



## CRITERIA FOR ELECTION TO FELLOWSHIP OF AAHMS

Persons considered for election to Fellowship of the Australian Academy of Health and Medical Sciences:

- will have rendered, and will continue to render, conspicuous service to medical and health science.
- will be recognised by their peers for excellence in an aspect of health and medical research in Australia.
- will demonstrate ongoing commitment to research to improve health care through practice and/or leadership.

**The primary criterion for Fellowship is contribution to health through health and medical research.** This contribution can be assessed in different ways, according to the experience of the candidate:

- 1) For clinical candidates, there should be an actual or a clear potential contribution to an aspect of health practice from the research, i.e. a change in health policy or clinical practice, a drug, device or test developed or in clinical trial, a significant clarification of the pathophysiology of a human disease.
  - a. Candidates with a substantial clinical workload (e.g. clinicians in full time public hospital practice) should have this taken into consideration, when being compared with candidates in academic positions with less clinical responsibilities. (Clinical workload can influence the quantum of research contribution for Fellowship, but not the expected impact.)
- 2) For non-clinical candidates for Fellowship, excellence in their primary discipline is important, in addition to an actual or clear potential contribution to an aspect of health from the research as expected for clinical candidates, i.e. a change in health policy or clinical practice, a drug, device or test developed or in clinical trial, a significant clarification of the pathophysiology of a human disease.
- 3) For candidates where leadership is a ground for consideration, the leadership should be leadership of research. Leadership in clinical service, and/or in administration of an academic department, themselves do not warrant consideration: there must be a research mentorship component and, if this is the sole ground for consideration, it must be sustained, impactful, and a substantial part of the work load of the candidate.
- 4) For industry candidates where contribution to health is through leadership in industry, there should be a clear connection between the work of the candidate and research or development leading to a demonstrable change in health policy or clinical practice, a drug, device or test developed or in clinical trial, a significant clarification of the pathophysiology of a human disease.
- 5) For overseas candidates there must, in addition to the above criteria, be a substantial contribution to health and medical research in Australia through current or immediate past collaborative work.

While excellence of contribution to health and medical research is the primary criterion for election, committees are encouraged to consider the diversity of the Fellowship across age, gender, geographical location, and professional discipline. Younger candidates should be assessed against the achievements at a comparable age of older candidates, and assessment of their contribution should take account of opportunity and career interruptions.

Fellows of the Academy have skills and resources to contribute to the Academy's tasks of assessing current knowledge, conducting studies, and considering policy issues. Those nominated for Fellowship, in accepting nomination, commit to active participation in the Academy.

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