Consultation feedback form

Australian Medical Council Limited

Draft model standards and procedures for specialist medical college accreditation of training settings

Thank you for providing feedback on the draft model standards and procedures for specialist medical college accreditation of training settings.

In this consultation, the AMC has included particular questions for colleges and health services as the primary users of the standards and procedures. However, the AMC welcomes feedback from all stakeholders, and stakeholders are invited to answer any of the questions as they see relevant.

To return your feedback, please email this form in MS Word format to accreditation@amc.org.au by close of business on 11 November 2024.

Consultation questions relating to **draft model standards**:
General feedback
Are the model standards easy to read and understand?
The model standards are mostly easy to read and understand. However, Royal College of Pathologists Australasia (RCPA) has found it challenging to meaningfully interpret the standards' references to 'clinical' and 'patient care' in the context of pathologists' laboratory setting. Further in this submission we have provided some feedback on to help address this without significantly altering the intent of the standards.
Are there any criteria in the model standards that would raise challenges for your organisation? **For colleges:** this would include any challenges in implementing the model standards. **For health services:** this would include any challenges in being assessed against the model standards, for example, in smaller settings, rural and regional settings, general practice and non-government settings.
The following model standards raise challenges for RCPA: **1.1.8 8 Trainees who have had a break in training are supported in their return to training** Should an RCPA Trainee take a break from training, they are required to secure an accredited training position and appropriate supervision prior to re-entering training. The College cannot guarantee that a Trainee will resume training at their original site, not least because the College plays no direct role in the recruitment/employment of Trainees. A candidate recommencing training after a break of more than two years may apply for previously accredited training time, and exam passes to be considered and counted at the point of Initial Registration on their return to training. College Policies guide such determinations to help ensure fairness, equity and patient safety. **Standards which refer to frontline patient care: 2.2.1, 2.3.1, 2.3.2, 2.3.3, 3.1.1, and 3.1.3.**

Standards which refer to frontline patient care are not relevant to RCPA trainees, since they are based in laboratories, and provide diagnostic information to the clinicians.

Should there be any additions to, or deletions from, the model standards?

RCPA recommends the following additions to the model standards:

1.1.6 and 1.1.7 Trainees' ability to access leave and flexible working arrangements in accordance with the College Training Program and related Policies, employment and/or appointment conditions.

2.2.1 There is effective clinical/appropriate educational supervision of trainees to support them to achieve the training program outcomes and to protect patient safety.

2.3.1 Trainees are supported in delivering quality direct or indirect patient care, including culturally safe care, to patients directly or indirectly, of diverse backgrounds.

2.3.2 Trainees are supported in developing specific knowledge and skills to deliver quality direct or indirect patient care, including culturally safe care to Aboriginal and/or Torres Strait Islander and Māori peoples.

2.3.3 Trainees have the opportunity to reflect on critical incidents and engage with local clinical/laboratory governance and quality improvement processes.

3.1.1 Trainees have access to a diverse clinical/appropriate caseload and case mix to achieve the training program outcomes.

3.1.3 Trainees are involved in clinical handovers during transitions of care. RCPA propose deletion of 'clinical handovers during transitions of care and replace with: 'handover of diagnostic follow up as relevant to the investigation of the patient's sample'.

Feedback regarding college-specific requirements

Criterion 2.1.6 enables recognition of accreditation of training settings/providers by other accreditation bodies e.g. health service quality and safety bodies.

For colleges: Would it be necessary to include specific requirements to assess this criterion, for example, requiring the training setting/provider to be accredited by an industry body/regulator such as NATA or a radiation safety authority?

For health services: What should be considered in developing college-specific requirements for this criterion?

Yes, it is necessary to include specific requirements to assess this criterion, since all RCPA accredited training sites in Australasia must first be accredited by National Association of Testing Authorities (NATA) and in New Zealand by International Accreditation New Zealand. Further, most Singapore and Hong Kong labs seek NATA accreditation in addition to HOKLAS, SAC and A2LA and Malaysia largely adheres to Standards Malaysia. Confirming accreditation of training settings is an existing part of the RCPA site accreditation process.

Criterion 2.2.1 provides for effective clinical supervision of trainees.

For colleges: Would it be necessary to include specific requirements to assess this criterion, for example, ratios for supervisors to trainees?

If yes, please explain why ratios are needed, how ratios would be determined and how such ratios align with outcomes based accreditation?

Please explain how would ratios accommodate:

- flexibility for training in regional, rural and remote settings
- situations where training settings have difficulty in recruiting supervisors despite best efforts
- remote supervision?

For health services: What should be considered in developing college-specific requirements for this criterion?

The RCPA's *Supervision of Training and Accreditation of Supervisors Policy 11/2002* states that the "College recommends that any one supervisor be responsible for no more than two trainees." This ratio has been determined to ensure that a supervisor has adequate time to focus on trainee development. This detail is also contained within the RCPA's Administrative Requirements Handbook. To ensure that candidates for RCPA qualifications are exposed to more than one style and philosophy of pathology practice, they are ordinarily limited to spending a maximum of four years training in one laboratory. As Trainees rotate to different training sites, they are trained under new supervisors. Full details are outlined in the *RCPA's Training Limitation Policy 15/2001*. Due to the hands-on nature of pathology training, remote supervision is not supported.

Criterion 3.1.1 provides for a clinical caseload and case mix to achieve the training program outcomes.

For colleges: Would it be necessary to include specific requirements to assess this criterion, for example, logbook requirements, theatre time?

For health services: What should be considered in developing college-specific requirements for this criterion?

The RCPA specifies the required number of cases and the mix in its curricula for trainees throughout their training. Note that 'caseload' here is not counted in terms of patients but refers to numbers and types of laboratory investigations. Meetings and portfolio requirements are not included when determining caseload.

When a new site applies for accreditation, the application form requires caseload details to be articulated. Once formally accredited, the site must submit an annual report and advise of any changes to the caseload. Significant changes to case load may require RCPA to carry out a site visit to determine if changes to existing accreditation are required.

Criterion 3.1.2 provides for trainees to engage in structured and unstructured learning activities to achieve the training program outcomes. **For colleges:** Would it be necessary to include specific requirements to assess this criterion, for example, a requirement for trainees to complete a research project, or a requirement that trainees have protected teaching/study time? Please explain your reasoning. **For health services:** What should be considered in developing college-specific requirements for this criterion?
Details of, and requirements for, structured and unstructured learning are captured in RCPA's curricular/trainee handbooks. A trainee's engagement in learning activities to achieve the training program outcomes is captured and evaluated through the portfolio requirement and supervisor reporting process. Following formal discussion with the nominated supervisor and other senior personnel as required, trainees submit a supervisor report, signed by all relevant parties and submitted to the College for review and processing. Trainees also submit annual training plans with their initial and annual registration forms. When RCPA conducts training site visits to confirm compliance, stakeholders are asked to confirm that the Training Plan is being followed, to enable and support the required structured and unstructured learning activities.
Criterion 4.2.1 provides for clinical or other equipment needed for trainees to achieve the training program outcomes. **For colleges:** Would it be necessary to include specific requirements to assess this criterion, such as a list of specialist equipment? **For health services:** What should be considered in developing college-specific requirements for this criterion?
This is not required. All pathology laboratories in Australia are NATA accredited, which includes assessment of the necessary clinical and other assessment. Laboratories which are not NATA accredited are accredited via their local authorities. In addition, during a site visit, RCPA takes part in a guided tour of the facility, which enables us to confirm that the required equipment to adequately support training is available and appropriate.
Are there any other college-specific requirements that are necessary in relation to other criteria and what should be considered in developing these?
N/A
Feedback regarding implementation
For colleges: What is a reasonable timeframe for adoption of the model standards by your college and why? What would assist your college to adopt the model standards in a more timely manner (for example, shared training, shared resources etc.)?

In line with all other major changes at the RCPA, 12 months' notice would be required to implement the new model standards as they would be considered a major change and need to be communicated to all stakeholders.
For health services: What is a reasonable timeframe for your organisation(s) to be ready for assessment against the model standards and why?
N/A
Other feedback
Do you have any additional comments regarding the model standards that are not covered above?
N/A

Consultation questions relating to **draft model procedures**:
General feedback
Are the model procedures easy to read and understand?
Yes
Are there any requirements in the model procedures that would raise challenges for your organisation?
No, other than a Site Accreditation Committee needing to be established and plans are in place to progress this.
Feedback regarding agreed terminology

For colleges: Are there any obstacles to your college implementing the common terminology for:

- assessment against the standards: met; substantially met; not met
- accreditation outcomes for new settings: provisionally accredited; not accredited – refused
- accreditation outcomes for existing settings: accredited; conditionally accredited; not accredited – revoked.

No, apart from qualifying the term "clinical" in several sections as pathology trainees do not have regular direct patient interactions. References to "handover" likewise do not apply in pathology contexts.

For colleges: In what timeframe could your college implement this terminology? What support may assist quick adoption?

In line with all other major changes at the RCPA, 12 months' notice would be required to implement the new model standards as they would be considered a major change and need to be communicated to all stakeholders.

Feedback regarding the risk matrix

Is the risk matrix appropriate for accreditation decision making?

The RCPA's position is that risk matrix is a useful guide to articulate any required recommendations for improvement with timelines in our Site Visit Report itself. Recommendations for improvement are an existing component of the RCPA's site visit procedure, and sites are required to provide responses to relevant recommendations by the required due dates. These are then reviewed and tabled with the College's Board of Education and Assessment, who govern Educational and Training activities at the college. The risk matrix can then be further applied to corrective action taken for the Accreditation Committee to ensure that any identified risks no longer exist or are lowered to an 'insignificant' level.

The risk matrix allows colleges to decide whether or not to impose a condition where the criteria are substantially met or not met but the overall risk assessment is low.

Is this appropriate or should there be a requirement for a condition to be imposed for any criterion assessed as 'substantially met' or 'not met'? Please explain your views.

The risk matrix indicates that steps to revoke accreditation should be taken when the overall risk assessment is extreme. Is this appropriate?

There are some circumstances that may require site accreditation to be immediately revoked, particularly when it is clear that remedial action would not be feasible within a reasonable time frame.

Depending on the circumstances, a site may be provided with the opportunity to address any shortcomings within a set timeframe before site accreditation is revoked (and to allow time for any current trainees at a given site to not be negatively impacted). In rare cases, the College may recommend that a site undergoes an independent investigation, for example in relation to workplace culture/bullying accusations. In such instances we would allow time to enable us to consider the results of such investigation before the College's final decision regarding site accreditation is made.

Other feedback
Do you have any additional comments regarding the model procedures that are not covered above?
No.

Organisational details and contact	
Organisation name/details:	Royal College of Pathologists of Australasia (RCPA)
Contact name:	[redacted]
Contact email:	

The AMC may publish submissions on its website in the interests of transparency and to support informed discussion among the community and stakeholders. Published submissions will include the names of the individuals and/or the organisations that made them, unless confidentiality is expressly requested, or you advise us that you do not want your submission published. We would not include the contact details for individuals.

We will not place on our website, or make available to the public, submissions that contain offensive or defamatory comments or which are outside the scope of the subject of the consultation.

Please advise if you **do not** agree to your feedback being published?

☐ **NO – I do not agree to my feedback being published.**