

Accreditation Report: The Education and Training Programs of the Royal Australasian College of Surgeons

Specialist Education Accreditation Committee

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Acknowledgement of Country

The Australian Medical Council (AMC) acknowledges Aboriginal, Torres Strait Islander Peoples as the original Australians, and Māori as the original Peoples of Aotearoa New Zealand.

We acknowledge the Traditional Custodians of these lands and pay respects to Elders past and present and acknowledge the ongoing contributions of Indigenous Peoples to all communities. We acknowledge government policies and practices impact on the health and wellbeing of Indigenous Peoples and commit to working together to support healing and positive health outcomes.

Through its accreditation and assessment processes for the medical profession, the AMC is committed to improving equity and outcomes for the Aboriginal, Torres Strait Islander Peoples of Australia, and the Māori Peoples of Aotearoa New Zealand.

1. Introduction

The process for accreditation extension submission

The Australian Medical Council (AMC) document, *Procedures for Assessment and Accreditation of Specialist Medical Programs by the Australian Medical Council 2023*, describes AMC requirements for accrediting specialist programs and their education providers.

Depending on the outcome of an assessment visit, the AMC can consider requests for extension of accreditation via an accreditation extension submission. In submitting an accreditation extension submission, the education provider is expected to provide evidence it continues to meet the accreditation standards and has maintained its standard of education and of resources.

Accreditation extension submissions require self-reflection, analysis of performance against the accreditation standards, and an outline of the challenges facing the college over the period of the possible extension of the accreditation. Without this assessment, the AMC does not have the evidence to determine if the college will meet the standards for the next period.

If, on the basis of the submission, the AMC's Specialist Education Accreditation Committee decides the education provider and the program of study continue to satisfy the accreditation standards it may recommend to the AMC Directors to extend the accreditation of the education provider and its program.

The extension of accreditation is usually for a period of three or four years, taking education providers to the full period of accreditation of ten years granted by the AMC between reaccreditation assessments. Following this extension, the provider and its programs undergo a reaccreditation assessment.

The AMC and the Medical Council of New Zealand work collaboratively to streamline the assessment of education providers that provide specialist medical training in Australia and New Zealand, and both have endorsed the accreditation standards. The two Councils have agreed to a range of measures to align the accreditation processes, resulting in joint accreditation assessments, joint progress and comprehensive reporting, and aligned accreditation periods. The AMC will continue to lead the accreditation process.

2. Decision on accreditation

Under the Health Practitioner Regulation National Law, the AMC can accredit a program of study if it is reasonably satisfied that:

- (a) the program of study, and the education provider that provides the program of study, meet the accreditation standard; or
- (b) the program of study, and the education provider that provides the program of study, substantially meet the accreditation standard and the imposition of conditions will ensure the program meets the standard within a reasonable time.

Having made a decision, the AMC reports its accreditation decision to the Medical Board of Australia to enable the Board to make a decision on the approval of the program of study for registration purposes.

Based on the accreditation extension submission provided, the AMC finds that the Royal Australasian College of Surgeons (the College) and its programs substantially meet the accreditation standards.

At their 12 September 2024 meeting the AMC Directors resolved:

- i. to extend the accreditation of the Royal Australasian College of Surgeons' training and education programs, in the specialty of Surgery and the following fields of specialty practice, by three years, until 31 October 2027, subject to satisfying enhanced AMC monitoring requirements.

Fields of specialty practice covered by this decision:

- cardio-thoracic surgery
- general surgery
- neurosurgery
- orthopaedic surgery
- otolaryngology - head and neck surgery
- paediatric surgery
- plastic surgery
- urology
- vascular surgery

Enhanced monitoring requirements:

- An annual monitoring submission that is supplemented with targeted stakeholder feedback to be considered alongside the submission.
- Six-monthly meetings held between the College and the AMC.

3. The Royal Australasian College of Surgeons

3.1 Accreditation history

The College's training programs were first accredited by the AMC in 2002.

An overview of the College's accreditation and monitoring history is provided below:

| Year/Assessment Type | Outcome |
|--|---|
| 2002: Full assessment | Accreditation granted until 31 July 2008. |
| 2007: Assessment Visit | Accreditation extended until 31 December 2011. |
| 2008: Follow-up assessment | Accreditation extended until 31 December 2011. |
| 2011: Accreditation extension submission | Accreditation extended until 31 December 2017. |
| 2017: Reaccreditation assessment | Accreditation granted until 31 March 2022. |
| 2021: Follow-up assessment | Accreditation granted for two years until 31 March 2024. 20 conditions were set on accreditation. |
| 2023: Accreditation extension submission | Accreditation extended by six months to 31 October 2024. |

A copy of the 2021 and 2023 Royal Australasian College of Surgeons' accreditation reports can be found on the AMC website [here](#).

3.2 Royal Australasian College of Surgeons' Accreditation Extension Submission

In its 2024 accreditation extension submission the College was asked to provide a report against the standards and remaining conditions.

The following was to be addressed for each standard:

1. Significant developments undertaken or planned.

- a short summary of major developments and the continuing evolution of the College's programs
- Any matters that may affect the accreditation status of the programs, such as a change to capacity to meet the accreditation standards, or any change that may meet the definition of a major change to the program.

2. Activity against AMC conditions

The College was asked to report on progress towards satisfying the 20 remaining accreditation conditions.

4. AMC findings

4.1 Summary of findings against the standards

The findings against the nine accreditation standards are summarised in the table below.

| Standard | Finding in 2021 Follow-up visit (Including any requirements substantially met or not met) | Finding in 2024 (Including any requirements substantially met or not met) |
|--|--|---|
| 1. Context of Education and Training | Substantially Met (Standard 1.2, 1.6, 1.7 Substantially Met) | Substantially Met (Standard 1.2 Substantially Met) |
| 2. Outcomes of specialist training and education | Substantially Met (Standard 2.1, 2.2, 2.3 Substantially Met) | Substantially Met (Standard 2.1, 2.2, 2.3 Substantially Met) |
| 3. The specialist medical training and education framework | Substantially Met (Standard 3.2, 3.4 Substantially Met) | Substantially Met (Standard 3.2 and 3.4 Substantially Met) (Condition moved from Standard 4 to Standard 3) |
| 4. Teaching and learning methods | Substantially Met (Standard 4.1 Substantially Met) | Met |
| 5. Assessment of learning | Met | Substantially Met (Standard 5.1 and 5.2 Substantially Met) New Condition added 2024 (5.1.1 and 5.2.2) |
| 6. Monitoring and evaluation | Substantially Met (Standard 6.1, 6.2, 6.3 Not Met) | Substantially Met (Standard 6.1, 6.2, 6.3 Substantially Met) New Conditions added 2024 (6.1, 6.1.1 and 6.2) |
| 7. Issues relating to trainees | Substantially Met (Standard 7.1 and 7.3 Substantially Met) | Met |
| 8. Implementing the training program – delivery of educational resources | Substantially Met (Standard 8.2 Substantially Met. 8.1 Not Met) | Substantially Met (Standard 8.1 Substantially Met) |
| 9. Assessment of specialist international medical graduates | Substantially Met (Standard 9.2 Substantially Met) | Substantially Met (Standard 9.1 and 9.2 Substantially Met) New Condition added 2024 (9.1.1) |

4.2 Detailed findings against the standards

Providers must satisfy conditions on accreditation in order to meet the relevant accreditation standard.

Progressing *Indicates satisfactory progress against the condition, with further reporting necessary.*

Satisfied *The College has satisfied all requirements and can cease reporting against the condition. Condition is marked as closed.*

Standard 1: The context of training and education

Areas covered by this standard: governance of the college; program management; reconsideration, review and appeals processes; educational expertise and exchange; educational resources; interaction with the health sector; continuous renewal.

| | | |
|---------------------------------|-------------------------|-------------------------|
| Summary of accreditation status | 2023: Substantially Met | 2024: Substantially Met |
|---------------------------------|-------------------------|-------------------------|

Activity against Conditions from 2021 and 2023 accreditation reports

| Condition: | Year to be met: | 2024 Status: |
|---|-----------------|--------------|
| 1 Demonstrate within the College governance structure that accountability is shared by RACS Council, the Education Board, Board of Surgical Education and Training, and Specialty Training Boards to enable each of the 13 training programs to meet AMC standards and conditions. Evidence of alignment and robust reporting mechanisms, between the College and specialty training boards in developing education and training policies consistently, is needed. (Standard 1.2) | 2022 | Progressing |

Standard 2: The outcomes of specialist training and education

Areas covered by this standard: educational purpose of the educational provider; and, program and graduate outcomes

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|---------------------------------|-------------------------|-------------------------|
| Summary of accreditation status | 2023: Substantially Met | 2024: Substantially Met |
|---------------------------------|-------------------------|-------------------------|

Activity against Conditions from 2021 accreditation report

| Condition: | Year to be met: | 2024 Status: |
|--|-----------------|--------------|
| 3 Broaden consultation with consumer, community, surgical and non-surgical medical, nursing and allied health stakeholders about the goals and objectives of surgical training, including a broad approach to external representation across the College. (Standard 2.1) | 2023 | Progressing |
| 4 Clearly and uniformly articulate program and graduate outcomes (for all specialties) which are publicly available, reflecting community needs and mapped to the ten RACS competencies. (Standard 2.2 and 2.3) | 2022 | Progressing |

Standard 3: The specialist medical training and education framework

Areas covered by this standard: curriculum framework; curriculum content; continuum of training, education and practice; and curriculum structure

| | | |
|---------------------------------|-------------------------|-------------------------|
| Summary of accreditation status | 2023: Substantially Met | 2024: Substantially Met |
|---------------------------------|-------------------------|-------------------------|

Activity against Conditions from 2021 accreditation report

| Condition: | Year to be met: | 2024 Status: |
|--|-----------------|--|
| 8 Include the specific health needs of Aboriginal and Torres Strait Islanders and/or Māori, along with cultural competence training, in the curricula of all specialty training programs. (Standard 3.2.10) | 2023 | Progressing |
| 10 For all specialty training programs develop curriculum maps to show the alignment of learning activities and compulsory requirements with the outcomes at each stage of training and with the graduate outcomes. This could be undertaken in conjunction with the curricular reviews that are currently planned or underway. (Standard 3.4.1) | 2023 | Progressing Condition moved from Standard 4 to Standard 3 in 2024 |

Standard 4: Teaching and learning approach and methods

Areas covered by this standard: teaching and learning approach; teaching and learning methods

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|---------------------------------|-------------------------|-----------|
| Summary of accreditation status | 2023: Substantially Met | 2024: Met |
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Activity against Conditions from 2021 accreditation report

Nil Conditions

Standard 5: Assessment of learning

Areas covered by this standard: assessment approach; assessment methods; performance feedback; assessment quality

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|---------------------------------|-----------|-------------------------|
| Summary of accreditation status | 2023: Met | 2024: Substantially Met |
|---------------------------------|-----------|-------------------------|

Activity against Conditions from 2021 accreditation report

| Condition: | Year to be met: | 2024 Status: |
|--|-----------------|-----------------------------|
| 22 Document how assessments are blueprinted to curriculum outcomes, by stage of training, for all RACS training programs. (Standard 5.1.1 and 5.2.2) | 2026 | New Condition added in 2024 |

Standard 6: Monitoring and evaluation

Areas covered by this standard: program monitoring; evaluation; feedback, reporting and action

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|---------------------------------|-------------------------|-------------------------|
| Summary of accreditation status | 2023: Substantially Met | 2024: Substantially Met |
|---------------------------------|-------------------------|-------------------------|

Activity against Conditions from 2021 accreditation report

| Condition: | Year to be met: | 2024 Status: |
|---|-----------------|-----------------------------|
| 12 Establish methods to seek confidential feedback from individual supervisors of training, across the surgical specialties, to contribute to the monitoring and development of the training program. (Standard 6.1.2) | 2022 | Progressing |
| 13 Develop and implement completely confidential and safe processes for obtaining—and acting on—regular, systematic feedback from trainees on the quality of supervision, training and clinical experience. (Standard 6.1.3 and 8.1.3) | 2022 | Progressing |
| 14 Develop formal consultation methods and regularly collect feedback on the surgical training program from non-surgical health professionals, healthcare administrators and consumer and community representatives. (Standard 6.2.3) | 2022 | Progressing |
| 15 Report the results of monitoring and evaluation through governance and administrative structures, and to external stakeholders. It will be important to ensure that results are made available to all those who provided feedback. (Standard 6.3) | 2023 | Progressing |
| 21 Demonstrate systematic processes for monitoring and evaluation across all specialties of the Reconciliation Action Plan, the Building Respect, Improving Patient Safety (BRIPS) action plan, the diversity and inclusion plan, and the Rural Health Equity Strategic Action Plan. (Standard 6.1 and 6.2) | 2025 | New Condition added in 2024 |

Standard 7: Issues relating to trainees

Areas covered by this standard: admission policy and selection; trainee participation in education provider governance; communication with trainees; trainee wellbeing; resolution of training problems and disputes

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|---------------------------------|-------------------------|-----------|
| Summary of accreditation status | 2023: Substantially Met | 2024: Met |
|---------------------------------|-------------------------|-----------|

Activity against Conditions from 2021 accreditation report

Nil Conditions

Standard 8: Implementing the training program – delivery of education and accreditation of training sites

Areas covered by this standard: supervisory and educational roles and training sites and posts

| Summary of accreditation status | 2023: Substantially Met | 2024: Substantially Met |
|---------------------------------|-------------------------|-------------------------|
|---------------------------------|-------------------------|-------------------------|

Activity against Conditions from 2021 accreditation report

| Condition: | Year to be met: | 2024 Status: |
|--|-----------------|--------------|
| 19 In conjunction with the Specialty Training Boards, finalise the supervision standards and the process for reviewing supervisor performance and implement across all specialty training programs. (Standard 8.1) | 2023 | Progressing |

Standard 9: Assessment of specialist international medical graduates

Areas covered by this standard: assessment framework; assessment methods; assessment decision; communication with specialist international medical graduate applicants

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|---------------------------------|-------------------------|-------------------------|
| Summary of accreditation status | 2023: Substantially Met | 2024: Substantially Met |
|---------------------------------|-------------------------|-------------------------|

Activity against Conditions from 2021 accreditation report

| Condition: | Year to be met: | 2024 Status: |
|--|-----------------|-----------------------------|
| 20 Develop and implement alternative external assessment processes such as workplace-based assessments to replace the Fellowship Examination for selected specialist international medical graduates. (Standard 9.2.1) | 2023 | Progressing |
| 23 In relation to RACS specialist international medical graduate assessment processes develop and implement quality assurance processes within the RACS monitoring and evaluation framework to ensure ongoing all-specialty compliance with Medical Board of Australia and Medical Council of New Zealand standards. (Standards 9.1.1 and 6.1.1) | 2025 | New Condition added in 2024 |

