



Australasian College for Emergency Medicine

SSP Accreditation

AC95 Process Guide

December 2023

[acem.org.au](https://www.acem.org.au)

Document Review

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

Revision History

Version	Date	Pages revised / Brief Explanation of Revision
1.0	Jun 2012	Approved
7.0	Jul 2018	AC95 split into two separate documents – policy (AC638) and process (AC95) guide
7.1	Oct 2019	Procedure changed for SSP applications from sites that had their accreditation withdrawn by other colleges.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	Apr2020	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.
7.3	Sep 2021	Application timeframe changed to 8 weeks. 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.
7.4	Dec 2023	Added TS4 accreditation. Routine review Process change: <ul style="list-style-type: none">• New SSP applications will be paper based for Provisional Approval• New SSP inspections will be conducted virtually• Subsequent SSP routine re-inspections will be paper based. These will be referred to as a “ Review” instead of “ Inspection”• Trainee will be asked to provide feedback at the end of their term in the SSP. 2 negative feedback will trigger a focused inspection.• 12 month waiting period for reapplication will now also apply to any SSP that has had their accreditation withdrawn (previously the wait period only applies to resubmission of a totally new SSP).• Withdrawal of accreditation will result in show cause step and response from site will be returned to the AC for a recommendation to COE before COE makes its final decision. Aligns with ED process.

Copyright

2023. Australasian College for Emergency Medicine. All rights reserved.

1. Introduction	4
1.1. Purpose and scope	4
1.2. Term definitions	4
1.3. SSP accreditation types	4
1.3.1. Category A	4
1.3.2. Category T	5
1.3.3. Continuous Quality Improvement	5
2. Requesting SSP Accreditation	5
2.1. Requesting Category A accreditation	5
2.1.1. Site Preparation	6
2.1.2. SSP supervisors	6
2.1.3. Learning Portfolios/Logbooks	7
2.1.4. Outcome Provisional Accreditation Assessment	7
2.2. Requesting Category T accreditation	7
2.2.1. SSP Supervisors	8
2.2.2. Learning Portfolios/Logbooks	8
2.2.3. Outcome of assessment	8
3. SSP accreditation site inspections	8
3.1. Nomination of SSP sites for inspections	8
3.2. Accreditation inspection/review confirmation	9
3.3. Composition of the inspection/review teams	9
3.3.1. Accreditation inspection team:	9
3.3.2. Accreditation Reviewer for paper-based assessments:	10
3.4. Inspection program (not applicable to paper-base reviews)	10
4. Conduct of an SSP accreditation inspection/reviews	11
4.1. College regulations and policies governing conduct	11
4.2. The Accreditation inspection	11
4.3. Accreditation inspection findings	11
4.4. Paper-based accreditation review findings	11
5. Approval of inspection/review team findings	12
5.1. Accreditation inspection approval process	12
5.2. Paper-based accreditation review approval process	12
6. Post-inspection or Post-paper-based review	13
6.1. Site response to conditions	13
6.2. Resolution of accreditation conditions	13
6.3. Management of 'unsatisfactory' conditions progress	13
7. Accreditation/Review outcomes	14
8. Maintaining accreditation – accredited SSP sites	14
8.1. 12-months follow up	14
8.2. Application for increase to trainee numbers	14
8.3. Changing/Adding SSP supervisor(s)	15
8.4. Complaints or Grievances	15
9. Notification of Issues relating to Accreditation – Focused Investigation	15
10. Reconsideration, review and appeal	15
11. Glossary	16

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 emergency medicine specialist doctors with the clinical knowledge, skills, and attitudes necessary to function safely and independently. These are described in the FACEM Curriculum.

The intention of Special Skills Placements is to provide focused non-ED training to a competence level equivalent to that described in Training Stage 2.

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. All trainees who complete a placement in the SSP will also be required to complete a survey at the end of that placement, which will be used as part of the routine 5 year review of the SSP.

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, including when there are two or more instances of unfavourable trainee feedback, 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 complementary to the 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 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 that they meet TS4 requirements. Please refer to AC808 TS4 Accreditation Requirements for details.

132 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. Trainees seeking to apply for a placement in an overseas ED, to be certified towards their Core ED requirements in Training Stage One, Two or Three, apply using the Category T application process.

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.

Trainees applying for overseas core ED placements are able to complete WBAs with their nominated overseas onsite supervisor.

Trainees in overseas core ED placements may apply for approval to log paediatric cases up to a maximum of 200 cases towards their Paediatric Emergency Portfolio. However, PER-WBAs can only be completed if the approved placement is in a PED as per regulation G3.7.2.

133 Continuous Quality Improvement

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/review 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/assessment.

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 6 (Post-inspection site review)* of this document.

2. Requesting SSP Accreditation

21 Requesting Category A accreditation

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 Committee, requesting accreditation for the SSP, signed by the site CEO or equivalent.

Any other documents subsequently requested must be submitted to the College at least eight weeks (8) 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 Team for review by the Accreditation Committee.

Confirmation of receipt of the application will be sent to the site within seven (7) 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 cannot reapply for accreditation within 12 months of a withdrawal of accreditation, or a decline of their previous accreditation application.
5. Sites cannot apply for an increase in trainee numbers or an increase in the duration of training time within 12 months of their last inspection/review.

211 Site Preparation

The Director(s) of Emergency Medicine (DEM)/Director(s) of Emergency Medicine Training (DEMT) 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.

212 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 (3) 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.

Notes:

It is the responsibility of the site to ensure there is an approved SSP supervisor for the term. A SSP that is without an approved current supervisor will have its accreditation lapsed immediately.*

** Should accreditation of the site be lapsed, current trainee(s) or those who have already signed contracts prior to the lapsing of accreditation will be able to complete their term and have the time certified towards their FACEM training. No other trainees will be permitted to accrue training time toward their FACEM training at the site unless and until the College approves a successful application under the relevant Accreditation Guidelines. If the application is made, it will be regarded as a new site application involving a full assessment against the prevailing relevant Accreditation Guidelines.*

Supervisor going on leave for more than two (2) weeks must ensure there is a replacement supervisor to cover the leave period. Application for approval of the replacement supervisor must be received by the College at least two (2) weeks prior to the start of the covering role.

213 Education/Learning Portfolios/Logbooks

Trainees undertaking selected Special Skills Placements are strongly recommended to complete an Education/Learning Portfolio for personal reflection. Further details of the purpose of an Education/Learning Portfolio are contained in the Accreditation Policy on Educational Standards for SSPs (AC638).

Logbooks are mandated for some specific Special Skills Placements. Please refer to the relevant guidelines for details.

214 Outcome Provisional Accreditation Assessment

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

The Accreditation Committee considers Category A applications, and an outcome is communicated to the applying site within eight (8) weeks. The outcome will include the approved duration of Training Time and the maximum number of trainees at any one time that may be supported at the site.

Sites granted Provisional Accreditation will be inspected by the College between 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.

22 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.

A Category T application must be submitted for approval a minimum of eight (8) weeks before the commencement of the placement, and no retrospective approval of training time or assessments associated with the application will be considered.

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 Application (as applicable) with supporting documentation.
- A cover letter, addressed to the Chair, Accreditation Committee, 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 (8) 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).

221 Category T Supervisors

Each Category T 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. Supervisors must also comply with any specific criteria related to their role as outlined in the relevant SSP Guideline for their discipline area.

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

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

For overseas Category T applications, a remote FACEM supervisor who is based in Australia / Aotearoa New Zealand for the duration of the placement must also be nominated. The remote supervisor is for the purpose of providing guidance, and they will not be completing any assessment for the placement.

For overseas core ED Category T applications, the nominated supervisor (on-site) is the only person who can assess and complete WBAs for the trainee. Information on the types and completion of WBAs for the FACEM training program will be provided by the College.

23 Education/Learning Portfolios/Logbooks

Trainees undertaking selected Special Skills Placements are strongly recommended to complete an Education/Learning Portfolio for their own personal reflection.

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

Logbooks are mandated for some specific Special Skills Placements. Please refer to the relevant guidelines for details.

24 Outcome of assessment

Once the SSP has been approved, the placement will be entered by the accreditation team staff in the ACEM Member Portal.

For Category T overseas applications, under **regulation G**, applications will be considered for a maximum of 12 months total in approved training including:

- Up to six months approved core-ED training in Training Stages 1, 2 or 3 and
- Up to six months approved non-ED training in Training Stages 1, 2 or 3.

ED training time may count towards general core-ED training time but **not** towards the Major Referral or Non-Major Referral requirement of the FACEM Training Program. The completion of relevant WBAs are recommended.

3. SSP accreditation site inspections

3.1 Nomination of SSP sites for inspections

The ACEM accreditation team staff routinely schedule SSP sites for routine inspections/review 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 2 (Requesting Category A Accreditation)*, above). This inspection will be scheduled between three (3) to six (6) months after the commencement of trainees depending on the length of the trainee's placement.

New inspections will generally be conducted virtually*.

- b) A Five Year Review Inspection is initiated for all SSP sites five (5) 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/review 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.

For ACEM ICM Critical Care and ACEM Anaesthetics Critical Care SSPs that contribute to the core critical care requirement of the FACEM training program, a virtual inspection* will be scheduled.

For all other SSPs, the Five Year Review will generally be paper-based. The site will still be required to submit an application with supporting documents (as per for an inspection) for an assessment by a local (where possible) reviewer.

- c) The College may instigate a focused investigation (which may include a focused site visit) following receipt of information which indicates that a site may no longer meet College requirements. This includes failure to submit ITAs of the trainee's performance during the SSP or following two (2) or more instances of unfavourable trainee feedback.
- d) Accreditation Committee-initiated urgent or unscheduled inspection: the Accreditation Committee 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 below.

* For all SSPs accreditation inspections and reviews, the Accreditation Committee reserves the right to initiate an on-site inspection at any stage should it be deemed necessary.

32 Accreditation inspection/review confirmation

The site SSP supervisor must submit a completed AC173 SSP Application to the accreditation team (accreditation@acem.org.au) a minimum of six (6) weeks ahead of the scheduled inspection/review date.

If the College does not receive the complete documentation at least six weeks prior to the inspection/review date, the inspection may be cancelled, which may impact the accreditation status of the site.

33 Composition of the inspection/review teams

33.1 Accreditation inspection team:

The team will be led by a member of the Panel of Inspectors and may include a specialist in the SSP being inspected.

- The inspection team may comprise of:
- a locally based lead inspector, who is a member of the Panel of Inspectors
- a second inspector/observer, who is a FACEM and who may have specialist skills in the discipline area of the SSP being inspected may also be in attendance.
- An ACEM staff member may also be in attendance.

332 Accreditation Reviewer for paper-based assessments:

- One local (or two where possible) assessor who is a member of the **Panel of Inspectors**, or a FACEM who may have specialist skills in the discipline area of the SSP being reviewed.

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

All members of the Inspection Team and the Reviewer 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.

34 Inspection program (not applicable for paper-based reviews)

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.

<i>Interview/activity</i>	<i>Time frame</i>
Tour of service (if applicable)	30 mins
Inspectors' private pre-inspection discussion (if applicable)	10 mins
SSP supervisor(s)	30-40 mins
Director of Unit / DEM / DEMENT (if applicable)	15 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 (if applicable)	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 (3) 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 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 (3) 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 conditions. Inspectors must not communicate an outcome of the inspection at this time. The outcome of the inspection will be decided by the Accreditation Committee after the inspection report is submitted and considered.

The final inspection program with all changes (if any) finalised must be provided to all participants a minimum of two (2) 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.

4. Conduct of an SSP accreditation inspection/reviews

4.1 College regulations and policies governing conduct

The Inspection Team conducts the site visit/reviews in accordance with all relevant College Regulations, Policies and Procedures. 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)

4.2 The accreditation inspection

The inspectors will review the relevant accreditation documentation and inspect the SSP. 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 Committee 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).

4.3 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 on the following:

- The duration of accreditation for training in the SSP placement;
- The recommended number of trainee positions sustainable within the placement;
- TS4 accreditation if applicable;
- Recommendations (suggestions/comments) relating to the quality assurances or best practices for further improvement of the training program;
- Conditions which are concerns identified at the inspection on unmet accreditation requirements. These are mandated, and sites are required to address them within a six (6) month timeframe. But the Accreditation Committee reserves the right to impose a shorter or longer timeframe if it deems it appropriate.
- Any requirement for further review.

4.4 Paper-based accreditation review findings

At the conclusion of the paper-based review in the routine five year assessment, the Reviewer will recommend the findings specifically on the following:

- The duration of accreditation for training in the SSP placement;
- The recommended number of trainee positions sustainable within the placement;
- TS4 accreditation if applicable;

- Recommendations (suggestions/comments) relating to the quality assurances or best practices for further improvement of the training program;
- Conditions which are concerns identified at the review on unmet accreditation requirements. These are mandated, and sites are required to address them within a six (6) month timeframe. But the Accreditation Committee reserves the right to impose a shorter or longer timeframe if it deems it appropriate.
- Any requirement for further review.

5. Approval of inspection/review team findings

5.1 Accreditation inspection 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 (if applicable).

Once approved by the Inspection team, the AC203 SSP Accreditation Report will be submitted to the Accreditation Committee for its review and approval. The Accreditation Committee may seek clarification or request amendments from the Inspection team. The Accreditation Committee 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 conditions to be addressed', the process outlined in *Section 6 (Post inspection or Post paper-based site review)* is initiated.

Should the Accreditation Committee be unable to provide a clear outcome of either 'accredited' or 'not accredited', the report will be forwarded to the Council of Education 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 formally notified of the outcome.

5.2 Paper-based accreditation review approval process

Following the assessment, the Reviewer will provide an outcome of the review:

- **Full re-accreditation**

The SSP will be reaccredited for another five (5) years.

- **Conditional, Downgrade or Withdrawal of accreditation**

Should the Reviewer recommend conditions be placed on the SSP, or a downgrade or withdrawal of accreditation, the application will be escalated to the Accreditation Committee with all relevant documentation and the Reviewer's reasons for the assessment.

The Accreditation Committee will review the assessment and will provide an outcome of either 'accredited', 'conditionally accredited' or 'not accredited'. Or, alternatively, the Accreditation Committee may initiate an inspection if it deems it necessary before deciding on an outcome. If an inspection is initiated, the process described in section 4.2 will commence.

Where the outcome is 'accredited', the SSP will be reaccredited for another five (5) years.

Where the outcome is 'conditionally accredited with conditions to be addressed', the process outlined in *Section 6 (Post-inspection or Post-paper-based site review)* is initiated.

Where the outcome is 'withdrawal of accreditation', the recommendation will be escalated to the Council of Education (COE).

Should the Accreditation Committee be unable to provide a clear outcome, the assessment will be escalated to the Council of Education (COE) for resolution.

Once there is a clear outcome, the site will be notified.

6. Post-inspection or Post-paper-based review

6.1 Site response to conditions

In circumstances where the Accreditation Committee has defined a site as Conditionally accredited with conditions to be met, the site DEM(s)/DEMT(s)/Supervisor(s) must provide a response to all conditions in the report/notification and submit their response to the accreditation team at accreditation@acem.org.au by the specified due date (normally six (6) months from date of outcome notification).

6.2 Resolution of accreditation conditions

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

1. A finding of 'satisfied and closed' indicates the site has satisfactorily addressed the conditions and now meets the relevant accreditation requirement. The site is no longer required to report against the condition.
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 condition (once only).
3. A condition finding of 'unsatisfactory' will trigger the submission of a report from the Accreditation Committee to the COE, requesting a determination on the appropriate next steps (see *Section 6.3 Management of 'unsatisfactory' condition progress*).

Exception:

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

No trainees will be disadvantaged in by any changes in the accreditation status of a site. Current trainees, and trainees who have signed contracts prior to the change in accreditation status, will be allowed to complete their term as agreed and have it counted towards their FACEM training time.

6.3 Management of 'unsatisfactory' conditions progress

COE will review the report and either:

- Determine that the site has addressed the condition(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 the SSP accreditation is to be removed/downgraded. The notification may include (any or all of the following), but is not limited to:
 - specific details of the type of removal/downgrade;
 - the date the removal/downgrade will be effective from;

- o invitation to show cause within the specified timeline; and
- o invitation to seek assistance from the College to facilitate remediation.

Or,

- COE may make an alternative determination requiring the site to take appropriate steps to remedy the condition within a specified timeframe.

Following the invitation to the training site to submit further evidence to show cause as to why accreditation should not be withdrawn, any further information that is submitted will be forwarded to the Accreditation Committee for review and to provide a recommendation before the COE makes its final determination.

Notes:

1. Sites cannot reapply for accreditation within 12 months of a withdrawal of their accreditation.
2. Sites cannot apply for an upgrade of their accreditation within 12 months of a downgrade.
3. In circumstances where there is a change in accreditation status in the final outcome, the College reserves the right to act swiftly to address substantiated immediate threats to an individual trainee's safety. This includes, but is not limited to, the immediate withdrawal of trainees from the site. The trainees will not be disadvantaged, and the situation will be assessed, and assistance will be offered on a case-by-case basis.

7. Accreditation Inspection/Review outcomes

Steps 6.2 and 6.3 (above) will repeat until all conditions have been satisfied and closed within a maximum 12 month timeframe and a final accreditation outcome is provided, or, in the event of conditions that remain rated as unsatisfactory at the conclusion of any initiated activity, COE 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 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.

8. Maintaining accreditation – accredited SSP sites

8.1 12-months follow up

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

8.2 Application for increase to trainee numbers

Sites seeking an increase in the number of trainees at the site, at any point during the five-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 Committee will assess the request and respond within eight weeks of receipt of the application. The Accreditation Committee may require an inspection in order to make a final determination on the application.

Sites cannot apply for an increase in trainee numbers or an increase in the duration of training time within 12 months of their last inspection/review.

8.3 Changing/Adding SSP supervisor(s)

All SSP supervisors must be approved by the Accreditation Committee. Any changes to supervisors within the five 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 Committee's consideration.

8.4 Complaints or Grievances

In circumstances where the Accreditation Committee 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. 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 condition(s) placed on the site, and the process outlined at *Section 6 (Post inspection and Post-paper-based 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.

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 Committee

The Accreditation Committee (AC) is appointed by the Council of Education to review and consider applications for accreditation as an ACEM accredited SSP training site and all Category T applications.

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.

Conditions

Actions required by the site to remedy unmet accreditation requirements. These actions will have an associated timeline (generally six (6) months from notification).

Council of Education

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

Duration of 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.

The review can be conducted virtually, on-site or paper-based.

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 inspection to determine the ongoing accreditation of the site with respect to specifically identified issues with site compliance with requirements. The inspection may be conducted on-site or virtually.

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.) The inspection can be conducted on-site or virtually.

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

A recommendation or suggestion for improvement may be provided where College has identified quality initiatives that a site is encouraged to consider as part of its quality improvement processes. They relate to matters that the College considers best-practice, and which may enhance the training provided at the site. Recommendations/suggestions for improvement are not mandatory and have no due dates.

Removal/Downgrade of Accreditation

The withdrawal or downgrading of accreditation due to failure to address accreditation conditions 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 including the application for special consideration to apply for overseas TS4 Category T.

STAC reports directly to the Council of Education.



Australasian College for Emergency Medicine

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

acem.org.au