

Australasian College
for Emergency Medicine

SSP Accreditation

S95 Process Guide

Document Review

Timeframe for review:	every two years, or earlier if required.
Document authorisation:	Council of Education
Document implementation:	Accreditation Subcommittee
Document maintenance:	General Manager, Governance and Standards

Revision History

Version	Date	Pages revised / Brief Explanation of Revision
1.0	June 2012	Approved
7.0	July 2018	AC95 split into two separate documents – policy (AC638) and process (AC95) guide
7.1	October 2019	Procedure changed for SSP applications from sites that had their accreditation withdrawn by other colleges. All these applications will require approval from COE
7.2	April 2020	Sites/posts that are part of the Australian Department of Health sponsored Integrated Rural Training Pipeline (IRTP) or Specialist Training Program (STP) initiatives may be exempt from having to apply for Category A even if they have multiple Category T applications. Application timeframe changed to 8 weeks.
7.3	September 2021	Added a clause to 2.1 – Sites are not permitted to resubmit a declined application for a period of 12 months. Added “Conditional” accreditation status to realign with ED accreditation statuses. Added TS4 accreditation.

Table of contents

1. Introduction	1
1.1 Purpose and scope	1
1.2 Term definitions.....	1
1.3 SSP accreditation types.....	1
2. Requesting SSP approval	3
2.1 Category A Application.....	3
2.2 Category T Application	3
3. Requesting accreditation	4
3.1 Requesting Category A accreditation	4
3.2 Requesting Category T Accreditation	4
4. SSP accreditation site inspections	6
4.1 Nomination of SSP sites for inspection.....	6
4.2 Accreditation Inspection confirmation.....	6
4.3 Composition of the Inspection Team	6
4.4 Inspection Program	7
5. Conduct of an SSP accreditation inspection	8
5.1 College Regulations and Policies Governing Conduct	8
5.2 The Accreditation Inspection	8
5.3 Accreditation Inspection Findings.....	8
6. Approval of the inspection team findings	9
6.1 Approval Process.....	9
7. Post-inspection site review	9
7.1 Site Response to Recommendations.....	9
7.2 Resolution of accreditation recommendations.....	9
7.3 Management of 'unsatisfactory' recommendation progress.....	10
8. Accreditation outcomes	11
9. Maintaining accreditation – accredited SSP sites	12
9.1 Twelve Month Follow up	12
9.2 Application for increase to trainee numbers.....	12
9.3 Changing/Adding SSP Supervisor(s).....	12
9.4 Complaints or Grievances	12
9.5 Notification of Issues relating to Accreditation – Focused Investigation.....	12
10. Reconsideration, review and appeal	13
11. Glossary	14

1. Introduction

1.1 Purpose and scope

To provide information and outline the administrative processes associated with the accreditation of Special Skills Placements (SSP).

The purpose of the FACEM Training Program is to produce specialist doctors with the clinical knowledge, skills, and attitudes necessary to function safely and independently as emergency physicians at a specialist level. These are described in the ACEM Curriculum Framework.

The intention of Special Skills Placements is to provide focused non-ED training to a competence level equivalent to that described in Advanced Training.

This process guide refers to the accreditation process for the following types of ACEM Accreditation:

- Special Skills Placement – Category A (ACEM)
- Special Skills Placement – Category T (Trainee)

Out of scope

This guide does not apply to the Accreditation of Emergency Departments and Paediatric Emergency Departments for the FACEM Training Program. Refer to AC550 FACEM Training Program Site Accreditation – Process Guide for guidance on accreditation of these placement types.

1.2 Term definitions

When reading this guide, please refer to the glossary at the end of the document for term definitions.

1.3 SSP accreditation types

1.3.1 Category A

Category A accreditation is awarded to sites offering a specific Special Skills Placement over a 5 year accreditation cycle. Sites are initially accredited against the relevant SSP Guidelines requirements in the first year of the cycle, via the process of application, inspection and assessment outlined in this document. All sites are required to be re-assessed for accreditation against the relevant SSP Guidelines requirements every five years.

Additionally, the College may initiate a focused investigation (which may include a focused site visit) of a site at any point within the five-year cycle, in response to issues identified through the monitoring of accreditation conditions, the review of College data, or other substantiated information.

The purpose of a Special Skills Placement accreditation inspection is to assess:

- The commitment of the hospital or service to postgraduate education within a specific discipline area of Emergency Medicine;
- The capacity of the Special Skill Placement to provide adequate and appropriate experience within a specific discipline area of Emergency Medicine;
- The adequacy of the training and research environment to support the learning outcomes of the of the Special Skills Placement;
- The adequacy of the resources to support the learning outcomes of the Special Skill Placement;
- The veracity of any information sources that may indicate problems with the SSP (such as trainee reports, other College survey tools, reports, or substantiated information).

Note: Sites wishing to be accredited for Training Stage 4 (TS4) must demonstrate they meet TS4 requirements. Please refer to AC808 TS4 Accreditation Requirements for details.

1.3.2 Category T

Category T is a one-off approval and is assessed on a case by case basis in accordance with the relevant SSP Guidelines. The approval is for the placement and therefore the site is not inspected.

Note: If any site has sequentially submitted more than one Category T application request, the College may choose to request that the site applies for Category A status instead. In this instance, the process for applying for Category A will be initiated and no further Category T applications will be accepted for that site.

Sites that are part of the Department of Health's Specialist Training Program (STP) or Integrated Rural Training Pipeline (IRTP) initiatives may be exempted from applying for Category A accreditation after several Category T applications, due to the nature and timing of trainee rotations to these sites.

Note: TS4 trainees wishing to apply for Category T overseas placements must first obtained approval via the Special Consideration application. If approved, a formal Category T application including demonstrating how TS4 learning objectives can be met must be formally submitted for approval by the Accreditation Subcommittee. Please refer to AC808 TS4 Accreditation Requirements for details.

1.3.3 Continuous Quality Improvement and Accreditation

The College applies continuous quality improvement (CQI) principles to the site assessment process and works collaboratively with sites to ensure all requirements are met. Following inspection by the College, sites will be given a specific period of time to make quality improvements where specific requirements were not met at the time of inspection.

In circumstances where a site does not demonstrate sufficient progress in meeting a requirement, the College's review process is initiated. This process is outlined further in Section 7 (Post-inspection site review) of this document.

2. Requesting SSP approval

2.1 Category A Application

The supervisor submits an application via email to accreditation@acem.org.au that includes:

- A completed AC173 SSP Application with supporting documentation.
- A cover letter, addressed to the Chair, Accreditation Subcommittee, requesting accreditation for the SSP, signed by the site CEO or equivalent.

Note: Any other documents subsequently requested must be submitted to the College at least eight weeks before the start of the placement.

These documents, together with any previous accreditation inspection reports, feedback letters, trainee reports and other relevant documentation (including previously submitted learning portfolios and logbooks), are collated by the College Accreditation Officer for review by the Accreditation Subcommittee.

Confirmation of receipt of the application will be sent to the site within seven working days. If there is insufficient documentation to support the application or the AC173 SSP Application is not fully completed, the site will be requested to revise and resubmit the application.

Notes:

- 1 The College accepts only soft copy applications or supporting documents.
- 2 Applications for reaccreditation subsequent to the removal of accreditation will be treated as new site applications and must be submitted using the new accreditation application process.
- 3 Applications for Category A accreditation from sites subject to accreditation withdrawal by any other Medical College will be reviewed by the Council of Education (COE).
- 4 Sites for which SSP applications are declined may not resubmit for a period of 12 months and any resubmission will be subject to condition 2 above.

2.2 Category T Application

The trainee submits an application via email to the accreditation team (accreditation@acem.org.au) that includes:

- A completed AC173 SSP Application or TA157 Overseas SSP Application (as applicable) with supporting documentation
- A cover letter, addressed to the Chair, Accreditation Subcommittee, requesting accreditation for the SSP, signed by the site CEO or equivalent.

Any other necessary documents must be submitted to the College at least eight weeks before the start of the placement. Applications received outside of this timeframe will not be considered (with the exception of IRTP posts which will be considered on a case by case basis).

3. Requesting accreditation

3.1 Requesting Category A accreditation

3.1.1 Site Preparation

The Director(s) of Emergency Medicine (DEM(s))/Director(s) of Emergency Medicine Training (DEMT(s)) or the SSP Supervisor(s) must familiarise themselves with the relevant SSP Guidelines before applying for accreditation. The guidelines are available on ACEM's website.

3.1.2 SSP Supervisors

Each Special Skills Placement must have a nominated supervisor who has qualifications or demonstrated experience within the discipline area.

The SSP Supervisor is the main point of contact for both the trainee and the College. Regular formal contact between the supervisor and the trainee is required throughout the placement. In general, the supervisor is responsible for ensuring trainees are appropriately orientated, provided with the appropriate education and training to achieve the learning objectives and provided with mid and end of placement assessments. SSP Supervisors must also comply with any specific criteria related to their role as outlined in the relevant SSP Guideline for their discipline area.

The SSP Supervisor will also be required to perform an In-Training Assessment (ITA) of the trainee(s) every three months. The SSP Supervisor will be notified via email to complete the ITA in the ACEM Member Portal.

All SSP Supervisors will have their own login to the ACEM Member Portal. Login details will be provided by ACEM when supervisors are approved.

All SSP Supervisors must be of good standing with the College.

3.1.3 Educational/Learning Portfolios/Logbooks

Trainees undertaking selected Special Skills Placements are required to complete an Educational Portfolio. Further details of the purpose of an Educational Portfolio are contained in the Accreditation Policy on Educational Standards for SSPs (AC638).

3.1.4 Outcome: Provisional Accreditation Assessment

Provisional accreditation is the period of time between initial College approval of a site's application and the date of the site inspection visit.

Category A applications are considered by the Accreditation Subcommittee and an outcome communicated to the applying site within eight weeks. The outcome will include the approved duration of Advanced Training Time and the maximum number of trainees who may be supported at the site.

Where Provisional Accreditation is approved, the DEM(s)/DEMT(s)/Supervisor(s) must advise the College of commencement of trainee(s) immediately via the accreditation team (accreditation@acem.org.au).

Sites granted Provisional Accreditation will be inspected by the College some time from three to six months after the commencement of trainees depending on the length of the trainee's placement.

Sites are granted a total of 12 months of provisional accreditation during which time trainee(s) must be appointed to the placement. If no trainees are appointed within this period, the provisional accreditation status will lapse, and the site will be required to submit a new application before a trainee can be appointed.

3.2 Requesting Category T Accreditation

Trainees must familiarise themselves with the relevant SSP Guidelines before applying for accreditation. The guidelines are available on ACEM's website.

3.2.1 SSP Supervisors

Each Special Skills Placement must have a nominated supervisor who has qualifications or demonstrated experience within the discipline area.

Regular formal contact between the supervisor and the trainee is required throughout the placement. In general, the supervisor is responsible for ensuring trainees are appropriately orientated, provided with the appropriate education and training to achieve the learning objectives and provided with mid and end of placement assessments. SSP Supervisors must also comply with any specific criteria related to their role as outlined in the relevant SSP Guideline for their discipline area.

The SSP Supervisor will also be required to perform an In-Training Assessment (ITA) of the trainee(s) every three months. The SSP Supervisor will be notified via email to complete the ITA in the ACEM Member Portal.

All SSP Supervisors will be given their own login to the ACEM Member Portal by ACEM, when supervisors are approved.

For overseas Cat T applications, a remote FACEM supervisor who will be based in Australia / New Zealand for the duration of the SSP must also be nominated.

3.2.2 Education/Learning Portfolios/Logbooks

Trainees undertaking selected Special Skills Placements will be required to complete an Education Portfolio.

Further details of the purpose of an Education Portfolio are contained in the Accreditation Policy on Educational Standards for SSPs (AC638).

3.2.3 Outcome: SSP approved

Once the SSP has been approved, the placement will be entered by the accreditation team staff in the ACEM Member Portal. For Cat T overseas applications, under regulation B, applications will be considered for a total of 12 months approved training including:

- Up to six months approved non-ED training and
- Up to six months approved discretionary training (ED or Non – ED)

All ED training may count only as discretionary training time, whilst non-ED training time may count towards both non-ED training time and discretionary training time.

Note: The College will not accept requests for extension beyond the maximum twelve month period. Trainees wishing to remain in a Cat T post beyond twelve months will need to apply for an interruption to training under Regulation B.

4. SSP accreditation site inspections

4.1 Nomination of SSP sites for inspection

The ACEM accreditation team staff routinely schedule SSP sites for inspection for the following reasons:

- a A New SSP Accreditation Inspection is initiated upon notice from a site granted provisional accreditation advising commencement of trainee(s) (as per Section 3 (Requesting Category A Accreditation), above). This inspection will be scheduled some time from three to six months after the commencement of trainees depending on the length of the trainee's placement
- b A Five Year Review Inspection is initiated for all SSP sites five years after the granting date of their initial or renewed accreditation. If a trainee is in place at the site at the time the inspection proceeds. If there is no trainee in place at the site at the time the accreditation will lapse and the site will be required to submit a new application if they wish to place a trainee in the future.
- c The College may instigate a focused investigation (which may include a focused site visit) following receipt of information which indicates that a site no longer meets College requirements. This includes failure to submit ITAs of the trainee's performance during the SSP.
- d Accreditation Subcommittee-initiated urgent or unscheduled inspection. The Accreditation Subcommittee may, at its discretion, initiate an unscheduled or urgent inspection. In this situation, the timelines for the administrative process and the inspection negotiated with the SSP Supervisor may vary from standard timeframes described in Section 43.

4.2 Accreditation Inspection confirmation

The site SSP Supervisor must submit a completed AC173 SSP Application to the accreditation team (accreditation@acem.org.au) a minimum of six weeks ahead of the scheduled inspection date.

If the College does not receive the complete documentation at least six weeks prior to the inspection date, the inspection may be cancelled.

4.3 Composition of the Inspection Team

Accreditation inspection teams are led by a member of the of the Panel of Inspectors and may include a specialist in the SSP being inspected.

The inspection team will comprise of:

- a locally based lead inspector, who is a member of the Panel of Inspectors (at a minimum)
- a second inspector, who is a FACEM and who may have specialist skills in the discipline area of the SSP being inspected.

The ACEM accreditation team provides the AC173 SSP Application and other relevant data to the inspection team.

All members of the Inspection Team are required to declare any conflict of interest related to the SSP to be inspected, as outlined in the ACEM COR139 Conflict of Interest Policy. In the event of a declared conflict of interest, the inspector will be removed from the inspection team and the position reassigned.

4.4 Inspection Program

The accreditation team staff will liaise with the site and coordinate the creation of an inspection program.

After reviewing the AC173 SSP Application, the lead inspector confirms members of staff from the site to be interviewed.

Interview/activity	Time frame
Inspectors' private pre-inspection discussion	10 mins
SSP Supervisor(s)	30 to 40 mins
Director of Unit / DEM / DEMENT (if applicable)	30 mins
Tour of service (if applicable)	30 mins
Minimum of two trainee interviews	15 mins each
(include previous trainees who have completed the SSP to ensure an adequate number of trainees interviewed)	15 mins each
Other staff who work in the SSP discipline area (if applicable)	15 mins each
Inspectors' private discussion	15 mins
Concluding meeting with SSP Supervisor(s)	15 mins

It is the responsibility of the SSP Supervisor to organise the inspection program with the College Accreditation Officer. The inspection timetable must be received by the College at least three weeks prior to the inspection. The lead inspector will review the submitted timetable to ensure it reconciles with the inspection team's objectives.

- The site DEM(s)/DEMENT(s) or SSP Supervisor(s) organise the specific times for individual interviews, within the constraints of the inspection program requirements.
- Interviews with trainees are essential and are the most important component of the inspection. The number of current and previous trainees interviewed should be maximized to ensure that all issues are surfaced. Ideally each trainee should be interviewed separately.
- The accreditation inspection must be of sufficient rigour to allow the preparation of a detailed report. A rigorous inspection will typically require a visit of approximately three hours duration. The inspectors will meet with the SSP Supervisor(s) at the conclusion of the visit to discuss the identified strengths of the SSP, issues of concern and the likely recommendations. Inspectors must not communicate an outcome of the inspection at this time. The outcome of the inspection will be decided by the Accreditation Subcommittee after the inspection report is submitted and considered.

The final inspection program must be provided to all participants a minimum of two weeks ahead of the scheduled inspection date.

The College will work with the site to attempt to minimise inspection costs for both the site and the College.

5. Conduct of an SSP accreditation inspection

5.1 5.1 College Regulations and Policies Governing Conduct

The Inspection Team conducts the site visit in accordance with all relevant College Regulations, Policies and Procedures, and in accordance with the ACEM Guideline AC98 Accreditation Inspector's Manual. Key policies and procedures include but are not limited to:

- ACEM Conflict of Interest Policy (COR139)
- ACEM Code of Conduct Policy (COR235)
- ACEM Discrimination, Bullying and Sexual Harassment Policy (COR133)
- ACEM Privacy Policy (COR200)
- ACEM Policy on Procedural Fairness (COR140)

5.2 5.2 The Accreditation Inspection

The inspectors will review the relevant accreditation documentation and inspect the Special Skills Placement. Within the service, interviews are required with the SSP Supervisor(s), the Director of the Unit, Department or Service, if applicable, and other relevant staff who work within the discipline area of the SSP.

The Chair of the Accreditation Subcommittee may provide specific advice regarding the structure of the inspection program, particularly for an inspection of the type described in 3.1 (c) or (d).

5.3 Accreditation Inspection Findings

At the conclusion of an inspection, the Lead Inspector will write the AC203 SSP Accreditation Report to reflect the findings of the Inspection Team, specifically recording:

- The duration of accreditation for training in the SSP placement;
- The recommended number of trainee positions sustainable within the placement;
- TS4 accreditation if applicable;
- Suggestions/recommendations for addressing accreditation issues or for improving the placement's training program;
- Any requirement for further review.

6. Approval of the inspection team findings

6.1 Approval Process

Following the inspection, the AC203 SSP Accreditation Report from the lead inspector will be forwarded to all members of the Inspection Team for confirmation and endorsement.

Once approved by the Inspection Team, the AC203 SSP Accreditation Report will be submitted to the Accreditation Subcommittee for its review and approval.

The Accreditation Subcommittee may seek clarification or request amendments from the Inspection Team.

The Accreditation Subcommittee will provide an outcome of either 'accredited', 'conditionally accredited' or 'not accredited'. Where the outcome is 'accredited', the report is updated to reflect this outcome.

Where the outcome is 'conditionally accredited with recommendations to be addressed', the process outlined in Section 7 (Post-inspection site review) is initiated.

Should the Accreditation Subcommittee be unable to provide a clear outcome of either 'accredited' or 'not accredited', the report will be forwarded to the Specialist Training and Assessment Committee to determine the outcome.

At the conclusion of this process, the approved AC203 SSP Accreditation Report is sent to the site for factual verification. Once the report is finalised, the site is notified of the outcome.

7. Post-inspection site review

7.1 Site Response to Recommendations

In circumstances where the Accreditation Subcommittee has defined a site as 'Conditionally accredited with recommendations to be met', the site DEM(s)/DEMT(s)/Supervisor(s) must provide a response to all recommendations in the report and submit their response to the accreditation team at accreditation@acem.org.au by the specified date.

7.2 Resolution of accreditation recommendations

The Accreditation Subcommittee will assess the response and determine a finding for all recommendations imposed as follows:

- 1** A finding of 'satisfied and closed' indicates the site has satisfactorily addressed the recommendations and now meets the relevant accreditation requirement. The site is no longer required to report against the recommendation.
- 2** A finding of 'progressing' indicates satisfactory progress is being made against the condition, but further reporting is necessary. A further period (generally of up to six months) will be granted to the site for resolution of the recommendation (once only).
- 3** A condition finding of 'unsatisfactory' will trigger the submission of a report from the Accreditation Subcommittee to the Specialist Training and Assessment Committee (STAC), requesting a determination on the appropriate next steps (see Section 8.3 Management of 'unsatisfactory' recommendation progress).

Exception: Where the 'unsatisfactory' finding relates to a requirement delineating Duration of Advanced Training Time, the Accreditation Subcommittee may determine that the Duration of Advanced Training Time be downgraded. This decision is made by the Accreditation Subcommittee and does not require further approval from STAC (in accordance with the Terms of Reference of the Accreditation Subcommittee).

7.3 Management of 'unsatisfactory' recommendation progress

STAC will review the report and either:

- Determine that the site has addressed the recommendation(s) and overturn the finding of 'unsatisfactory' to 'satisfied and closed' and issue an accreditation outcome (as above); or
- Uphold the finding of 'unsatisfactory' and formally advise the site that STAC is recommending to COE the Removal/Downgrade of Accreditation. The notification will include, but is not limited to:
 - specific details of the type of removal/downgrade;
 - the date the removal/downgrade will be effective from;
 - invitation to show cause within the specified timeline; and
 - invitation to seek assistance from the College to facilitate remediation.

Following the specified timeline, STAC will make its final determination on the Accreditation of the site, taking into consideration any further information that may have arisen through the invitation to the training site to submit further evidence to show cause as to why accreditation should not be removed/downgraded. A decision of the Specialist Training and Assessment Committee to remove or downgrade accreditation will be referred to COE for ratification prior to official notification to the site.

COE may approve the recommendation made by STAC or it may overturn the decision and make an alternative determination requiring the site to take appropriate steps to remedy the recommendation(s) within a specified timeframe.

8. Accreditation outcomes

Steps 7.2 and 7.3 (above) will repeat until all recommendations have been satisfied and closed within a maximum 12 month timeframe and a final accreditation outcome is provided, or, in the event of recommendations that remain rated as unsatisfactory at the conclusion of any STAC initiated activity, the Council of Education has endorsed Removal of Accreditation.

Where Accreditation is approved, the following outcomes will be defined and communicated to the site, together with an Accreditation Certificate:

- Approval of accreditation as an SSP training site.
- The Duration of Advanced Training Time that stipulates the maximum amount of training time a trainee may spend at the site.
- A specified maximum number of trainees the site can support.
- TS4 accreditation if applicable.

9. Maintaining accreditation – accredited SSP sites

9.1 Twelve Month Follow up

The ACEM accreditation team may request, on behalf of the Accreditation Subcommittee, a progress report from any site 12 months after the provision of an accreditation outcome.

9.2 Application for increase to trainee numbers

Sites seeking an increase in the number of trainees at the site, at any point during the 5-year cycle, must make a request to the College via submission of an updated AC173 SSP Application. Adequate evidence to support the training site's assertion that it can support the higher number of trainees must be supplied.

The Accreditation Subcommittee will assess the request and respond within eight weeks of receipt of the application. The Accreditation Subcommittee may require a site visit in order to make a final determination on the application.

9.3 Changing/Adding SSP Supervisor(s)

All SSP supervisors must be approved by the Accreditation Subcommittee. Any changes to Supervisors within the 5-year accreditation cycle must be communicated to, and agreed by, the College. If applicable, refer to the specific SSP guideline with respect to the requirements for an SSP Supervisor in the relevant discipline area.

The site must submit the Curriculum Vitae of the proposed supervisor(s) to the accreditation team (accreditation@acem.org.au) for the subcommittee's consideration.

9.4 Complaints or Grievances

In circumstances where the Accreditation Subcommittee or the accreditation team receives notification of a complaint or grievance from a single person or from a small number of persons regarding a site, the person/s is referred to the College relevant policies regarding complaints management.

Following investigation of the complaint, the College may determine that the issue relates to a site's accreditation and a Focused Investigation is warranted. This determination is made by the Office of the CEO following consideration of the information submitted to the College and of the potential impact on the FACEM Training Program.

9.5 Notification of Issues relating to Accreditation – Focused Investigation

The College may become aware of an issue(s) relating to trainees, the training program or the training environment at an accredited site during the accreditation cycle. The issue(s) may be identified through monitoring of College survey tools, College generated reports, or other substantiated information.

If the College determines the issue(s) to be such that the site may no longer be meeting a SSP Accreditation Requirement(s), a focused investigation will be initiated, whereby the College will conduct an assessment of the performance of the site with respect to the specific SSP Accreditation Requirement(s) identified.

At the commencement of a focused investigation, the site will be asked to respond to the identified issue(s) and provide information that supports its ongoing compliance with the requirement(s). A focused investigation may include a focused site visit.

At the conclusion of a focused investigation, the College will provide a determination as to whether the identified issue(s) is resolved. A determination of an issue not being successfully resolved will result in further recommendation(s) placed on the site, and the process outlined at Section 7 (Post-inspection site review) will be initiated. Failure to have satisfactorily addressed the issue(s) of concern or undertaken the prescribed changes in the proposed time frame may lead to immediate loss or downgrading of accreditation at the next Accreditation Subcommittee meeting.

10. Reconsideration, review and appeal

A site may request a reassessment of an Accreditation Outcome via the process defined in the ACEM COR355 Reconsideration, Review and Appeals Policy.

11. Glossary

Accreditation Report

The Accreditation Report is a comprehensive document detailing the Accreditation Status of a site. It is used to record the findings of the appointed Inspection Team to reflect their assessment against each of the Accreditation Requirements in the relevant SSP Guidelines.

Accreditation Subcommittee

The Accreditation Subcommittee is appointed by the Council of Education to review and consider applications for accreditation as an ACEM accredited SSP training site.

Commendation

A commendation is a notation in an accreditation report that highlights particularly good practice or achievement by a site in respect to accreditation requirements.

Council of Education

The Council of Education is the body appointed by the College to oversee the activities of all educational committees of the College.

Duration of Advanced Training Time

This duration is the maximum length of time at a site / SSP that a trainee's training time will be recognised by the College. If a trainee's training time exceeds the site's accreditation time limit, any excess time will not be counted towards training and the trainee will have to apply for an interruption to training.

Five Year Review Inspection

The five-year review inspection occurs at the end of the accreditation period and is a full and comprehensive assessment of the site to confirm that the SSP continues to meet all the relevant accreditation requirements.

Focused Investigation

A focused investigation is an additional review of a site prompted by receipt of information that suggests the site may not be compliant with accreditation requirements. The investigation may be undertaken by telephone, written correspondence, a site visit (see below) or other methods of communication as appropriate to the circumstances.

Focused Site Visit

An ad hoc site visit to determine the ongoing accreditation of the site with respect to specifically identified issues with site compliance with requirements.

Inspection Program

The list and duration of interviews, site tours, facility inspections and meetings that the site is expected to facilitate for the site inspector(s). The required interviewees will vary from site to site but must include trainees, Unit directors, DEM, DEMA, SSP supervisors and other key staff associated with the delivery of the SSP.

Maximum Number of Trainees

The number of trainees the site is permitted to place in the SSP.

Factors that influence this determination include, but are not limited to:

- Individual trainee casemix exposure
- Available supervisor clinical supervision of the trainee
- Adequate access to the training site's structured education program.

New Accreditation Inspection

A New Accreditation Inspection is the initial inspection of a site that has been granted Provisional Accreditation (a site not previously accredited or a site for which accreditation has lapsed and that has applied for new accreditation.)

Panel of Inspectors

The Panel of Inspectors is a group of FACEMs authorised to conduct inspections and which is appointed according to the Terms of Reference (TOR312).

Provisional Accreditation

Provisional Accreditation grants a site permission to proceed with an SSP while waiting for a site inspection.

Recommendations

Actions required by the site to remedy unmet accreditation requirements. These actions will have associated timelines.

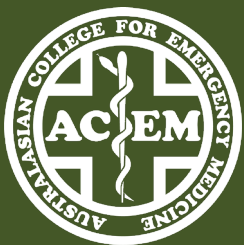
Removal/Downgrade of Accreditation

The withdrawal or downgrading of accreditation due to failure to address accreditation recommendations within prescribed timelines.

Specialist Training and Assessment Committee

The Specialist Training and Assessment Committee (STAC) is a committee appointed by the Council of Education to oversee matters relating to the FACEM Training Program. The Accreditation Subcommittee reports to STAC.

STAC reports directly to the Council of Education.



Australasian College for Emergency Medicine

34 Jeffcott St
West Melbourne VIC 3003
Australia
+61 3 9320 0444
admin@acem.org.au

acem.org.au