



RACP

Specialists. Together

EDUCATE ADVOCATE INNOVATE

Training Committee in Palliative Medicine

Criteria & Application Process for Accreditation of Paediatric Palliative Medicine Training Positions

Background

Palliative Medicine has been a specialty since 2001 in New Zealand and 2005 in Australia. The Australian Medical Council requires the RACP to support and document an appropriate training program for the specialty, which it does through the Training Committee (TC) in Palliative Medicine. Site Accreditation of service and education infrastructure is one part of the process of standards documentation.

Application process

Training sites must apply for accreditation, which depends on fulfillment of the requirements and completing the process of accreditation. Accreditation of training will not be granted to trainees if the site is not accredited.

Current training sites wishing to increase the number of accredited training positions must also complete the accreditation documentation and process. Sites with more than one trainee must ensure that the requirements for supervision and clinical experience are met for each concurrent trainee.

Step 1

Download and complete the application form for Paediatric Palliative Care Service accreditation from the RACP website. Once the forms are completed, they should be returned to the Education Officer for Palliative Medicine at the RACP.

Step 2

The application form will be reviewed by the member of the TC with the portfolio of Site Accreditation. Any deficiencies in the information will be communicated to the site involved.

Step 3

When all the information provided is sufficient, the TC will acknowledge the application by letter and invite the director of the service to communicate with the Education Officer to arrange a time for a teleconference and/or a site accreditation visit.

Step 4

Representatives of the TC will conduct a visit or teleconference. The accreditation team will need to meet or talk with:

- The Director of the Paediatric Palliative Care Service
- Staff Specialists of the Palliative Care Service
- Any current registrars of the Paediatric Palliative Care Service
- The Senior Palliative Care Nurse of the Service
- The Director of the Program that oversees Palliative Care/or the Director of Medical/Clinical Services of the hospital.

It is expected that all interviews would be completed in one half-day period.

The accreditation team may provide informal feedback to the Director of Palliative Care Service at the end of the interviews.

Step 5

A draft report will be prepared by the site accreditation team and will be sent to the Director of the Palliative Care Service for feedback. The final report will be presented to the TC for ratification. After ratification, the report will be forwarded to the Director of the Palliative Care Service. The report will also indicate when the next accreditation will take place, which is usually 5 years' time. Information about the accreditation of the site will be uploaded onto the RACP website.

Terms of Training

Paediatric Palliative Medicine consists of 24 months core training of which 12-18 months will be with a Specialist Paediatric Palliative Care Service (defined below). It is expected that positions in Paediatric Palliative Medicine core training will provide exposure to a mixture of in-patient/hospital consultancy and out-patient/community paediatric palliative care.

A further 6-12 months of the core training will be spent in an accredited adult palliative care service (either inpatient, hospital consultancy or community or a mix thereof). An additional "core-other" 6 month term is to be spent in a relevant paediatric specialty as detailed in the training manual. The final 6 months of non-core training is to be spent in other specialty, research or academic study. The requirements for electives will vary according to the submission, but will be similar.

For the purposes of this document, a Specialist Paediatric Palliative Care Service is defined as follows:

- a. The Service works predominantly in paediatric palliative care;
- b. There is a dedicated clinical team which is multidisciplinary (staff from at least three disciplines are employed on a permanent basis by the Service); and
- c. One or more of the medical specialist/s in the Service qualify as primary supervisors as detailed in Section A below.

Types of Accreditation

Core Advanced Training in Paediatric Palliative Medicine

Training sites will be accredited as "core" or "elective" training sites. Training sites that are able to fulfill all accreditation criteria will be accredited as "core" training sites.

Conditional Accreditation

Conditional accreditation may be granted to sites that are waiting to be reviewed and accredited by the TC through the normal accreditation process. This is to ensure that existing trainees at the site are not disadvantaged. Sites that are accepting trainees for the first time will be prioritised for a site visit during the year of that first year of training.

Clinical Foundation of Palliative Medicine Trainees

Sites must be specifically accredited for Clinical Foundation training. Sites wishing to take only Clinical Foundation of Palliative Medicine Trainees still need to apply for accreditation, but a teleconference or site visit may not be required. The site will be accredited for a maximum of five years.

Accreditation of Overseas Advanced Training Positions

Training obtained overseas is acceptable, provided the proposed training position meets accreditation criteria. Overseas training positions will be assessed and approved based on information provided by the trainee's supervisor and/or Head of Department in the form of a letter and completion of application forms for site accreditation. The supervisor will also receive the RACP handbook *Requirements for Physicians Training or Chapter Training Manual* includes the requirements of advanced training in palliative care for information. A site visit will not normally be considered.

Accreditation Cycle

Sites accredited for advanced training are reviewed every five years. The TC may also undertake to review a site at its discretion before the end of the cycle.

Sites accredited only for clinical Foundation training will need to be renewed every two years.

Appeals Process

Details of the College's Reconsideration, Review and Appeal's Process By-Law can be found at www.racp.edu.au/page/education-policies.

Accreditation Criteria

RACP Standards	Minimum Requirements
1. Supervision	
<p>1.1 There is a designated supervisor for each trainee.</p>	<p>1.1.1 One <u>on-site primary supervisor</u> able to provide direct supervision to the trainee and who holds FRACP or FACHPM and who is actively practicing in paediatric palliative medicine at a minimum of 0.5 FTE AND who has either:</p> <ol style="list-style-type: none"> a. Completed training under the RACP in Paediatric Palliative Medicine; or b. Began working as a medical specialist in Paediatric Palliative Medicine in Australasia prior to January 1, 2005. <p>1.1.2 A <u>co-supervisor</u> who may be:</p> <ol style="list-style-type: none"> a. A <u>remote supervisor</u> who would, except for being off-site, qualify as a primary supervisor as above OR; b. Another <u>local supervisor</u> holding either: <ol style="list-style-type: none"> i. FRACP and/or FACHPM in palliative medicine working in a geographically proximate adult palliative care service, or; ii. FRACP, with an interest in Paediatric Palliative care, working in the same health care facility as the Advanced Training Position and who has a nominated secondary supervisor with FRACP and/or FACHPM. <p>1.1.3 The total of the primary and the co-supervisors FTE of practice shall be equal to or greater than 1.0 FTE.</p>
<p>1.2 Trainees have access to supervision, with regular meetings.</p>	<p>1.2.1 Supervision of annual project to be provided by the staff in the Department or other competent person.</p>
<p>1.3 Supervisors are RACP approved and meet any other specialty specific requirements regarding qualifications for supervisors.</p>	<p>1.3.1 Supervisors are trained in the supervision of advanced trainees in Palliative Medicine.</p>
<p>1.4 Supervisors are supported by the setting or network to be given the time and resources to meet RACP Supervision requirements and criteria on supervision.</p>	<p>1.4.1 Consultants have a proportion of non-clinical administration time, or other protected time, part of which can be directed to supervision of Trainees.</p>
2. Facilities and Infrastructure	
<p>2.1 There are appropriate facilities and services for the type of work being undertaken.</p>	<p>2.1.1 Access to services such as:</p> <ul style="list-style-type: none"> • Medical oncology/paediatric oncology • Haematology • Radiation oncology

RACP Standards	Minimum Requirements
	<ul style="list-style-type: none"> • <i>Adult or Paediatric pain service</i> • <i>Anaesthetic service.</i> <p>2.1.2 <i>There is an Emergency Department and General Medicine Unit for hospital consultative settings.</i></p>
<p>2.2 <i>Trainee has a designated workspace including a desk, telephone and IT facilities.</i></p>	<p>2.2.1 <i>The Trainee has a designated workspace including a desk, telephone and IT facilities.</i></p>
<p>2.3 <i>There are facilities and equipment to support educational activities, such as study areas and tutorial rooms.</i></p>	<p>2.3.1 <i>There are meeting rooms and other facilities available for interdisciplinary palliative care clinical meetings and other educational meetings.</i></p>
3. Profile of Work	
<p>3.1 <i>The setting shall provide a suitable workload and appropriate range of work.</i></p>	<p>3.1.1 <i>The trainee shall have a suitable workload and appropriate range of work as determined by the Palliative Medicine Advanced Training Curriculum and Palliative Medicine Advanced Training Program Requirements Handbook (available from the RACP website).</i></p> <p>3.1.2 <i>Each training position accreditation application must be able to demonstrate:</i></p> <ul style="list-style-type: none"> • <i>A minimum of 50 paediatric palliative care patients in the 12 months prior to accreditation who had received multidisciplinary assessment and input from the service; AND</i> • <i>A minimum of 15 deaths of patients during the same period who were enrolled with the service who had received multi-disciplinary assessment and input from the Service.</i>
<p>3.2 <i>Trainees participate in quality and safety activities.</i></p>	<p>3.2.1 <i>Opportunities to undertake research including trials, audits, QA activities, and/or continuing professional development during advanced training.</i></p>
<p>3.3 <i>There is the capacity for project work (including research) and ongoing training.</i></p>	<p>3.3.1 <i>The Trainees are encouraged to be involved in one project annually. Supervision is to be provided by the staff in the Department and other competent person.</i></p>
4. Teaching and Learning	
<p>4.1 <i>There is an established training program or educational activities such as multidisciplinary meetings, academic meetings, rounds, and journal clubs.</i></p>	<p>4.1.1 <i>At least weekly interdisciplinary palliative care clinical meetings. The Training Position shall include provision of an appropriate academic environment for advanced training, through direct teaching, journal clubs, or other activities that can be documented.</i></p>
<p>4.2 <i>There are opportunities to attend external education activities as required.</i></p>	<p>4.2.1 <i>Peer-review meetings and correlative imaging meetings.</i></p> <p>4.2.2 <i>The Trainee shall be supported generally with time to attend and present at scientific meetings of local, national and international societies.</i></p>

RACP Standards	Minimum Requirements
<p>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.</p>	<p>4.3.1 <i>A medical library including access to general and palliative care specific journals.</i></p>
<p>5. Trainee Safety and Support Services</p>	
<p>5.1 There are workplace policies covering the safety and well-being of Trainees.</p>	<p>5.1.1 <i>There are a range of policies dealing with health and safety of Trainees, and Trainees are aware of these policies.</i></p> <p>5.1.2 <i>There are policies and procedures for identifying Trainees in Difficulty.</i></p>
<p>5.2 There is a formal induction/orientation process for Trainees.</p>	<p>5.2.1 <i>Supervisors or designees provide orientation/induction training in safety procedures at the setting to new Trainees within the first week of commencement of training.</i></p>