

Purpose and format of training setting accreditation reports

Guidance for specialist medical colleges

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1 The purpose of an accreditation report

In the context of specialist medical training, it is considered that:

- the **purpose of accreditation** is to ensure compliance with the minimum acceptable standards required to be met by a training setting (training site, post, practice or network) to enable trainees to obtain the knowledge, skills and professional attributes necessary to practise the relevant specialty in Australia.
- the minimum acceptable standards are those that are **documented and made publicly available** by the college that must be met by training settings to be accredited.
- the **accreditation process** is a systematic evaluation of a training setting's compliance with each of the criteria that comprise the standards to inform a decision as to whether accreditation should be granted and on what conditions.

It is therefore considered that:

The **purpose of an accreditation report** is to:

- (a) **document the evaluation** made regarding the training setting's compliance with each of the accreditation criteria.
- (b) **inform** the legal entity responsible for the training setting of the college's decision as to whether accreditation is granted, for what period and on what conditions.
- (c) **provide reasons** for the college's decision, based on its evaluation against the accreditation criteria.
- (d) **provide relevant dates** upon which decisions take effect (for example, the date the from which the reaccreditation decision applies or the date from which accreditation is withdrawn or suspended).
- (e) provide details of how a setting may **seek review** of a decision.

It is important to note that the process of accreditation and the subsequent training setting accreditation reports consider whether a training setting is accredited to deliver the college's program of study and do not reflect an assessment of the overall performance of the training setting in delivering patient care.

In addition to the above, the accreditation report is the best evidence to demonstrate that a college accreditation process was thorough, structured, appropriate and fair. If an accreditation decision is challenged, a structured accreditation report which clearly sets out the outcome of an assessment against the documented criteria will be an important artefact to defend the college's decision and approach.

2 The format of an accreditation report

The section below outlines the following:

- 'core components' of an accreditation report – the information that **all** accreditation reports should contain
- 'optional components' of an accreditation report – additional information that colleges/accreditation teams might also want to include in an accreditation report.

These principles apply whether the accreditation assessment is considering a training site, post, practice or network.

1. Core components of an accreditation report

Accreditation reports **must**:

- (a) identify and document for each criterion/requirement if it has been met or otherwise.
 - In accordance with the *Model Procedures for specialist medical college accreditation of training settings*, each criterion/requirement should be assessed as having been 'Met', 'Substantially met', or 'Not met'.
- (b) where a criterion/requirement has not been met, clearly document the reason for this assessment.
 - The report should include recommendations to support the training setting in understanding what it can do to improve and achieve an assessment rating of 'Met' in future.
- (c) provide an overall accreditation outcome that is based on the assessment of compliance against the criteria that comprise the standards and reasons for that decision.
 - In accordance with the *Model Procedures for specialist medical college accreditation of training settings*, the report should clearly identify if the training setting is 'Provisionally accredited', 'Accredited', 'Conditionally accredited' or 'Not accredited (refused or revoked)'.
- (d) clearly identify any conditions imposed on accreditation, including any associated reporting or monitoring requirements.
- (e) identify relevant dates (the period for which accreditation is granted; date of effect of decision, and dates by which conditions must be met etc.).

2. Optional components of an accreditation report

Accreditation reports **might optionally**:

- (a) provide commendations for exemplary practice or achievements.
- (b) make other recommendations for improvement where these are not specific conditions on accreditation.
- (c) record other information about the training setting such as the type of facility, clinical casemix, workforce and skills mix etc., where this is relevant to the training environment and accreditation standards.

When completing accreditation reports, consideration should be given to privacy and confidentiality for individuals, particularly if they have provided feedback in confidence.

3 Using the model accreditation report template

The Australian Medical Council has developed and made available a model accreditation report template. Colleges are not required to use this template and may use their own form of report noting the requirement of the core components of an accreditation report detailed above. Colleges that do wish to use the model report template can adjust and amend it to accommodate their own branding and add additional components as required.

If using the model accreditation report template, colleges that have college-specific requirements (CSRs) will need to include these within the report template. It is recommended that CSRs are added as a new line underneath the relevant criterion to which they relate and are assessed in the same way, as being either 'Met', 'Substantially met', or 'Not met'. See example below.

Domain 3 Educational and clinical training opportunities					
Standard / Criterion / Requirement		Assessment			Notes on findings ⁴
		MET	SUBSTANTIALLY MET	NOT MET	
3.1	Clear governance structures support the delivery of effective education and training.				
3.1.1	Trainees are provided with a clinical caseload and case-mix to achieve the training program outcomes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CSR 3.1.1.1	Trainees must have the opportunity to complete these specific procedures....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3.1.2	Trainees have the opportunity to engage in structured and unstructured learning activities to achieve the training program outcomes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3.1.3	Trainees are involved in clinical handovers during transitions of care.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3.1.4	Trainees are given experience working and learning in multi-disciplinary teams and/or settings.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Comments on overall assessment of standard		Conditions			
		Recommendations		Commendations	

Where CSRs are assessed, the *Summary of accreditation assessment* table at the beginning of the report will also need to be updated to include the CSRs in the total number of criteria/requirements assessed. See example below.

Summary of accreditation assessment (see Part 2 for further detail)

Note this section is optional and can be removed if not required.

Standards		Met	Substantially met	Not met
Domain 1 Trainee health and welfare				
1.1	Training takes place in a learning environment that supports trainee health and welfare.	#/10 ¹	#/10 ¹	#/10 ¹
Domain 2 Supervision, management and support structures				
2.1	Clear governance structures support the delivery of effective education and training.	/7	/7	/7
2.2	Trainees receive appropriate and effective supervision.	/5	/5	/5
2.3	Trainees are supported in delivering quality patient care, including culturally safe care.	/3	/3	/3
Domain 3 Educational and clinical training opportunities				
3.1	Trainees are provided with the appropriate depth, volume and variety of clinical and other learning experiences.	/4	/4	/4
3.2	Learning opportunities are transparent, equitable and appropriate for the level of training.	/3	/3	/3
Domain 4 Educational resources, facilities and equipment				
4.1	Trainees have access to appropriate educational resources and facilities.	/2	/2	/2
4.2	Trainees have access to appropriate clinical equipment.	/1	/1	/1

¹ Please note the number of criteria that have been 'Met', 'Substantially met' or 'Not met' as a value against the total number of criteria/requirements in this standard e.g. 8/10 Met.