

Reaccreditation of Specialist Medical Education and Training, and Professional Development Programmes:

A Guide to Preparing a Reaccreditation Submission - for New Zealand Training Organisations

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The Medical Council of New Zealand acknowledges the assistance of the Australian Medical Council in preparing this Guide.

Preparing the submission

This guide sets out the information required for accredited New Zealand training organisations who are preparing for a Medical Council of New Zealand (Council) assessment for reaccreditation.

Specialist colleges or associations who are seeking recognition of a new vocational scope of practice and initial accreditation of a training and recertification programme need to consult the separate Standards and Guide for that process.

The standards against which New Zealand training organisations are assessed are very similar to the Australasian standards which have been endorsed by the Australian Medical Council (AMC), the Medical Board of Australia and the Council. The Council considers that specialists trained by organisations based exclusively in New Zealand should be required to meet essentially similar standards, in the interests of maintaining consistency between both countries and ensuring the delivery of high quality health care to the people of New Zealand.

The process of accreditation

Council staff (and primarily the Education Coordinator) manage the accreditation process. Their role includes managing the accreditation work programme, and implementing the Council policy and procedures and supporting Councils Education Committee (the Committee). The Education Coordinator will write to the training organisation wishing to be reaccredited well in advance of the accreditation assessment, requesting an accreditation submission and providing a draft timeline for the assessment.

The Council, with advice from the Committee, appoints the accreditation team to complete the assessment. The team undertakes a review of the training organisation's training programme and considers whether the training organisation has demonstrated that it is meeting or will meet the approved accreditation standards for specialist medical education and training. This will generally involve a meeting with office holders and possibly a site visit or visits. The accreditation standards can be found by clicking the link: [Standards for reaccreditation](#).

The accreditation team then prepares a report of their findings that will be considered by the Committee, which will make a recommendation to the Council on accreditation of the training organisation, the duration of this accreditation, and any conditions on this accreditation. Accreditation can be granted for a maximum period of 6 years plus a further four years if the fifth year report is approved. Accreditation for shorter periods is generally conditional on satisfying certain conditions. If these are not satisfied, this may lead to accreditation being declined.

The principal purpose of the accreditation is to ensure that the public receive high quality health care. However, Council is committed to accreditation as an important element of quality improvement for training organisations and undertaking this in a collegial manner as an extension of peer review. It is unlikely that any training organisation is operating without some challenges. The accreditation process is intended to promote recognition of those challenges and adoption of strategies to address them in an open and transparent manner, in the interests of training organisations, trainees and the public.

Format of this guide

The guide has been designed and formatted so that corresponds to the subject groupings within the accreditation standards:

- Context (Governance, Programme Management, Educational Expertise, Interaction with the Health Sector, Continuous Renewal);
- Outcomes (Institutional Purpose, Graduate Outcomes);

- Curriculum [Framework and Content, Teaching and Learning, Assessment (including assessment of overseas-trained practitioners) and Monitoring and Evaluation];
- Implementation (Trainees, Delivery of Educational Resources);
- Continuing Professional Development (CPD Programmes, Retraining, Remediation)

It is suggested that training organisations follow this guide when preparing their accreditation documentation. However, when there are issues outstanding from previous accreditation visits or interim reports, it is helpful for these to be specifically addressed before the main body of the document.

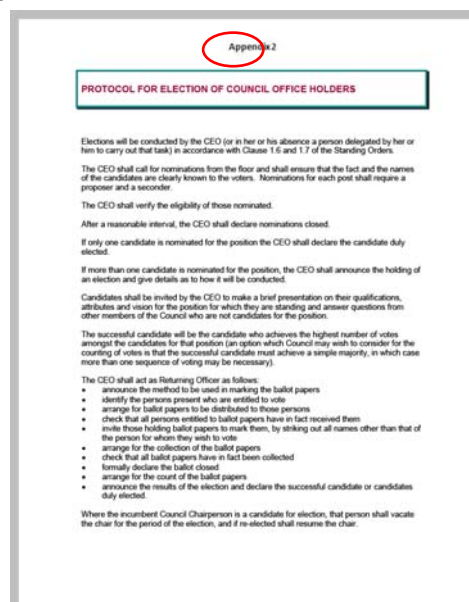
The accreditation team will expect to gain an overall picture of the training organisation, its policies and procedures, and the structures to support education and training activities. The training organisation's reflection on and critical analysis of its performance and plans against the accreditation standards and its own objectives are also important. In each part of its submission, the training organisation should identify relevant strengths, challenges and the processes for addressing the challenges, with examples.

Submission format

The accreditation submission should be a complete document providing answers to all the topics covered in this guide. The Council has not specified a maximum or minimum word length for the reaccreditation submissions but the team will appreciate clear, direct and succinct statements that follow the order in which the standards are set out and supported by relevant evidence. The supporting evidence should be presented as appendices. These will facilitate useful dialogue between the team and the training organisation, as well as a collegial and constructive process.

Please:

- note the appendix and its number if your answers refer to an appendix. For example, "Appendix title, Appendix 1"
- save the appendices as separate documents as described below
- **only include the appendix document once if you are referring to the same appendix in multiple sections**
- ensure that the name and number of the appendix is also on the first page of the appendix in the middle at the top, as in the picture below:



Format

Please format the document as outlined below:

- Calibri font, size 11

- 1.0 spacing
- Left aligned
- Any bullet points should be like this (main list)
 - Second-level bullet (sub-list).

The submission and supporting documentation can be sent to the Council in electronic format. Please provide a separate folder of the appendices. The Council's IT security has been set up to have a limit as to the file size that may be received by email. If you have sent us an email that includes a large file(s), and if we have not acknowledged receipt, please contact us to check that we have received the email.

Executive summary

The submission should be accompanied by an executive summary of not more than five pages, detailing major developments since the last accreditation, the challenges currently facing the training organisation and how these are to be met.

General comments on the preparation of the accreditation submission

The Council asks training organisations to provide the accreditation submission about four months before the Council assessment. The team conducting the assessment will meet to consider this submission, and then meet / speak with representatives of the training organisation to provide feedback and seek clarification of detail. If necessary, the team will then provide guidance on areas where further information should be presented. If in doubt about the level of detail to be presented, the training organisation is encouraged to seek advice from the Council's Education Coordinator in the first instance.

Provider details

Contact details

- Name of college/training organisation
- Address
- Chief Executive Officer
- Telephone number
- Email
- Officer to contact concerning the accreditation submission
- Telephone number
- Email

Training programmes offered:

List the training programmes offered and the award granted on successful completion for each gazetted scope of practice. This list should include the sub-specialties or similar categories in which training is offered.

Identify any training programmes which are the joint responsibility of this training organisation and another organisation. Indicate which training organisation awards the qualification.

Post-Fellowship:

List any Post-Fellowship Diplomas awarded.

Fellowship and membership categories:

Outline the categories of fellowship and membership available and provide information on the current numbers in each category.

1 The context of education and training

1.1 Responsible resource utilisation

Accreditation standard

1.1.1 The specialisation represented by the separate scope of practice is a wise use of resources.

The response to this standard should:

- Identify any similar existing or overlapping scopes and describe this overlap. Outline the implications of the overlap.
- Demonstrate that specialisation is not adversely affecting the quality of healthcare in New Zealand by promoting:
 - the unnecessary fragmentation of medical knowledge and skills
 - the unnecessary fragmentation of medical care
 - the unnecessary deskilling of other medical practitioners
 - inequitable access to health care as defined by socioeconomic status, geography or culture.

1.2 Sustainable base

Accreditation standard

1.2.1 The training organisation has a demonstrable and sustainable base in the medical profession, indicated by a sufficient number of practitioners.

The response to these standards should:

- Provide the number of Fellows and trainees
- Provide projections of the future need for specialist-level skills and knowledge in this area of medicine.

1.3 Governance

Accreditation standards

- 1.3.1 The training organisation's governance structures and its education and training, assessment and continuing professional development functions are defined.
- 1.3.2 The governance structures describe the composition and terms of reference for each committee, and allow all relevant groups to be represented in decision-making.
- 1.3.3 The training organisation's internal structures give priority to its educational role relative to other activities.

The response to these standards should:

- Briefly describe the training organisation's governance structures and functions, including the roles and responsibilities of senior officers. Indicate any changes since the last assessment by a Council accreditation team. Describe any governance reviews since the last Council accreditation and resulting changes your organisation has made.

- Provide an outline of the structure and accountabilities for managing training and education activities, including:
 - the national and any regional structures
 - any units that make a significant contribution to education and training processes, such as faculties, chapters or special societies
 - the management structure for any training programmes offered jointly with another organisation.
- Identify other relevant strengths and challenges in relation to the governance of the training organisation, plans for development and the processes for addressing the challenges.

1.4 Programme management

Accreditation standards

- 1.4.1 The training organisation has specifically nominated its board, individual office bearers or has established a committee or committees with the responsibility, authority and capacity to direct the following key functions:
- planning, implementing and reviewing the training programme(s) and setting relevant policy and procedures
 - setting and implementing policy and procedures relating to the assessment of overseas-trained specialists
 - setting and implementing policy on continuing professional development and reviewing the effectiveness of continuing professional development activities.
- 1.4.2 The training organisation's education and training activities are supported by appropriate resources including sufficient administrative and technical staff.

The response to these standards should:

- Provide a list of the office holders and/or committees that have roles in the organisation's training, assessment and continuing professional development activities. Please include a flow chart to illustrate reporting relationships.
- Describe how education and training activities are supported by appropriate resources, including sufficient administrative and technical staff.
- Identify how the training organisation evaluates the adequacy of its resources for training. Give examples of changes made as a result of review by the training organisation.
- Summarise the challenges the training organisation faces in resourcing its education and training activities for the next five years.
- Identify other relevant strengths and challenges in relation to programme management, plans for development and the processes for addressing the challenges, with examples.

1.5 Educational expertise

Accreditation standards

- 1.5.1 The training organisation uses educational expertise in the development, management and continuous improvement of its education, training, assessment and continuing professional development activities.
- 1.5.2 The training organisation collaborates with other educational institutions and compares its curriculum,

training programme and assessment with that of other relevant programmes.

The response to these standards should:

- Describe the way in which the training organisation provides/accesses educational expertise for development, management and continuous improvement of its education, training, assessment and continuing professional development activities. Indicate how the training organisation has developed its educational expertise since the last Council accreditation.
- Provide a summary of the existing and/or proposed collaborative links with other institutions and describe the nature of those links.
- Describe any new activities directed towards regional and international cooperation with other organisations.
- Outline any activities since the last accreditation to compare the curriculum with that of other programmes.
- Identify other relevant strengths and challenges in relation to educational expertise, plans for development and the processes for addressing the challenges, with examples.

1.6 Interaction with the health sector

Accreditation standards

- 1.6.1 The training organisation seeks to maintain constructive working relationships with relevant stakeholders to promote the education, training and ongoing professional development of medical specialists.
- 1.6.2 The training organisation works with healthcare institutions to enable clinicians employed by them to contribute to high quality teaching and supervision, and to foster peer review and professional development.

The response to these standards should:

- Describe the purpose of relationships with healthcare institutions. The response should include information on any formal agreements.
- Describe the purpose of relationships with other stakeholders.
- Outline the mechanisms by which the training organisation addresses health system-wide issues that may conflict with its educational plans.
- Identify relevant strengths and challenges in relation to interactions with the health sector, any plans for development and the processes for addressing the challenges, with examples.

1.7 Continuous renewal

Accreditation standards

- 1.7.1 The training organisation reviews and updates structures, functions and policies relating to education, training and continuing professional development to rectify deficiencies and to meet changing needs.

The response to this standard should:

- Describe the processes for renewal of structures, functions and policies relating to education, training and continuing professional development. Give examples.

- If relevant, describe how the training organisation has included trainees in the planning of new training requirements or new training programmes, and how it has considered the effect of plans for change on trainees.

Suggested appendices for this section:

- *Most recent Annual Report.*
- *A diagram or diagrams showing the training organisation’s governance structure.*
- *Terms of reference and membership of education and training committees.*
- *A diagram showing the training organisation’s staffing structure.*
- *Reports of any relevant educational reviews.*

2 Purpose of the organisation and outcomes of the training programme

2.1 Organisational purpose

Accreditation standards	
2.1.1	The purpose of the training organisation includes setting and promoting high standards of medical practice, training, research, continuing professional development, and social and community responsibilities.
2.1.2	In defining its purpose, the training organisation has consulted fellows and trainees, and relevant stakeholder groups.

The response to these standards should:

- Outline the mission and/or purpose of the organisation and the range of roles it undertakes. Describe any reviews of the purpose since the last Council accreditation and changes resulting.
- Describe any reviews of the gazetted scope of practice since the last Council accreditation. Describe how the role of the specialist practitioner in this discipline is developing.
- Describe how the training organisation communicates with and seeks the views of stakeholders about its purpose and roles.

2.2 Graduate outcomes

Accreditation standards	
2.2.1	The training organisation has defined graduate outcomes for each training programme including any sub-specialty programmes. These outcomes are based on the nature of the discipline and the practitioners’ role in the delivery of health care. The outcomes are related to community need.
2.2.2	The outcomes address the broad roles of practitioners in the discipline as well as technical and clinical expertise.
2.2.3	The training organisation makes information on graduate outcomes publicly available.
2.2.4	Successful completion of the programme of study must be certified by a diploma or other formal award.

The response to these standards should:

- Provide a statement of the graduate outcomes for each of the training programmes. In outlining the goals and content of the curriculum, please address both the common components of specialist medical education and training and the discipline-specific component of the training programme.
- Indicate how the training organisation has reviewed the appropriateness of the statement since the last accreditation.
- If the training organisation's statement of graduate outcomes has changed since the last accreditation:
 - describe the changes and the rationale for them;
 - describe the impact of those changes on the more specific outcomes or objectives which relate to the years or phases of the programme.

3 The education and training programme - curriculum content

3.1 Curriculum framework, structure, composition and duration

Accreditation standards

- 3.1.1 For each of its education and training programmes, the training organisation has a framework for the curriculum organised according to the overall graduate outcomes. The framework is publicly available.

The response to these standards should:

- Provide the educational framework of the training programme.
- Give a concise description of the programme structure and duration including, if relevant, individual programme components and core and elective components. The response should address:
 - how the programme has evolved since the last accreditation, including details of any reviews undertaken
 - requirement for training in specific institutions/environments/disciplines
 - developments in the programme in response to external change such as change in service delivery or models of care
 - the duration of the training programme.
- Address the following issues concerning education and training in the knowledge and skills specific to the specialty discipline:
 - is there a defined curriculum or a requirement for the acquisition of particular procedural skills in any specific part of training and if so, what is the basis for these
 - how the discipline-specific component of training compares with that for training programmes in other countries with a health system somewhat similar to those of New Zealand.
- Address the following issues relating to the common roles of medical specialists:
 - how the training programme addresses the knowledge, skills and professional qualities necessary for graduates to fill the broad responsibilities of specialists in the community
 - how the training programme addresses the issues associated with the understanding of the New Zealand health care system and the delivery of safe, high quality and cost effective health care within this system.

- how the training programme includes the key competencies of the Council’s *Domains of Competence*¹ or another internationally recognised framework.
- Identify relevant strengths and challenges in relation to the structure or design of the training programme, plans for development and the processes for addressing the challenges, with examples.

3.2 Sub-specialties and joint training programmes (if applicable)

Accreditation standards

- 3.2.1 For each component or stage, the curriculum specifies the educational objectives and outcomes, details the nature and range of clinical experience required to meet these objectives, and outlines the syllabus of knowledge, skills and professional qualities to be acquired.
- 3.2.2 Successful completion of the programme of study must be certified by a diploma or other formal award.

If the training organisation encompasses sub-specialties or similar categories, please provide an outline of such programmes in the accreditation submission. In relation to any programmes which are new since the last Council accreditation, indicate how the need for these and the structure of the programme was determined.

- Indicate how training in the sub-specialty programme builds on the broader educational objectives for the discipline/specialty as a whole.
- Explain how the training organisation reviews the ongoing community need for these sub-specialties.
- Identify relevant strengths and challenges in relation to sub-specialty training, plans for development and the processes for addressing the challenges, with examples.

For any programmes offered jointly with another organisation, please provide a brief outline of the structure of training.

- Identify relevant strengths and challenges in relation to joint training, plans for development and the processes for addressing the challenges, with examples.

3.3 Research in the training programme

Accreditation standards

- 3.3.1 The training programme includes formal learning about research methodology, critical appraisal of literature, scientific data and evidence-based practice, and encourages the trainee to participate in research.
- 3.3.2 The training programme allows appropriate candidates to enter research training during specialist education and to receive appropriate credit towards completion of specialist training.

The response to these standards should:

¹ Council’s Domains of Competence are: Medical care, Communication, Collaboration, Management, Scholarship and Professionalism. Council’s publication *Good Medical Practice* further explains these domains of practice. .

- Outline the training organisation’s role in relation to the support and promotion of research in the discipline or disciplines in which it provides training.
- Describe any formal learning opportunities for trainees about research methodology, critical appraisal of literature, scientific data, and/or evidence-based practice.
- Detail the opportunities available to candidates to enter research training during their specialist training programme and the policy on granting credit for such training towards completion of specialist training.
- Identify other relevant strengths and challenges in relation to research during training, plans for development and the processes for addressing the challenges, with examples.

3.4 Flexible training

Accreditation standards

- 3.4.1 The programme structure and training requirements recognise part-time, interrupted and other flexible forms of training including entitlement to parental leave.
- 3.4.2 The programme is structured to provide opportunities for trainees to pursue studies of choice, consistent with training programme outcomes, which are underpinned by policies on the recognition of prior learning. These policies recognise demonstrated competencies achieved in other relevant training programmes both here and overseas, and give trainees appropriate credit towards the requirements of the training programme.

The response to these standards should:

- Indicate the opportunities for part time and interrupted training and other flexibility in training. Append the relevant policy documents and provide access to application forms.
- Indicate the number of trainees that have sought and the number that have been granted part-time or interrupted training in the last three years.
- For each training programme, provide a table which shows for the last three years the number of trainees who have sought Recognition of Prior Learning (RPL) and been granted it and the number rejected.

3.5 The continuum of learning

Accreditation standards

- 3.5.1 The training organisation contributes to articulation between the specialist training programme and prevocational and undergraduate stages of the medical training continuum.

The response to these standards should:

- Describe the processes to articulate the training programme with previous and subsequent stages of training.
- Explain how the training organisation is informed about the requirements of previous stages of training. Summarise any changes to the programme made as a result of such feedback. Comment on the capacity to influence earlier stages of medical training.

- Suggested appendices for this section: A copy of the training programme handbook. If the curriculum documents are available on a members' only section of the website, please provide the accreditation team with access.
- A copy of the policy and procedures for any research project or research requirement.
- Provide a copy of the training organisation's policy on the recognition of prior learning, including if relevant the eligibility of trainees for retrospective approval of periods of relevant experience completed prior to selection to the training programme.

4 The training programme - teaching and learning

4.1 Teaching and learning methods

Accreditation standards

- 4.1.1 The training is practice-based involving the trainees' personal participation in relevant aspects of the health services and, for clinical specialties, direct patient care.
- 4.1.2 The training programme includes appropriately integrated practical and theoretical instruction.
- 4.1.3 The training process ensures an increasing degree of independent responsibility as skills, knowledge and experience grow.

The response to these standards should:

- Describe the teaching and learning methods used in the training programme, including:
 - any mandatory skills courses
 - educational activities and educational material, including distance education programmes that the training organisation provides.
- Outline requirements for completion of any university or other formal award courses, including:
 - programme objectives met by such courses
 - funding of these arrangements
 - quality assurance and review.
- Describe informal arrangements for the provision of any training by bodies external to the training organisation and how these arrangements are funded.
- Comment on the success of the teaching and learning methods used including:
 - how successive years build upon each other
 - how the training process ensures increasingly independent responsibility as skills, knowledge and experience grow.
- Identify other relevant strengths and challenges in relation to teaching and learning, plans for development and the processes for addressing the challenges, with examples.

4.2 Cultural competence

Accreditation standard

- 4.2 The training programme ensures that trainees, fellows and affiliates have access to significant training experiences in cultural competence and that evaluation of cultural competence is a specific component of the training programme.

The response to this standard should:

- Provide evidence of formal links with Māori and Pasifika medical organisations.
- Describe any formal representation of particular groups in the governance structure.
- Identify the existence of specialist advisers.
- Describe any mechanisms for support of particular cultural groups (including for instance, but not limited to, gender, spiritual and other belief systems, sexual orientation, disability, lifestyle, age and socio-economic status).
- Provide details of the process for evaluation of trainees' cultural competence.

Suggested appendices for this section:

- *Course outlines for mandated skills courses, or other required courses and awards.*

5 The curriculum – assessment of learning

5.1 Assessment approach

Accreditation standards

- 5.1.1 The assessment programme, that includes both summative and formative assessments, reflects comprehensively the educational objectives of the training programme.
- 5.1.2 The training organisation uses a range of assessment formats that are appropriately aligned to the components of the training programme.
- 5.1.3 The training organisation has policies relating to disadvantage and special consideration in assessment, including making reasonable adjustments for trainees with a disability.

The response to these standards should:

- Summarise the outcomes of any evaluations and reviews of the assessment programme that have occurred since the last accreditation.
- Specify the assessment methods for each component of the programme, indicating which assessments are barrier assessments. Highlight any changes since the last Council accreditation.
- Indicate what new assessment methods have been introduced since the last Council accreditation and comment on their success.
- Indicate how a match is achieved between teaching and learning, content and outcomes and assessment.
- Identify other relevant strengths and challenges in relation to assessment approaches, plans for development and the processes for addressing the challenges.

5.2 Feedback and performance

Accreditation standards

- 5.2.1 The training organisation has processes for early identification of trainees who are under performing and for determining programmes of remedial work for them.
- 5.2.2 The training organisation facilitates regular feedback to trainees on performance to guide learning.

5.2.3 The training organisation provides feedback to supervisors of training on trainee performance, where appropriate.

5.2.4 The training organisation has processes for obtaining regular feedback from trainees regarding the training they receive.

The response to these standards should:

- Describe the mechanisms for early identification of trainees who are underperforming and for the management of underperformance. Include processes for informing Council if required of concerns about the risk to public health and safety in relation to a trainee practising.
- Describe the mechanisms for providing feedback to trainees on the outcome of assessments including oral and written feedback, and who has responsibility for providing this feedback.
- List the reasons why a trainee would be excluded from the programme and the processes for exclusion. Indicate the number of trainees excluded in the last three years.
- Indicate for the last three years, how many trainees are progressing at a less than acceptable rate including the number who have had their period of training extended because of poor performance and how many appeals have been made over such issues.
- Describe programmes or mechanisms for remedial training. Give examples for the last three years.

5.3 Assessment quality

Accreditation standard

5.3.1 The training organisation considers the reliability and validity of assessment methods, the educational impact of the assessment on trainee learning, and the feasibility of the assessment items. It introduces new assessment methods where required.

The response to these standards should:

- Outline the mechanisms used to measure reliability and validity of assessment methods, and give data from recent assessments.
- Describe how the training organisation has analysed its assessment processes and how it has used the findings from its analysis to improve assessment methods since the last accreditation.
- Describe processes for regularly reviewing existing assessment items and adding new items.
- Outline the training provided for supervisors and examiners on assessment requirements.
- Describe how the training organisation monitors pass rates in examinations or components of examinations, and how it investigates high failure rates in individual components.
- For each training programme provide the following tabulated information for the last five years:
 - the number and percentage of trainees who passed the various summative assessments at their first, second, third and subsequent attempts
 - the numbers of trainees who withdrew from the programme before completion and a summary of the reasons for withdrawal.
- Identify other relevant strengths and challenges in relation to assessment quality, plans for development and the processes for addressing the challenges, with examples.

5.4 Recognition and assessment of International Medical Graduates (IMGs)² holding specialist qualifications.

Accreditation standard

5.4.1 The training organisation has processes to:

- Assess the relative equivalence of IMG’s qualifications against the prescribed standards for their discipline;
- Advise the Council of any additional training or experience that would be required by the IMG to meet the criteria for vocational registration in New Zealand.

The response to these standards should:

- Outline the processes the training organisation has for assessment of overseas-trained specialists to meet Council’s standards (noting that advice that the IMG must obtain a Fellowship is not appropriate).
- Describe the process for ensuring that the training organisations’ Fellows who conduct the assessments have appropriate training and experience.
- Describe the process for identifying and reporting to Council if any significant concerns about the IMG’s competence become apparent during the assessment or thereafter.
- Describe the process by which the training organisation assesses the suitability of the proposed position and supervisor for an IMG undertaking Council’s assessment pathway to registration.
- Describe the process by which the training organisation identifies appropriately qualified assessors for Council’s vocational practice assessment process
- Identify other relevant strengths and challenges in relation to assessment of IMGs and the processes for addressing the challenges, with examples.

6 The curriculum – monitoring and evaluation

6.1 Ongoing monitoring

Accreditation standards

6.1.1 The training organisation regularly evaluates and reviews its training programmes. Its processes address curriculum content, quality of teaching and supervision, assessment and trainee progress.

6.1.2 Supervisors and trainers contribute to monitoring and to programme development. Their feedback is systematically sought, analysed and used as part of the monitoring process.

6.1.3 Trainees contribute to monitoring and to programme development. Their confidential feedback on the quality of supervision, training and clinical experience is systematically sought, analysed and used in the monitoring process. Trainee feedback is specifically sought on proposed changes to the training programme to ensure that existing trainees are not unfairly disadvantaged by such changes.

² For the purposes of this standards, the term “IMG” refers to non-Australasian doctors trained overseas who hold provisional vocational registration with the Medical Council of New Zealand.

The response to these standards should:

- Describe how the training organisation has evaluated and reviewed its training programme since the last Council accreditation. Summarise important changes that have resulted from these processes.
- Provide details on how supervisor, trainer and trainee feedback has been collected, analysed and used to improve the programme.
- Outline the mechanisms to inform trainees of the results of ongoing monitoring and the response by the training organisation to trainee feedback.
- Identify other relevant strengths and challenges in relation to ongoing programme monitoring, plans for development and the processes for addressing the challenges, with examples.

On behalf of the accreditation teams, the Education coordinator seeks submissions on the training and professional development programmes being reviewed. Council has identified the following as key stakeholder organisations in relation to specialist medical training and professional development:

- trainees;
- supervisors of training;
- other organisations providing specialist medical training;
- the Ministry of Health;
- consumer groups; and
- Deans of medical schools.

To assist the accreditation team to plan its approach to collecting feedback, please indicate if the training organisation has a process for regular consultation with any of the groups listed above and outline briefly the matters covered.

6.2 Outcome evaluation

Accreditation standards

- 6.2.1 The training organisation collects and examines data on the outcomes of its training programme.
- 6.2.2 Supervisors, trainees, health care administrators, other health care professionals and consumers contribute to evaluation processes.

The response to these standards should:

- Describe the training organisation's processes to evaluate graduate outcomes.
- Explain how information about graduate outcomes is used as feedback for programme development.
- Outline the mechanisms for reporting outcome evaluation throughout the training organisation.
- Describe how the training organisation communicates the outcomes of programme evaluation to stakeholders, and seeks their input regarding the relevance and development of the curriculum.
- Explain how the training organisation seeks evaluation feedback from and, where appropriate, responds to community perceptions about graduates of its programmes.
- Identify other relevant strengths and challenges in relation to evaluation and outline plans for development and the processes for addressing the challenges, with examples.

Suggested appendices for this section:

- *The training organisation's evaluation plan and quality improvement strategy.*
- *Copies of reports of recent reviews of the curriculum and/or sections of the programme.*

- *Recent surveys of trainees or Fellows.*

7 Implementing the curriculum – trainees

7.1 Admission policy and selection

Accreditation standards

- 7.1.1 A clear statement of principles underpins the selection process, including the principle of merit-based selection.
- 7.1.2 The processes for selection into the training programme:
- are based on the published criteria and the principles of the training organisation concerned
 - are evaluated with respect to validity, reliability and feasibility
 - are transparent, rigorous and fair
 - are capable of standing up to external scrutiny
 - include a formal process for review of decisions in relation to selection, and information on this process is outlined to candidates prior to the selection process.
- 7.1.3 The training organisation documents and publishes its selection criteria. Its recommended weighting for various elements of the selection process, including previous experience in the discipline, is described. The marking system for the elements of the process is also described.
- 7.1.4 The training organisation publishes its requirements for mandatory experience, such as periods of rural training, and/or for rotation through a range of training sites. The criteria and process for seeking exemption from such requirements are made clear.
- 7.1.5 The training organisation monitors the consistent application of selection policies across training sites and/or regions.

The response to these standards should:

- Describe how the selection process is implemented: either at hospital, regional or national level and outline the reasons for the choice of the policy.
- If applicable, describe how the training organisation monitors the consistent application of selection policies across training sites, and the actions it takes when its policy is not applied.
- Describe the role of the employer and the training organisation in the phases of the selection process:
 - If the training organisation is primarily responsible for selection, indicate the opportunities for employer representation in the various phases of selection, and whether these are considered adequate.
 - If the employer is primarily responsible for selection, how the employer’s selection process are reviewed as part of the accreditation of the institution; how the training organisation is represented at the various phases of the selection process and whether this is considered adequate.
 - Outline the advice given to fellows and representatives of the training organisation on their role and responsibilities in selection processes.
- Describe how information on the selection process and appeals mechanism is made available to applicants.
- Describe the training organisation’s process for review of the selection process.

- Provide information on the number of trainees entering the training programme(s) in each of the last three years. Council does not specify a format for this information. The training organisation may present information in the format required by other organisations.
- Identify the implications of greater numbers of trainees on the quality of the organisation's training programmes and the mechanisms that exist to respond to a repeated shortfall or oversupply of applicants in any programme.
- Identify other relevant strengths and challenges in relation to selection, plans for development and the processes for addressing the challenges, with examples.

Suggested appendices for this section:

- *The training organisation's selection policy and selection criteria.*
- *Information available to prospective trainees on:*
 - *The nationally available opportunities for entering the training programme.*
 - *Any quotas and other limits, such as the number of training positions.*
 - *Location of training, including periods of mandatory experience.*

7.2 Trainee participation in the governance of their training

Accreditation standard

- 7.2.1. The training organisation has formal processes and structures that facilitate and support the involvement of trainees in the governance of their training.

The training organisation's response to these standards should:

- Describe the trainee representation on the major committees of the training organisation. The response should indicate:
 - positions in which trainees are invited observers and those in which trainees are full members.
 - the capacity for trainees independently to place matters on the agenda.
- Provide a summary of the activities/processes of the training organisation in which trainee representatives formally participate, such as accreditation, trainee selection, curriculum development/education boards, examinations, appeals/disputes. Cross reference to the sections of the accreditation submission in which more detailed information is available.

Suggested appendices for this section:

- *A copy of the training organisation's policy or statement of principles concerning engagement with trainees and/or statement of rights and responsibilities of trainees.*

7.3 Communication with trainees

Accreditation standards

- 7.3.1 The training organisation has mechanisms to inform trainees about the activities of its decision-making committees, in addition to communication by the trainee organisation or trainee representatives.
- 7.3.2 The training organisation provides clear and easily accessible information about the training programme, costs and requirements, and any proposed changes.
- 7.3.3 The training organisation provides timely and correct information to trainees about their training

status to facilitate their progress through training requirements.

The response to these standards should:

- Outline the training organisation's strategy for communication with prospective trainees. How is the effectiveness of the strategy reviewed? Give some specific examples.
- Describe the mechanisms by which trainees are informed about activities by decision-making committees, particularly those pertaining to training.
- Describe the mechanisms by which the views of the trainees in general are obtained and subsequently incorporated into the decision making process. Give recent examples, including examples of changes made to the training programme and requirements as a result of trainee input.
- Describe the training organisation's role in promulgating information concerning career opportunities, and support systems.
- Describe the training organisation's system(s) for providing information to trainees and their supervisors about training status and progression through requirements.
- Identify other relevant strengths and challenges in relation to communication with trainees, plans for development and the processes for addressing the challenges, with examples.

7.4 Resolution of training problems and disputes

Accreditation standards

- 7.4.1 The training organisation has processes to address confidentially problems with training supervision and requirements.
- 7.4.2 The training organisation has clear impartial pathways for timely resolution of training-related disputes between trainees and supervisors or trainees and the organisation.
- 7.4.3 The training organisation has reconsideration, review and appeals processes that allow trainees to seek impartial review of training-related decisions, and makes its appeals policies publicly available.
- 7.4.4 The training organisation has a process for evaluating de-identified appeals and complaints to determine if there is a systems problem.

The response to these standards should:

- Describe the training organisation's mechanism to impartially resolve disputes between trainees and supervisors or others who act on the training organisation's behalf.
- Identify relevant strengths and challenges in relation to resolving training problems and disputes, plans for development and the processes for addressing the challenges, with examples.
- Indicate the number of appeals that have been heard within the last three years, the subject of the appeal (e.g. selection, assessment, training time) and the outcome (number upheld, number dismissed).

Suggested appendices for this section:

- *Policies on dealing with complaints about bullying, sexual harassment and poor supervision;*
- *Policy relating to formal dispute resolution in the event that complaints are not satisfactorily resolved.*

8 Implementing the training programme – delivery of educational resources

8.1 Supervisors, assessors, trainers and mentors

Accreditation standards

- 8.1.1 The training organisation has defined the responsibilities of hospital and community practitioners who contribute to the delivery of the programme of study and the responsibilities of the training organisation to these practitioners. It communicates its goals and objectives for specialist medical education to these practitioners.
- 8.1.2 The training organisation has processes for selecting supervisors who have demonstrated appropriate capability for this role. It facilitates the training and professional development of supervisors and trainers.
- 8.1.3 The training organisation routinely evaluates supervisor and trainer effectiveness including feedback from trainees.
- 8.1.4 The training organisation has processes for selecting assessors in written, oral and performance-based assessments who have demonstrated relevant capabilities.
- 8.1.5 The training organisation has processes to evaluate the effectiveness of its assessors/examiners including feedback from trainees, and to assist them in their professional development in this role.

The response to these standards should:

- Describe the process for the appointment of supervisors of training and other trainers.
- Explain how the trainer/trainee ratio is set, or how this balance is determined.
- Describe the training available to supervisors and trainers, including frequency and how participation in training is encouraged. Describe any changes in this since the last Council accreditation.
- Describe the mechanisms for evaluating supervisor and trainer effectiveness. Describe processes for providing feedback to assist professional development in these roles.
- Describe the process for the appointment of examiners and assessors. Also describe the mechanisms for evaluating the effectiveness of assessors and examiners and processes for providing feedback to individuals on their role.
- Explain the process the training organisation provides to assist trainees in identifying a mentor.
- Identify other relevant strengths and challenges in relation to supervision, plans for development and the processes for addressing the challenges, with examples.

Suggested appendices for this section:

- *The position descriptions for supervisors of training and other training and assessing roles.*
- *The training organisation's statement of the responsibilities of practitioners who contribute to the delivery of the training programme and its responsibilities to these practitioners.*
- *Sample programmes for supervisor training workshops.*

8.2 Clinical and other educational resources

Accreditation standards

- 8.2.1 The training organisation has a process and criteria to select and recognise hospitals, sites and posts for training purposes. The accreditation standards of the training organisation are publicly available.
- 8.2.2 The training organisation specifies the clinical and/or other practical experience, infrastructure and educational support required of an accredited hospital/training position in terms of the outcomes for the training programme. It implements clear processes to assess the quality and appropriateness of the experience and support offered to determine if these requirements are met.
- 8.2.3 The training organisation's accreditation requirements cover: orientation, clinical and/or other experience, appropriate supervision, structured educational programmes, educational and infrastructure supports such as access to the internet, library, journals and other learning facilities, continuing medical education sessions accessible to the trainee, dedicated time for teaching and training and opportunities for informal teaching and training in the work environment.
- 8.2.4 The training organisation works with the health services and other stakeholders as previously defined to ensure that the capacity of the health care system is effectively used for service-based training, and that trainees can experience the breadth of the discipline. It uses an appropriate variety of clinical settings, patients and clinical problems for training purposes, while respecting service functions.

The response to these standards should:

- Provide the policy and criteria for accreditation and the aims of its accreditation process. Describe any reviews of the policy since the last Council accreditation, and highlight any changes made as a result.
- Outline the training organisation's process for accreditation of posts/programmes or sites for training. The response should cover:
 - what the training organisation accredits, e.g. positions, facilities, networks of facilities
 - the accreditation cycle
 - the key components of the accreditation process
 - the role of site visits and inspections and the responsibility for undertaking them
 - the contribution of trainees and supervisors to review of the suitability of institutions / posts for training
 - the process for making accreditation decisions and for review and appeal
 - changes which would cause the accreditation status to be reviewed
 - monitoring of accredited positions, facilities and programmes
 - level(s) of accreditation available.
- Indicate how the training organisation assures itself that trainees are involved in high quality clinical care.
- Indicate how the training organisation publishes the requirements to be met by institutions seeking accreditation.
- Provide the following information for the last five years:
 - the number of programmes, sites, and/or posts reviewed by the training organisation, and the accreditation decisions
 - new posts/sites/or programmes accredited for training
 - a summary of any unplanned or unscheduled reviews, the trigger for them and the outcomes.
- Explain how the training organisation monitors the training programmes of individual trainees. What processes are there for advising trainees on the choice of training sites to benefit their overall training?

- Critically discuss the adequacy of the clinical and other experience available to provide a range of clinical and other experiences appropriate to the curriculum outcomes. Outline any initiatives begun or planned since the last accreditation to expand quality and/or range of training settings.
- Discuss frankly challenges and initiatives in integrating teaching, assessment and supervision with service demands.

Suggested appendices for this section:

- *The policy and criteria for accreditation and the aims of its accreditation process. If this has changes since the last Council accreditation, please highlight changes and provide a rationale for them.*
- *A list of accredited hospitals, community health care facilities and / or posts.*
- *Some sample accreditation reports that illustrate the range of decisions that the training organisation makes.*

9 Continuing professional development

9.1 Continuing professional development programmes (recertification)

Accreditation standards

- 9.1.1 The training organisation’s continuing professional development programme provides a process for maintaining and improving competence and performance comprising at least 50 hours each year and covering the Council’s domains of competence, at least to the minimum requirements as described in Appendix 3 to the Standards.
- 9.1.2 The training organisation determines the formal structure of the CPD programme in consultation with stakeholders.
- 9.1.3 The training organisation ensures that the process and criteria for assessing and recognising CPD providers and/or the individual CPD activities are based on educational quality, the use of appropriate educational methods and resources, and take into consideration feedback from participants.
- 9.1.4 The training organisation has mechanisms to allow doctors who are not its fellows to access relevant continuing professional development and other educational opportunities.

The response to these standards should:

- Detail the formal structure of the CPD programme including:
 - The categories of practitioner and the number of practitioners undertaking their recertification programme.
 - Any categories of practitioner that are not enrolled in recertification programmes.
 - Details of the hours per year that members are required to spend on recertification activities and how that is comprised.
 - Details of the process that is in place for evaluating whether practitioners participating in the programme are meeting the requirements.
 - Information collected by the training organisation about:
 - the numbers of and outcomes for practitioners who undertake regular practice reviews
 - whether practitioners have undertaken a credentialing process and if so whether there are checks in place to ensure those practitioners are doing CPD appropriate for their clinical responsibilities.

- How the element of cultural competence is included , identifying formal components of the recertification programme that contribute to the cultural competence of fellows and affiliates, for instance:
 - a cultural competence Resource kit for fellows
 - tools used to assess Fellows’ cultural competence
 - relevant workshops/courses that contribute to cultural competence as part of CPD activities
- Any requirement for participation in particular categories of CPD activities.
- whether the programme is accessible only to fellows or to specialists in the discipline who does not hold the organisation’s fellowship. Please outline any differences in the policy and procedures relating to fellows and to non-fellows.
- Provide a concise description of how the continuing professional development programme has developed. The response should address:
 - how the programme has evolved since the last accreditation
 - developments in the programme in response to external change such as change in service delivery or models of care
- Describe the evaluation of the professional development programme, including the cycle for review, the criteria and process. What changes have resulted from the most recent evaluation?
- Describe the practices employed by the training organisation to ensure that its continuing professional development activities are supported by appropriate resources. Give examples of changes made as a result of review by the training organisation.
- Describe the training organisation’s mechanisms to consult stakeholder organisations on the structure and requirements of the continuing professional development programme.
- Describe the process and criteria for assessing and recognising CPD providers and/or the individual CPD activities. Indicate how these processes and criteria take account of educational quality, and the use of appropriate educational methods and resources
- Describe any requirements for more formal assessment of ongoing competence and performance of fellows of the training organisation. What is the evidence of the validity and reliability of these assessments?
- Identify other strengths and challenges in relation to continuing professional development, plans for development and the processes for addressing the challenges, with examples.

9.2 Retraining

Accreditation standard

9.2.1 The training organisation has processes to respond to requests for retraining of its fellows.

The response to this standard should:

- Outline the processes to respond to requests for retraining of its fellows who have been absent from practice for a period of time, with examples from the last three to five years.

9.3 Remediation

Accreditation standard

9.3.1 The training organisation responds to requests for remediation of its fellows who have been identified as under-performing in a particular area.

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| 9.3.2 | The training organisation audits whether doctors are participating in the recertification programmes and whether they are meeting the requirements. |
| 9.3.3 | The training organisation reports to Council when requested, those who are participating in the recertification programme and whether they are complying or not. |
| 9.3.4 | The training organisation has a system for identifying and managing compliance with recertification programmes, and where appropriate to refer the doctor to Council. |
| 9.3.5 | The training organisation informs Council if the training organisation becomes aware of performance or competence concerns on the part of the doctor. |

The response to this standard should:

- Describe the training organisation's mechanisms or processes to identify poorly performing members or fellows.
- Describe the process for auditing whether doctors are participating in the recertification programmes. Give participation rates of fellows in the CPD programme for the last five years.
- Describe the system for identifying and managing compliance with recertification programmes.

Suggested appendices for this section:

- *The training organisation's continuing professional development programme/recertification programme handbook.*
- *The training organisation's policy on retraining and returning to practice after an absence.*
- *The training organisation's policy on remediation for underperforming fellows.*