



## Standards for the Accreditation of Rehabilitation Medicine Training Settings

RACP Standards	Minimum Requirements
<b>Supervision</b>	
1.1 <i>There is a designated supervisor for each Trainee.</i>	1.1.1 <i>When the setting has more than one appropriate consultant, one must be nominated by the trainee as the primary Training Supervisor.</i>
1.2 <b>Trainees have access to supervision, with regular meetings.</b>	1.2.1 <i>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.</i>  1.2.2 <i>The nominated Clinical Supervisor must work directly with the trainee and be present to observe direct patient care.</i>  1.2.3 <i>Supervisors and other trainers have allocated time each week to spend with trainees.</i>
1.3 <b>Supervisors are RACP approved and meet any other specialty specific requirements regarding qualifications for supervisors.</b>	1.3.1 <i>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.</i>
1.4 <b>Supervisors are supported by the setting or network to be given the time and resources to meet Faculty Supervision requirements and criteria on supervision.</b>	1.4.1 <i>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.</i>
<b>Facilities and Infrastructure</b>	
2.1 <b>There are appropriate facilities and services for the type of work being undertaken.</b>	2.1.1 <i>There are appropriate facilities and services for the type of work being undertaken.</i>  2.1.2 <i>Access to video and telemedicine facilities for trainees is available or within a reasonable distance.</i>
2.2 <b>Each trainee has a designated workspace including a desk, telephone and IT facilities.</b>	2.2.1 <i>Personalised work email addresses are provided for every trainee.</i>  2.2.2 <i>Access to office facilities such as separate office space/share office space and computer and internet/intranet access should be available.</i>
2.3 <b>There are facilities and equipment to support educational activities, such as study areas and tutorial rooms.</b>	2.3.1 <i>There are facilities and equipment to support educational activities, such as study areas and tutorial rooms.</i>

<b>Profile of Work</b>	
<b>3.1 The setting shall provide a suitable workload and appropriate range of work.</b>	<p><b>3.1.1</b> <i>The training program at the setting must provide appropriate experience in medical assessment and management.</i></p> <p><b>3.1.2</b> <i>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.</i></p> <p><b>3.1.3</b> <i>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).</i></p>
<b>3.2 Trainees participate in quality and safety activities.</b>	<b>3.2.1</b> <i>The site shall involve the trainee in quality assurance activities.</i>
<b>3.3 There is the capacity for project work (including research) and ongoing training.</b>	<b>3.3.1</b> <i>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.</i>
<b>Teaching and Learning</b>	
<b>4.1 There is an established training program or educational activities such as multidisciplinary meetings, academic meetings, rounds and journal clubs.</b>	<p><b>4.1.1</b> <i>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.</i></p> <p><b>4.1.2</b> <i>The setting will provide the trainee with the opportunity to teach junior colleagues, undergraduates and nursing and allied health staff.</i></p> <p><b>4.1.3</b> <i>A minimum of one (1) hour of formal face-to-face teaching is provided on-site each week.</i></p>
<b>4.2 There are opportunities to attend external education activities as required.</b>	<b>4.2.1</b> <i>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).</i>
<b>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.</b>	<p><b>4.3.1</b> <i>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).</i></p> <p><b>4.3.2</b> <i>Literature search training is provided to Faculty trainees on request.</i></p>
<b>Support Services for Trainees</b>	
<b>5.1 There are workplace policies covering the safety and well-being of trainees.</b>	<b>5.1.1</b> <i>Trainees are aware of and have access to occupational health and safety resources.</i>
<b>5.2 There is a formal induction/orientation process for trainees.</b>	<b>5.2.1</b> <i>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.</i>