advised early but is usually held in November.

6.10.6 The Examination may be conducted in person within Australia or Aotearoa New Zealand or online as determined by the AANZHPBA Examination Committee. It

is usually held in person in Melbourne. Trainees are responsible for their own travel and accommodation costs.

6.10.7 It is expected Trainees in posts outside Australia and Aotearoa New Zealand will return to sit the examination in person. In the event of extenuating circumstances, the Training Committee may allow Trainees to sit their Examination under supervision at the international hospital in which they are placed. Requests must be submitted to the Executive Officer a minimum of 3 months prior to the Examination. Requests outside of this time frame will only be considered under exceptional circumstances.

6.10.8 The administration (eg change from in person to online) and/or format of the Examination (eg. written examination only) may be altered by the Training Committee. when necessary, in the event of extenuating circumstances. Candidates will be notified of any changes as soon as is reasonably practical and provided with options depending on the nature of the change.

6.10.9 Achievement of an overall pass in the Examination is a mandatory requirement to successfully complete the AANZHPBA PFET program

6.10.10 Trainees who are unsuccessful at their first attempt at the Examination in their 2<sup>nd</sup> PFET year will receive feedback and have the opportunity to re-sit the exam the following year.

6.10.11 Trainees who are unsuccessful in the Examination have the opportunity for an appeals process by applying in writing to the AANZHPBA Board via the Executive Officer.

6.10.12 A maximum of two (2) attempts at passing the Examination is allowed. Trainees who do not pass the Examination on a second attempt will not graduate from the AANZHPBA PFET program and will not be permitted to undergo any further training Terms or reapply for the AANZHPBA PFET program in the future.

6.10.13 Trainees must sit the examination in the 2<sup>nd</sup> PFET year. In the event a Trainee does not sit the Examination in the second PFET year, the Trainee will be allowed one (1) further opportunity to sit the examination. This must occur the following year. In the event the Trainee is unsuccessful, the Training Committee may at its discretion allow a second attempt the year after, however this will only be granted in exceptional circumstances.

## 7. Probationary Training and Performance Management

## 7.1 Probationary Training

7.1.1 A period of Probationary Training is required where:

- a. A trainee records an overall “Unsatisfactory” grade at the Mid-Term Training Assessment.
- b. A trainee fails to submit an accurate and complete Portfolio of Training within the specified time frame ahead of the Mid-Term Interview.
- c. At End of Term Assessment, a Term has been deemed not accredited, but the Trainee has been permitted to remain on the training program and undertake an additional Term of Training.
- d. A trainee fails to fully participate or adhere to the requirements of the assessment process in a timely manner.

7.1.2 Probationary periods are **six (6)** months in duration and automatically commence from the date the Trainee receives notification.

7.1.3 During Probationary Training, the Trainee is required to participate in a Performance Management and Review process as outlined in Section 7.2.

7.1.4 Only one (1) period of Probationary Training will be permitted during the AANZHPBA PFET program. Where a period of probationary training is required in accordance with the Regulations, and the Trainee has already completed a period of Probationary Training, the Trainee will be dismissed from the training program.

## 7.2 Performance Management and Review Process

7.2.1. All Trainee’s placed on Probationary Training are required to participate in a Performance Management and Review Process for the duration of the probationary period.

7.2.2 The Performance Management and Review process requires the Trainee to participate in a structured and tailored Performance Management Plan including both Formative and Summative assessments.

7.2.3 The Performance Management Plan and Formative and Summative assessments will be tailored to address the particular areas of performance requiring improvement. The process should allow the Trainee to implement strategies to improve performance, to monitor progress and to identify if the Trainee has achieved competency at the end of the probationary period.

7.2.4 Within **ten (10) days** of the commencement of the probationary period, the Supervisor and Trainee must discuss issues identified with the Trainee’s performance

and develop and agree on a Performance Management Plan including Summative and Formative Assessments.

7.2.5 A formal 360° assessment is to be completed by a minimum of four (4) team members who have worked closely with the Trainee. These should be selected from a variety of positions (eg Unit consultant, Unit registrar, Theatre Charge nurse, Ward charge nurse) and agreed on by both the Trainee and the Supervisor.

7.2.6 The Supervisor may also seek advice from other members of the Unit in developing an appropriate Performance Management Plan for a Trainee.

7.2.7 The Performance Management Plan must be submitted to the AANZHPBA Executive Officer by the Trainee within fourteen (14) days of the commencement of the probationary period.

7.2.8 The Supervisor must meet with the trainee and conduct a Formative Assessment monthly during the probationary period. The AANZHPBA PFET Performance Management Review Form should be used to document the assessment and must be submitted to the Training Committee within five (5) days.

7.2.9 In the final month of the probationary period a 360° assessment is to be completed by a minimum of four (4) team members who have worked closely with the Trainee. These should be selected from a variety of positions (eg Unit consultant, Unit registrar, Theatre Charge nurse, Ward charge nurse) and agreed on by both the Trainee and the Supervisor.

7.2.10 The Summative Assessment for the probationary period may be conducted at a time within the final three (3) weeks of the probationary period to facilitate timely consensus to the assessment. The AANZHPBA PFET Performance Management Review Form should be used to document the assessment and must be submitted to the Training Committee within fourteen (14) days of the end of the probationary period.

7.2.11 Trainees will be required to satisfactorily meet the requirements of Probationary Training, to have the probationary period accredited. Trainees who do not satisfactorily complete the period of Probationary Training will be dismissed from the AANZHPBA PFET Program.

7.2.12 The Trainee has the opportunity for an appeals process by applying in writing to the AANZHPBA Board via the Executive Officer.

## 8. Appeals

## 8.1 Appeals process

8.1.1 Any person adversely affected by a decision, who has submitted a written grievance and is dissatisfied with the outcome of the grievance process must refer to the AANZHPBA Appeals Process Policy. The appeals policy can be found on the AANZHPBA website.

## 9. Program completion

### 9.1 Certification

9.1.1 At completion of the programme, the AANZHPBA Training Committee will review the training, final assessment, and Examination result.

9.1.2 Certification will be granted once:

- a. All mandatory criteria have been met as outlined in The AANZHPBA PFET Program Training Regulations
- b. A recommendation for approval of certification has been made following review of all documentation by the AANZHPBA Training Committee.
- c. Approval for certification has been ratified by the AANZHPBA Board.

9.1.3 A Certificate of Completion of Training will be presented at a ceremony the following year.

### 9.2 Exit interview

9.2.1 Following completion of the AANZHPBA PFET program, Trainees will be requested to participate in an Exit Interview with a member(s) of the Training Committee. The Exit Interview is generally conducted via videoconference.

9.2.2 The purpose of the Exit Interview is to obtain feedback on the overall training experience, to continuously improve the program.

## 10. Recognition of prior learning

### 10.1 Training outside the AANZHPBA program

10.1.1 No Recognition of Prior Learning (RPL) will be granted for training in HPB posts outside the AANZHPBA Fellowship Program, even if those posts are AANZHPBA PFET accredited.

## 10.2 Rural PFET program

10.2.1 The program for Training in HPB Surgery as part of the Rural PFET program is specifically designed to achieve competence in HPB Surgery at a level suitable for practice in non-Metropolitan areas. The HPB Specialty Training Term is not equivalent to a term of training within the AANZHPBA Fellowship Program.

10.2.2 Training in HPB Surgery as part of the Rural PFET program is not a pathway for entry into the AANZHPBA Fellowship program. Training time spent within the RPFET program will not count towards CV scoring, should a candidate later apply for the AANZHPBA PFET program. No RPL will be granted for HPB Specialty Training within the RPFET Program should a trainee successfully apply for entry into the AANZHPBA Fellowship Program.

## 11. Associated documents

- Application for entry to the AANZHPBA PFET program
- AANZHPBA PFET Program Curriculum
- AANZHPBA PFET Research Requirement Policy
- AANZHPBA PFET Application for Approval of Research Project
- AANZHPBA PFET Application for Recognition of Completion of Research Requirement
- AANZHPBA PFET In Training Assessment Form
- AANZHPBA PFET Year 1 to 2 Progression Form
- AANZHPBA PFET Performance Management Plan
- AANZHPBA PFET Performance Management Review Form
- AANZHPBA PFET Application for Interruption of Training
- AANZHPBA PFET Trainee Hospital Post Evaluation Form
- AANZHPBA Appeals Policy

## 12. Contacts

### 12.1 AANZHPBA – Training Committee

#### **AANZHPBA Executive Officer**

Address: 24 King William St  
Kent Town  
SA 5067



Contacts: **Renee Mackenzie**  
Tel: +61 8 8239 0086  
Email: [info@aanzhpba.com](mailto:info@aanzhpba.com)

Website: [www.aanzhpba.com](http://www.aanzhpba.com)