



Standards for the Accreditation of Rehabilitation Medicine Training Settings

RACP Standards	Minimum Requirements
Supervision	
1.1 There is a designated supervisor for each Trainee.	1.1.1 When the setting has more than one appropriate consultant, one must be nominated by the trainee as the primary Training Supervisor.
1.2 Trainees have access to supervision, with regular meetings.	1.2.1 For an inpatient setting, the supervising Fellow(s) must be present "on site" for a minimum of 50% of the working week (at least 17.5 hours) to provide clinical supervision and be available for advice by telephone during the remaining period of the week.
	1.2.2 The nominated Clinical Supervisor must work directly with the trainee and be present to observe direct patient care.
	1.2.3 Supervisors and other trainers have allocated time each week to spend with trainees.
1.3 Supervisors are RACP approved and meet any other specialty specific requirements regarding qualifications for supervisors.	1.3.1 A practising Rehabilitation Medicine Physician who is a Fellow of the AFRM and who is accredited by the Faculty to act as a Training Supervisor for Training in Rehabilitation Medicine shall be available to act as a supervisor except under special circumstances when the AFRM Education Committee may agree to the provision of such supervision by a Specialist who is not a Fellow of the Faculty.
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 The setting acknowledges time spent by consultants acting as Training Supervisors / trainers and provides an environment in which consultations with the Supervisors occur regularly each week.
Facilities and Infrastructure	
2.1 There are appropriate facilities and services for the type of work being undertaken.	2.1.1 There are appropriate facilities and services for the type of work being undertaken.
	2.1.2 Access to video and telemedicine facilities for trainees is available or within a reasonable distance.
2.2 Each trainee has a designated workspace including a desk, telephone and IT facilities.	2.2.1 Personalised work email addresses are provided for every trainee.
	2.2.2 Access to office facilities such as separate office space/share office space and computer and internet/intranet access should be available.
2.3 There are facilities and equipment to support educational activities, such as study areas and tutorial rooms.	2.3.1 There are facilities and equipment to support educational activities, such as study areas and tutorial rooms.

Profile of Work			
3.1 The setting shall provide a suitable workload and appropriate range of work.	3.1.1	The training program at the setting must provide appropriate experience in medical assessment and management.	
	3.1.2	The manager of the workplace and the supervisor are aware that the employee is undertaking advanced training in Rehabilitation Medicine and ensure a balance of service delivery and training in the trainee's weekly activities.	
	3.1.3	The normal expectation is that a trainee in a purely inpatient position shall manage 10-20 rehabilitation beds. The recommended maximum of solo care beds is 20 ("solo" means not supported by junior staff).	
3.2 Trainees participate in quality and safety activities.	3.2.1	The site shall involve the trainee in quality assurance activities.	
3.3 There is the capacity for project work (including research) and ongoing training.	3.3.1	If there is not a clinical or basic research program to which the trainee can contribute in significant degree to obtain experience in research methodology, alternative access to such research opportunities should be available.	
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	The setting will provide formal training including a lecture program, journal club, grand rounds, seminars, case presentations, research meetings etc. A university affiliation is desirable.	
	4.1.2	The setting will provide the trainee with the opportunity to teach junior colleagues, undergraduates and nursing and allied health staff.	
	4.1.1	 A minimum of one (1) hour of formal face-to-face teaching is provided on-site each week. These are necessary to meet this criterion: a) #Teaching sessions directed to the Rehabilitation Medicine trainee(s) only, rather than the Junior Medical Officers b) #Teaching sessions lead by Rehabilitation Medicine Consultants, though some teaching by allied health, or consultants in other specialties is not excluded c) #Teaching sessions can be in the formats of a small group tutorial (thus not strictly 1:1) or topic discussion, not necessarily a lecture #Teaching sessions are usually distinct from incidental teaching which can occur during ward rounds, or in outpatient departments during clinic. 	
4.2 There are opportunities to attend external education activities as required.	4.2.1	The setting will provide the trainee with the opportunity to attend educational activities provided by the AFRM in each state, (state based or by national video conference Bi-National Training Program).	
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 setting will provide access to a medical library with current and relevant text books, journals and computer retrieval and search facilities (hard copy or electronic).	
	4.3.2	Literature search training is provided to Faculty trainees on request.	

Support Services for Trainees		
5.1 There are workplace policies covering the safety and well-being of trainees.	5.1.1 Trainees are aware of and have access to occupational health and safety resources.	
5.2 There is a formal induction/orientation process for trainees.	5.2.1 Within two weeks of commencement the trainee is provided with an orientation to the organisation and to the training site in particular overseen by the program director.	