

Standards for the Accreditation of Training Settings (2010) Basic Physician Training – Adult Medicine

RACP Standards	Minimum Requirements
1. Supervision	
1.1 There is a designated supervisor for each Trainee.	1.1.1 There is a Director of Physician Education (DPE) appointed in a tertiary/level 3 training setting, with time protected for the role.
	1.1.2 For every 3 to 5 trainees in the PREP program, a minimum of one consultant is available to act as Education Supervisor.
	1.1.3 In each rotation there will be a Ward Service Consultant(s) (e.g. term supervisors)
1.2 Trainees have access to supervision, with regular meetings.	1.2.1 Trainees are supervised in ambulatory/outpatient clinic settings. Supervision should be commensurate with trainees' level of experience. All new and complex review cases must be discussed with a consultant, preferably at the time of patient assessment. Alternatively, discussion is conducted at weekly review meetings.
	1.2.2 Trainees have a minimum of phone access to supervision when working out of hours.
	1.2.3 Trainees must meet with Education Supervisor/ Professional Development Advisor or DPE at minimum of three times yearly.
1.3 Supervisors are RACP approved and meet any other specialty specific requirements regarding qualifications for supervisors.	1.3.1 DPEs and Education Supervisors must advise the College of their supervisory roles.
	1.3.2 Education Supervisors must attend training workshops in educational requirements.
1.4 Supervisors are supported by the setting or network to be given the time and resources to meet Faculty Supervision requirements and criteria on supervision.	1.4.1 All staff at the training setting acting in a supervisory capacity must have dedicated time to fulfil these roles.
	1.4.2 The training setting provides administrative assistance to support the DPE and Education Supervisor.
2. Facilities and Infrastructure	
2.1 There are appropriate facilities and services for the type of work being undertaken.	2.1.1 For accreditation as a Tertiary/Level 3 Training Setting, the setting must have:
	• A minimum of 9 subspecialty departments, each headed by a physician with a substantial appointment responsible for supervision of trainees.
	- To have a term in these departments counted towards basic training

2 2 Fach trainee has a designated workspace	 subspecialty requirements, a trainee will need to spend a minimum of 50% of their time in the subspecialty in at least two of the following three areas: acute, longitudinal/ongoing and ambulatory/outpatient care Facilities to host the Clinical Examination An Intensive Care Unit or High Dependency Unit Access to General Medicine available on setting or through rotation to another setting Access to facilities for acute care and/or ambulatory/outpatient care For accreditation as a Level 2 or Level 1 Training Setting, refer to the relevant criteria. 2.1.2 For accreditation to provide medical subspecialty terms in a non-parent/non-tertiary setting there must be a well-established department for the subspecialty.
2.2 Each trainee has a designated workspace including a desk, telephone and IT facilities.	2.2.1 Trainees have access to a designated workspace with standard administration facilities, including IT access, which are located within the department or available elsewhere within the setting.
2.3 There are facilities and equipment to support educational activities, such as study areas and tutorial rooms.	2.3.1 Trainees must have access to readily available study/tutorial rooms with appropriate teaching aides and other educational facilities. This must include distance education facilities as a minimum.
3. Profile of Work	
3.1 The setting shall provide a suitable workload and appropriate range of work.	3.1.1 Trainees have a suitable workload and appropriate range of work determined by the Basic Training Curriculum and the PREP Basic Training Program Requirement Handbook for Adult Medicine (available from the RACP website).
	3.1.2 For accreditation to provide General Medicine terms there must be a General Medicine department or unit. Within the term there must be available acute, longitudinal/ongoing and ambulatory/outpatient clinic exposure. Trainees must have a role in assessment plus a role in the longitudinal/ongoing care of their patients who are admitted through the Emergency Department to the Intensive Care Unit of High Dependency Unit. Trainees must attend (on average) at least one ambulatory/outpatient clinic per week.
3.2 Trainees participate in quality and safety activities.	3.2.1 Formal consultant-led clinical handover following night duty must occur at minimum 5 days of the week and involve units receiving patients overnight.

3.3 There is the capacity for project work	 3.2.2 Trainees are exposed to an environment that fosters and supports quality assurance meetings where possible. 3.2.3 All trainees must complete Advanced Life Support training of a minimum 3 hours duration (as part of a continuous block) by the end of their first term as a Basic Trainee. If such training is unavailable within the hospital, trainees should be supported to attend external training. 3.3.1 Trainees have access to activities such as 	
(including research) and ongoing training.	audits, clinical trials and research.	
4. Teaching and Learning		
4.1 There is an established training program or educational activities such as multidisciplinary meetings, academic meetings, rounds and journal clubs.	4.1.1 There is a training program and educational activities related to the Basic Training Curriculum.	
	4.1.2 There is protected time and resources provided to complete educational activities.	
	4.1.3 A minimum of 3 hours of formal teaching per week (this may include video/teleconferencing).	
	4.1.4 Trainees attend the formal teaching sessions and other training sessions as provided by the setting. Service commitment does not prevent or excuse trainee attendance at these sessions.	
	4.1.5 Trainees must complete the requirements of the PREP program.	
4.2 There are opportunities to attend external education activities as required.	4.2.1 Opportunities exist for trainees to access the RACP lecture series or a comparable series electronically, in which the content is aligned with the Basic Training Curriculum.	
4.3 There is access to sources of information, both physical and online, including a medical library or e-library facility appropriately equipped for physician training.	4.3.1 The parent/tertiary setting or network must provide access to a medical library (either by hard copy or electronically) with current books and access to online content.	
5. Support Services for Trainees		
5.1 There are workplace policies covering the safety and well-being of trainees.	5.1.1 The setting meets all legislative requirements with regards to policies in WH&S, Infection Control and Human Resources.	
5.2 There is a formal induction/orientation process for trainees.	5.2.1 DPEs and Education Supervisors provide induction/orientation into training for trainees within the first week of commencement of training at the setting.	