



AMC Findings - Royal Australasian College of Surgeons 2022 Monitoring submission

College Name: Royal Australasian College of Surgeons

Date of last AMC accreditation decision: 2021

Periodic reports since last AMC assessment: Nil

Next accreditation decision due: by 31 March 2024

Explanation of findings

Under the Health Practitioner Regulation National Law, the AMC can accredit a program of study if it is reasonably satisfied that: (a) the program of study, and the education provider that provides the program of study, meet the accreditation standard; or (b) the program of study, and the education provider that provides the program of study, substantially meet the accreditation standard and the imposition of conditions will ensure the program meets the standard within a reasonable time.

The AMC uses the terminology of the National Law (meet/substantially meet) in making decisions about accreditation programs and providers.

Providers must satisfy conditions on accreditation in order to meet the relevant accreditation standard. The AMC provides feedback on the conditions using the following:

Unsatisfactory	The College may not meet the related accreditation standard and AMC should investigate further.
Not Progressing	No progress or overly slow progress given the timeframe on the condition.
Progressing	Indicates satisfactory progress against the condition, with further reporting necessary.
Satisfied	The College has satisfied all requirements and can cease reporting against the condition. Condition is marked as closed.

Please note that this response contains:

Part A	<i>Summary of the overall findings relating to the College's 2022 monitoring submission.</i>
Part B	<i>Detailed responses to information reported against the standards, including feedback to support further reporting on remaining conditions on accreditation.</i>
Part C	<i>Report on Quality Improvement Recommendations</i>

Part A – Summary of the overall findings relating to the College’s 2022 monitoring submission.

Overall Summary of Royal Australasian College of Surgeons 2022 monitoring submission
<p>The College and the Specialty Societies are thanked for the clarity and relevance of the material submitted.</p> <p>Despite the many challenges of COVID-19, the College, in partnership with the Specialty Societies, continues to deliver high quality training and CPD and is moving forward on strategic developments.</p> <p>This submission shows a renewed focus and considerable momentum on most of the remaining conditions. Several important initiatives will be approved in October 2022.</p> <p>Taken as a whole, there are positive signs that the College and the Specialty Societies are working together more closely to ensure all 13 curricula meet AMC standards. This is especially so in Standards 3 and 6 which each have 5 remaining conditions. Examples include the development of a curriculum mapping tool, greater sharing of college educational resources, the adoption of a Progress Matrix, and the new draft Monitoring and Evaluation framework.</p> <p>The College has identified the need to ensure credentialling of those using robotic surgery and has a plan to address this.</p> <p>The AMC tracking matrix table was an initiative suggested by the 2021 AMC assessment team as a tool to assist the College, the stakeholders and AMC to determine how each program is progressing individually and collectively. For more substantive submissions, such the accreditation extension submission in 2023 it is suggested that the minimum amount of relevant material be included in each cell in the table, with indications of/links to where the evidence may be found. Ideally the content is moderated so it is easily comparable across specialties. While the matrix currently focusses on the meeting of Conditions, it may also be of use to keep track of each program against the Standards.</p> <p>Standard 6 overall moves from Not Met to Substantially Met.</p> <p>Overall, the standards remain Substantially Met.</p>

Standard	2021 Findings	2022 Findings
Overall	Substantially Met	Substantially Met
1. The context of education and training	Substantially Met	Substantially Met
2. The outcomes of specialist training and education	Substantially Met	Substantially Met
3. The specialist medical training and education framework	Substantially Met	Substantially Met
4. Teaching and learning methods	Substantially Met	Substantially Met
5. Assessment of learning	Met	Met

Standard	2021 Findings	2022 Findings
6. Monitoring and evaluation	Not Met	Substantially Met
7. Issues relating to trainees	Substantially Met	Substantially Met
8. Implementing the training program – delivery of educational resources	Substantially Met	Substantially Met
9. Continuing professional development, further training and remediation	Met	Met
10. Assessment of specialist international medical graduates	Substantially Met	Substantially Met

Part B - Detailed feedback on standards, including remaining conditions

Standard 1: The context of training and education

Areas covered by this standard: governance of the college; program management; reconsideration, review and appeals processes; educational expertise and exchange; educational resources; interaction with the health sector; continuous renewal.

1 Significant developments underway or planned that relate to the accreditation standards

AMC commentary – significant developments against Standard 1
<p>The College has undergone a restructure of the Executive Leadership Team. With the departure of the previous Executive General Manager (EGM) of Education, two new EGM roles took its place and appointments were made in early 2022.</p> <p>A high staff turnover has been reported by the College as a direct effect of the COVID-19 pandemic.</p> <p>All college boards, except Council, are being renamed to “Committee”.</p>

2 Activity against conditions

Condition 1		To be met by: 2022		
Demonstrate within the College governance structure that accountability is shared by RACS Council, the Education Board, Board of Surgical Education and Training, and Specialty Training Boards to enable each of the 13 training programs meet AMC standards and conditions. Evidence of alignment and robust reporting mechanisms, between the College and specialty training boards in developing education and training policies consistently, is needed. (Standard 1.2)				
Finding	Unsatisfactory	Not progressing	Progressing	Satisfied
			X	
AMC commentary				
<p>There is evidence of greater shared accountability in the Colleges education and training in momentum on several levels, notably:</p> <ol style="list-style-type: none"> College service agreements – most to be updated at the end of 2022 <p><i>“... includes the principle that the Societies and the College will collaborate and work with each other, ensuring that the processes and decisions affecting the conduct of the Specialty Training Program will be fair, transparent and have appropriate accountability, recognising obligations to external stakeholders, including the AMC, the Medical Board Australia (MBA) and the Australian Competition and Consumer Commission. It also sets out that the Societies and College will demonstrate mutual respect and acknowledge the valuable contribution of each other in the development, improvement, and delivery of the Specialty Training Program.”</i></p> <ol style="list-style-type: none"> Defining timelines for consultation, and use of a project tracker Use of an AMC tracking matrix: this table was an initiative suggested by the AMC panel in 2021, to assist the College, the stakeholders and AMC to determine how each program is progressing. Provision of professional services to the Specialty Training Committees/Boards to support the development, revision, and review of curricula to ensure education best practice is applied 				

and to meet AMC standards. At present CTS and paediatric surgery are undergoing significant curriculum review, supported by the College.

5. Regular training manager meetings (fortnightly)
6. Shared development of a Professional Skills Curriculum (draft)

Further, overall progress under the curriculum and monitoring and evaluation standards show that the College and the Societies are working together effectively on these issues. The Board of Surgical Education and Training (BSET) has been renamed to Committee of Surgical Education and Training (CSET). The previous Executive General Manager (EGM) of Education role was split into two to reflect the breadth and complexity of the Education portfolio. Two new EGMs were appointed in early 2022: EGM Education Development and Delivery; and EGM Education Partnerships.

Once all service agreements are finalised the condition can be satisfied.

Condition 2		To be met by: 2023		
Provide evidence of effective implementation, monitoring and evaluation of the:				
<ol style="list-style-type: none"> i. Reconciliation Action Plan ii. Building Respect, Improving Patient Safety (BRIPS) Action Plan iii. Diversity and Inclusion Plan iv. Rural Health Equity Strategic Action Plan (Standard 1.6 and 1.7) 				
Finding	Unsatisfactory	Not progressing	Progressing	Satisfied
			X	
AMC commentary				
<p>The College is commended on its ongoing commitment to an exemplary and ambitious suite of policies aiming to enhance equity. Engagement with stakeholders continues.</p> <p>A strategy that should be specifically commended is Te Rautaki Māori (Māori Health Strategy & Action Plan). Another workforce equity strategy is in draft form, the Aotearoa New Zealand Regional and Rural Health Equity Strategy.</p> <p>The College is continuing with an extensive implementation strategy with some specific evaluations out to 10 years post-implementation, as well as more systemic monitoring planned as part of the new Monitoring and Evaluation strategy. The next stages of the plans are informed by evaluative feedback.</p> <p>As this extensive body of work (in all four areas) is not yet fully implemented at all levels of the College, this condition cannot yet be satisfied.</p>				

3 Statistics and annual updates

AMC commentary – statistics and annual updates against Standard 1
<p>In 2021, there were 29 selection reconsiderations with 23 upheld, and four assessment reconsiderations with two upheld. There were seven requests for review with six upheld. One request for appeal of dismissal was varied, with the Trainee being reinstated to the training program.</p> <p>The College reports it will be introducing mandatory assessment of Cultural Competency and Cultural Safety for all SET Trainees in the future. Training for all Committees/Boards is also being</p>

delivered. A new CPD Framework will also include requirements to align with Cultural Competency and Cultural Safety Professional Standards.

The College is asked to provide comment in the 2023 monitoring submission around the high proportion of reconsiderations for selection and if the College has noted any themes arising, and if selection processes may need to be reviewed.

Summary of College performance against Standard 1

The already-commendable list of equity, diversity and inclusion policies has expanded to include Te Rautaki Māori (Māori Health Strategy & Action Plan) as well as a draft RACS Aotearoa New Zealand Regional and Rural Health Equity Strategy.

Good progress has been made in evolution of educational governance and policy implementation.

Standard 2: The outcomes of specialist training and education

Areas covered by this standard: educational purpose of the educational provider; and, program and graduate outcomes

1 Significant developments underway or planned that relate to the accreditation standards

AMC commentary – significant developments against Standard 2

The College has not reported any significant developments against this standard.

2 Activity against conditions

Condition 3		To be met by: 2023		
Broaden consultation with consumer, community, surgical and non-surgical medical, nursing and allied health stakeholders about the goals and objectives of surgical training, including a broad approach to external representation across the College. (Standard 2.1)				
Finding	Unsatisfactory	Not progressing	Progressing	Satisfied
			X	
AMC commentary				
The College outlines a way in which it has engaged with a broader range of stakeholders on specific projects.				
There does not seem to have been as much broad consultation on the higher-level goals and objectives of surgical training. The recent Professional Skills Curriculum draft is an example of a critically important, high-level, guiding document. It signals to all stakeholders the expected Professional Skills of all surgeons as well as serving as a framework to which all specialty curricula and assessments will eventually map.				
The College reports that “broad engagement was sought and acknowledged throughout its development, including from: Education Committee members, CSET Members, RACS Community Representatives, Surgical Specialty Associations and Societies, Indigenous Health Committee				

members, Māori Health Advisory Group members, College Sections and Special Interest Groups, Executive Directors for Surgical Affairs, ANZ specialty medical colleges and the RACS Trainees' Association.”

This range does not sufficiently match the intent of the condition and misses an opportunity for consultation with non-surgical groups such as consumer, community, non-surgical medical, nursing and allied health stakeholders. The College is encouraged to consider how it consults with individuals and groups who will be cared for by surgeons and/ or who will work alongside surgeons to deliver health care when it develops key documents relating to the outcomes of training.

In order to close condition, the College needs to demonstrate that there is involvement from a broader range of stakeholders (particularly those external stakeholders listed in the condition) around the goals and objectives of surgical training.

Condition 4		To be met by: 2022		
Clearly and uniformly articulate program and graduate outcomes (for all specialties) which are publicly available, reflecting community needs and mapped to the ten RACS competencies. (Standard 2.2 and 2.3)				
Finding	Unsatisfactory	Not progressing	Progressing	Satisfied
			X	
AMC commentary				
<p>The draft Professional Skills Curriculum which is due to be finalised in October 2022, covers eight generic competencies: Collaboration and Teamwork; Communication; Cultural Competence and Cultural Safety; Health Advocacy; Judgment and Clinical Decision Making; Leadership and Management; Professionalism; and Scholarship and Teaching.</p> <p>The other two are specialty program specific: Medical Expertise and Technical Expertise.</p> <p>The work to outline program and graduate outcomes along with mapping is progressing, with satisfactory plans in place, but this will take another 12-24 months. See also commentary under the related Conditions 5 and 10.</p> <p>In the 2023 monitoring submission, the College is asked to provide more evidence as to how the program and graduate outcomes are made publicly available and reflect community needs.</p> <p>The College is commended for the work done so far, especially the embedding of cultural safety in the draft professional skills curriculum.</p>				

Summary of College performance against Standard 2

The conditions are progressing, and this standard remains Substantially Met.

Standard 3: The specialist medical training and education framework

Areas covered by this standard: curriculum framework; curriculum content; continuum of training, education and practice; and curriculum structure

1 Significant developments underway or planned that relate to the accreditation standards

AMC commentary – significant developments against Standard 3
The College has not reported any significant developments against this standard.

2 Activity against conditions

Condition 5		To be met by: 2023		
Enhance and demonstrate how non-technical competencies are or will be aligned across all surgical specialties including a consideration of the broader patient context. (Standard 3.2)				
Finding	Unsatisfactory	Not progressing	Progressing	Satisfied
			X	
AMC commentary				
<p>Commentary under Conditions 4 and 10 also relate to Condition 5.</p> <p>The College reports that ‘once the Professional Skills Curriculum (PSC) is finalised, CSET will define a process and provide an agreed standard for Training Committees/Boards to assist with mapping their curricula to the professional skills competencies. Training Committees/Boards are not required to implement the Professional Skills Curriculum into their SET programs but will be required to demonstrate equivalence of their curricula with the graduate outcomes identified in the PSC.’ This seems an acceptable approach which respects the curricular developments of all the specialty providers.</p> <p>The PSC has competencies organised by Stage 1 and 2 of training as well as Graduate Outcomes. Assessment of the eight competencies included in the PSC will be addressed in phase 2 of the Professional Skills project. The College reports they are considering consulting with Professor Lambert Schuwirth on this aspect which seems a sound idea, given his background in surgery and global eminence in health professions education and assessment.</p> <p>There is ample evidence of consideration of the broader patient context in the PSC, for example:</p> <p>Communication</p> <ul style="list-style-type: none"> • Communicates in a respectful manner with patients, family, carers • Takes care during the communication process not to diminish or invalidate a patient’s personal circumstances or cultural beliefs and practices. <p>Cultural competence and cultural safety</p> <ul style="list-style-type: none"> • Promotes cultural competence and cultural safety across the whole health system in order to achieve equitable healthcare for Aboriginal and Torres Strait Islander peoples and Māori • Fosters a safe and respectful healthcare environment for all patients, families and carers <p>Health advocacy</p> <ul style="list-style-type: none"> • Cares with compassion and respect for patient rights 				

- Responds to the social determinants of health

Judgement and clinical decision making

- Recognises conditions and circumstances where surgery may be needed
- Demonstrates an understanding of indications and contraindications based on contemporary best practice, and the individual patient's circumstances, expectations, risks and comorbidities.

Condition 6		To be met by: 2023		
As it applies to the specialty training program, expand the curricula to ensure trainees contribute to the effectiveness and efficiency of the healthcare system, through knowledge and understanding of the issues associated with the delivery of safe, high-quality and cost-effective health care across a range of settings within the Australian and/or New Zealand health systems. (Standard 3.2.6)				
Finding	Unsatisfactory	Not progressing	Progressing	Satisfied
			X	
AMC commentary				
<p>Good progress is being made. This is being picked up in the PSC; see above under Condition 5.</p> <p>References to working effectively and efficiently within the healthcare system to improve the delivery of safe high-quality care are included in a number of competencies, including Health advocacy: demonstrates a commitment to the sustainability of the healthcare system, professionalism: demonstrates ethical billing practices, and scholarship and teaching: engages in research to improve surgical practice.</p>				

Condition 7		To be met by: 2023		
Document the management of peri-operative medical conditions and complications in the curricula of all specialty training programs. (Standard 3.2.3, 3.2.4 and 3.2.6)				
Finding	Unsatisfactory	Not progressing	Progressing	Satisfied
			X	
AMC commentary				
<p>The 2021 assessment teams reasoning behind this condition should be noted:</p> <p>“It was a perception of the team that the management of peri-operative comorbidities and complications are often delegated unnecessarily to medical or other consulting services. Management of common and straightforward comorbidities and complications in surgical patients should be specifically included in the curricula for all specialties” (p48 of the AMC 2021 RACS report).</p> <p>As curricula are reviewed and new curricula are developed, the College and the Societies are encouraged to keep this in mind. It begs the question of who surgeons believe should be responsible for this aspect of their patients' care. If it is the junior staff on the surgical team, who is supervising them?</p> <p>For example, while the new Vascular Surgery curriculum includes a Topic Theme on Pre-operative and Post-Operative Care with early, mid, and late SET outcomes, it does not make significant mention of the responsibility and skills for basic peri-operative medical management of patients</p>				

with diabetes, renal disease or hypertension, nor basic medical management of anticipated complications such as sepsis or cardiac issues.

Condition 8		To be met by: 2023		
Include the specific health needs of Aboriginal and Torres Strait Islanders and/or Māori, along with cultural competence training, in the curricula of all specialty training programs. (Standard 3.2.10)				
Finding	Unsatisfactory	Not progressing	Progressing	Satisfied
			X	
AMC commentary				
<p>Good progress is being made to address this condition with commendable work being completed. The desired learning outcomes by stage feature in the draft PSC, but curricula have not yet been mapped to these.</p> <p>In parallel, the College is gradually developing modules and delivering courses to be taken by trainees and Fellows. Modules 1 and 2 have launched, with Module 3 having a November 2022 start date.</p> <p>In the 2023 monitoring submission, the College is asked to provide statistics on completion of the modules by trainees.</p> <p>For this condition to be satisfied, there needs to be evidence provided that each specialty curriculum maps adequately to the PSC Cultural Competency and Cultural Safety competencies at each stage of training.</p>				

Condition 9		To be met by: 2023		
In conjunction with the Specialty Training Boards, develop a standard definition across all training programs of 'competency-based training' and how 'time in training' and number of procedures required complement specific observations of satisfactory performance in determining 'competency'. (Standard 3.4.2)				
Finding	Unsatisfactory	Not progressing	Progressing	Satisfied
			X	
AMC commentary				
<p>Work is underway to develop a college-wide position on competency-based training and how it will be operationalised through policies and processes. This document is likely to be of considerable interest to others involved in specialty education and training.</p> <p>The College could consider the use of varying lenses on this issue, such as enhancing diversity, and what has been learned during the COVID-19 pandemic regarding minimum progression requirements.</p>				

Summary of College performance against Standard 3
Satisfactory progress in most areas. Much hinges on defining of graduate outcomes and then ensuring that all programs have defined scaffolded content to enable trainees to meet them.

Standard 4: Teaching and learning methods

Areas covered by this standard: teaching and learning approach and methods

1 Significant developments underway or planned that relate to the accreditation standards

AMC commentary – significant developments against Standard 4
<p>The College has identified an issue with Fellows performing robot-assisted surgery (RAS) to a standard that has not been reviewed or endorsed by the College. It is taking a leadership position in partnership with the Australian Medical Robotics Academy (AMRA) with respect to standard-setting in RAS training, credentialing, practice and continuing professional development. The Colleges has an MOU with AMRA.</p> <p>This issue should be further commented on in the 2023 monitoring submission, including more details on estimated numbers and specialties of surgeons performing RAS, and how it is intended to manage the maintenance of their professional standards.</p>

2 Activity against conditions

Condition 10		To be met by: 2023		
For all specialty training programs develop curriculum maps to show the alignment of learning activities and compulsory requirements with the outcomes at each stage of training and with the graduate outcomes. This could be undertaken in conjunction with the curricular reviews that are currently planned or underway. (Standard 4.1.1)				
Finding	Unsatisfactory	Not progressing	Progressing	Satisfied
			X	
AMC commentary				
<p>During the 2021 follow-up assessment, it was confirmed that the AMC acknowledges the varying curricular designs and stages of development. It was emphasised that relatively high-level mapping to the competencies is what is being sought, to show links and identify gaps.</p> <p>An example of mapping was provided in the submission, and this looks very promising.</p> <p>To satisfy this condition, and the standard, it will require mapping by stage to show how each curriculum builds to meet each of the ten competencies. Eight of these are in Professional Skills Curriculum (PSC), and the layout of outcomes in the PSC is by Stage 1 (early SET), Stage 2 (mid SET) and graduate (late SET). This would seem a useful set of stages in each specialty's curriculum map.</p>				

Summary of College performance against Standard 4

The has been good progress in conceptualising and agreeing the approach to curriculum mapping to show the relationships between specialty curricula and college competencies. To meet this standard, the maps will need to reflect early, mid, and late SET (graduate) outcomes to show the scaffolding of content.

Standard 5: Assessment of learning

Areas covered by this standard: assessment approach; assessment methods; performance feedback; assessment quality

1 Significant developments underway or planned that relate to the accreditation standards

AMC commentary – significant developments against Standard 5

The College has not reported any significant developments against this standard.

2 Activity against conditions

Nil.

3 Statistics and annual updates

AMC commentary – statistics and annual updates against Standard 5

The College has provided data on its summative assessments and pass rates. Pass rates seem acceptable.

Summary of College performance against Standard 5

There is no material change in the Colleges performance against this standard and it remains Met.

Standard 6: Monitoring and evaluation

Areas covered by this standard: program monitoring; evaluation; feedback, reporting and action

1 Significant developments underway or planned that relate to the accreditation standards

AMC commentary – significant developments against Standard 6

The College has not reported any significant developments against this standard.

2 Activity against conditions

Condition 11		To be met by: 2023		
Develop an overarching framework for monitoring and evaluation, which includes all training and educational processes as well as program and graduate outcomes. (Standard 6.1, 6.2 and 6.3)				
Finding	Unsatisfactory	Not progressing	Progressing	Satisfied
			X	
AMC commentary				
<p>The College has developed a draft overarching framework for monitoring and evaluation (M&E). A further workshop targeted at CSET members will be held in October 2022. In parallel, further stakeholder consultations are being held.</p> <p>The M&E framework is comprehensive and includes the main SET training and educational processes as well as program and graduate outcomes. Cross cutting themes relate to diversity, equity and inclusion for all the groups represented in the wider community.</p> <p>The framework includes the governance, pragmatic measures and processes with which to assess and monitor program elements, and details on how the data will be analysed and disseminated. Some will build on existing processes. While acknowledging the large amount of work to be done to reach final approval and to implement the processes, this framework is a sound basis on which to proceed.</p> <p>If there is college-wide approval of this framework (or similar) in 2023, this condition could be satisfied.</p>				

Condition 12		To be met by: 2022		
Establish methods to seek confidential feedback from individual supervisors of training, across the surgical specialties, to contribute to the monitoring and development of the training program. (Standard 6.1.2)				
Finding	Unsatisfactory	Not progressing	Progressing	Satisfied
			X	
AMC commentary				
<p>This element is included in the draft M&E plan mentioned in Condition 11.</p> <p>The College reports that there is agreement to align the existing annual supervisor feedback surveys by including a set of agreed survey questions. The method for collecting feedback confidentially is through online surveys. The data from these surveys are de-identified and general themes reported annually to the CSET.</p> <p>The first of these updated online surveys will be implemented in 2023.</p> <p>The College is asked to include a copy of the survey and reports on implementation in the 2023 submission, to determine if this condition is satisfied.</p>				

Condition 13		To be met by: 2022		
Develop and implement completely confidential and safe processes for obtaining and acting on regular, systematic feedback from trainees on the quality of supervision, training and clinical experience. (Standard 6.1.3 and 8.1.3)				
Finding	Unsatisfactory	Not progressing	Progressing	Satisfied
			X	
AMC commentary				
<p>The College reports “agreement to include a new set of survey questions for Trainees. These inclusions will align existing Trainee feedback survey data collection points and will include new questions pertaining to Trainee experience with quality of supervision, training and assessments and clinical exposure at their training site. Specialties will distribute surveys through the training management platform (TMP). The TMP is an electronic platform which effectively facilitates the sending and collating of confidential survey data for all Trainees. Annually, all Trainee responses will be collated electronically and reported to CSET. The use of the TMP will ensure that the process is completely confidential and safe for Trainees to provide honest and open feedback. Identifiable data will be removed, results analysed, and only general themes reported to CSET. This will allow for cross specialty analysis.” It is hoped to implement this survey in 2023.</p> <p>Still to be determined is how the findings will be acted upon. To satisfy this condition there will need to be evidence relating to:</p> <ul style="list-style-type: none"> • how data from Trainees in specialties with very small numbers in a training program/at a site will be analysed, and the methods for feedback to the program/site. • whether Trainees regard the processes as confidential and safe. <p>The College is also asked to comment on how trainees were involved in the development of these processes.</p>				

Condition 14		To be met by: 2022		
Develop formal consultation methods and regularly collect feedback on the surgical training program from non-surgical health professionals, healthcare administrators and consumer and community representatives. (Standard 6.2.3)				
Finding	Unsatisfactory	Not progressing	Progressing	Satisfied
			X	
AMC commentary				
This process is outlined in the draft Monitoring and Evaluation framework and appendices. Plans appear satisfactory but are not yet realised.				

Condition 15		To be met by: 2023		
Report the results of monitoring and evaluation through governance and administrative structures, and to external stakeholders. It will be important to ensure that results are made available to all those who provided feedback. (Standard 6.3)				
Finding	Unsatisfactory	Not progressing	Progressing	Satisfied
			X	
AMC commentary				
<p>This process is outlined in the draft Monitoring and Evaluation framework and appendices. Plans appear satisfactory but are not yet realised.</p> <p>The stakeholder matrix will identify key external stakeholders and highlight which will be informed of findings and associated actions.</p>				

3 Statistics and annual updates

AMC commentary – statistics and annual updates against Standard 6
The College provided information on its evaluation activities. An evaluation of the Building Respect Improving Patient Safety Action Plan is underway. This will assist in the next period of activity for the Building Respect initiative.

<p>Summary of College performance against Standard 6</p> <p>The College is to be commended for continued evaluation of the Building Respect, Improving Patient Safety action plan, with plans for the next phase, and developing a comprehensive draft Monitoring and Evaluation framework.</p> <p>Standard 6 has progressed from Not Met to Substantially Met.</p>
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Standard 7: Issues relating to trainees

Areas covered by this standard: admission policy and selection; trainee participation in education provider governance; communication with trainees; trainee wellbeing; resolution of training problems and disputes

1 Significant developments underway or planned that relate to the accreditation standards

AMC commentary – significant developments against Standard 7
The College reports a Wellbeing Charter for Doctors was launched with ANZCA, RANZCOG and ACEM which promotes a united charter that defines wellbeing and sets out the shared responsibility for supporting doctors' wellbeing. The College is commended for this work.

2 Activity against conditions

Condition 16		To be met by: 2022		
Promote, monitor and evaluate the Diversity and Inclusion Plan through the College and Specialty Training Boards to ensure there are no structural impediments to a diversity of applicants applying for, and selected into all specialty training programs. (Standard 7.1 and 6.1 and 6.2)				
Finding	Unsatisfactory	Not progressing	Progressing	Satisfied
			X	
AMC commentary				
<p>The full implementation of the Diversity and Inclusion Plan with the resultant desired impact will take time. The intent of this condition is focussed on reducing barriers in application and selection to all programs. The College reports more workshops have been held, including on unconscious bias in selection. There have not been complaints to suggest structural barriers; however, survey data might be required to assess perceptions of applicants and assessors.</p> <p>The statistics show progress in some outcomes such as female Trainees (now overall 31.8%, range in programs from 18% to 53%); but not in others. There are still very low numbers of Aboriginal and Torres Islands Trainees, with only 1 entering in 2021</p> <p>The College is asked to provide evidence of it's monitoring of the plan's implementation in the next monitoring submission.</p>				

Condition 17		To be met by: 2022		
Increase transparency in setting and reviewing fees for training, assessments and training courses by the College and all specialty training boards, while also seeking to contain the costs of training for trainees and specialist international medical graduates. (Standard 7.3.2 and 10.4.1)				
Finding	Unsatisfactory	Not progressing	Progressing	Satisfied
			X	
AMC commentary				
<p>Considerable work is being undertaken, including a college-wide review of all financial education activities to directly address the National Law requirements of fees being reasonable, with efficient and effective operations.</p> <p>The College reports that "costs and requirements associated with the various specialist medical programs are publicly available in applicable policies on the RACS website. Individual societies publish speciality training fees on their individual websites. The training committees/boards determine the specialty training fee amounts and ensure that fees are set no higher than the costs incurred."</p> <p>The College is asked to please provide the results of the evaluation, comment on the transparency of the review and the consultation process in the next submission and how it has increased transparency in setting and reviewing fees.</p>				

3 Statistics and annual updates

AMC commentary – statistics and annual updates against Standard 7
In 2021, the College had 9 Māori and 3 Pasifika Trainees enter a program. Only 1 Aboriginal and/or Torres Strait Islander Trainee commenced training in the same period. The College reports that “any Trainee who is experiencing financial hardship may apply for fee relief. To apply, a Trainee should initially write to the RACS Censor-in-Chief.”

<p>Summary of College performance against Standard 7</p> <p>The College has recognised the correlation of selection attempts and successful completion of SET which have led to a decision to reduce the total number of selection attempts per candidate. It is of interest to the AMC to see how the work the College is doing on unconscious bias in selection will impact the policy that restricts the number of selection attempts. The AMC appreciates the College commenting on this in future submissions.</p> <p>This standard is substantially met.</p>

Standard 8: Implementing the training program – delivery of educational resources

Areas covered by this standard: supervisory and educational roles and training sites and posts

1 Significant developments underway or planned that relate to the accreditation standards

AMC commentary – significant developments against Standard 8
The College has not reported any significant developments against this standard.

2 Activity against conditions

Condition 18		To be met by: 2022		
Mandate cultural safety training for all supervisors, clinical trainers and assessors. (Standard 8.1.3, 8.1.5 and 8.2.2)				
Finding	Unsatisfactory	Not progressing	Progressing	Satisfied
			X	
AMC commentary				
The College has updated the Surgeons Competence and Performance Standards to include Cultural Competency and Cultural Safety, commonly referred to as the ‘tenth Competency’. It is stated in the submission that ‘by introducing the tenth Competency to Surgical Professional Standards, it is mandatory for a Surgeon through their career to be assessed against the tenth Surgical Competence and Performance standard.’ More detail on this competency is in the Professional Skills Curriculum which is to be approved in October 2022.				

The College has provided a detailed update regarding Cultural Safety training for the senior leadership team and college committee members. Following the completion of training committees/boards training and education, a proposal will be put forward for all supervisors and trainers to undertake this, or equivalent training and for a policy to be implemented making this training mandatory moving forward. It is expected that this will occur in the second half of 2023.

Over the next 12 months the CPD Framework will reflect Fellowship requirements pursuant to the Cultural Competency and Cultural Safety Professional Standards.

The recently released Supervisor Framework includes Domain 3, Trainee and Patient Safety which is integrated into the learning outcomes of Cultural and Safety Competencies.

In summary, cultural safety training for all supervisors, clinical trainers and assessors training is not yet mandated, but there is steady progress towards this. A decision to make it mandatory is expected in the latter part of 2023. This will allow the condition to be satisfied.

Condition 19		To be met by: 2023		
In conjunction with the Specialty Training Boards, finalise the supervision standards and the process for reviewing supervisor performance and implement across all specialty training programs. (Standard 8.1)				
Finding	Unsatisfactory	Not progressing	Progressing	Satisfied
			X	
AMC commentary				
The Supervisor Framework which outlines standards/competencies for supervisors has been finalised and was appended to the submission as well as being posted on the College website.				
There is a self-assessment tool, and the College reportedly reviews supervisor performance at accreditation visits. To satisfy this condition, a process for reviewing individual supervisor performance across all specialty training programs is required.				

3 Statistics and annual updates

AMC commentary – statistics and annual updates against Standard 8
In 2021, the College conducted 196 site visits, 11 new sites were accredited, and four sites were not reaccredited.

Summary of College performance against Standard 8
Good progress and sound plans, but not yet at the stage for conditions to be satisfied.

Standard 9: Continuing professional development, further training and remediation

Areas covered by this standard: continuing professional development; further training of individual specialists; remediation

1 Significant developments underway or planned that relate to the accreditation standards

AMC commentary – significant developments against Standard 9

The College has introduced a tenth surgical competence - cultural competence and cultural safety. In anticipation of CPD Homes in 2023, the College has begun a review of policies in relation to support and remediation.

2 Activity against conditions

Nil.

3 Statistics and annual updates

AMC commentary – statistics and annual updates against Standard 9

The rates of participation in and completion of CPD by Fellows is 94% in Australia and 100% in NZ.

The College has approved the Australian Orthopaedic Association (AOA) and New Zealand Orthopaedic Association (NZOA) CPD programs. Completion rates are 100% in the NZOA program, but only 50% in the AOA program. The College reports this may be due to the fact that a combined 2021/22 program is being run (i.e., it is a phasing issue).

Summary of College performance against Standard 9

This Standard remains Met.

Standard 10: Assessment of specialist international medical graduates

Areas covered by this standard: assessment framework; assessment methods; assessment decision; communication with specialist international medical graduate applicants

1 Significant developments underway or planned that relate to the accreditation standards

AMC commentary – significant developments against Standard 10
In the second half of 2022, the College is completing a research study comparing performance of SIMGs with locally trained Fellows at completion of the SET. Outcomes of this study should be included in the 2023 monitoring submission.

2 Activity against conditions

Condition 20	To be met by: 2023			
Develop and implement alternative external assessment processes such as workplace-based assessments to replace the Fellowship Examination for selected specialist international medical graduates. (Standard 10.2.1)				
Finding	Unsatisfactory	Not progressing	Progressing	Satisfied
			X	
AMC commentary				
<p>The College is thanked for providing the following additional information on the External Validation of Professional Performance (EVOPP) pilot for the Specialist Education Accreditation Committee review:</p> <ul style="list-style-type: none">• The project timeline for completion of the pilot phase and proposed implementation• A summary of the pilots undertaken and planned• Learning/evaluation of the pilots already conducted and implications for changes to the process <p>Progress has been slow, but there are plans in place to progress. The timeline for completion of activities was noted, as well as what activities have been undertaken since 2018. The appointment of a dedicated Project Manager in 2022 is a welcome development.</p> <p>The College highlights in its response that will be important to ensure uniformity between the nine surgical specialties and this collaboration may take time. The College is encouraged to work with the societies to ensure implementation can occur in a timely manner to ensure workforce need is met.</p>				

3 Statistics and annual updates

AMC commentary – statistics and annual updates against Standard 10
There are still significant delays in IMG assessments in Australia, in part due to large numbers of applications during the COVID-19 pandemic. In NZ, applications are all assessed at the latest by the end of the following year.

Summary of College performance against Standard 10

Satisfactory progress towards meeting this standard. In the next submission the College is asked to comment on the large number of SIMGs not graduating and the reasons for this.

Part D – Report on Quality Improvement Recommendations

This section was **OPTIONAL** in 2022.

Quality Improvement Recommendation	AMC Comment
Standard 1: The context of training and education	
Nil.	
Standard 2: The outcomes of specialist training and education	
AA Benchmark the graduate outcomes of each of the surgical training programs internationally. (Standard 2.2 and 2.3)	Not reported on specifically by the College.
BB Improve the uniformity of presentation of training program requirements and graduate outcomes for each of the surgical specialties (particularly on the website), taking into account feedback from trainees, supervisors and key stakeholder groups. (Standard 2.2 and 2.3)	Not reported on specifically by the College.
Standard 3: The specialist medical training and education framework	
CC Develop explicit criteria to consider whether training periods of less than the standard six months can be approved, and ensure that prior learning, time and competencies acquired in non-accredited training are fairly evaluated as to whether they may count towards training. (Standard 3.3 and 3.4.2)	Not reported on specifically by the College.
Standard 4: Teaching and learning approach and methods	
DD Consider mechanisms to support better access to training identified as lacking in parts of Australia and New Zealand (Standard 4.2.1)	Not reported on specifically by the College.
Standard 5: Assessment of learning	
EE For all surgical specialties, adopt behaviour-related reporting (i.e. descriptive of the key features) rather than simple scoring for all work-based assessments. (Standard 5.2.3)	Not reported on specifically by the College.
Standard 6: Monitoring and evaluation	
FF Consider amending a purpose of the monitoring and evaluation framework to ensure it is developed with the intention for all specialty training programs to comply with AMC standards (Standard 6.1.1)	Not reported on specifically by RACS. Nonetheless the draft May 2022 M&E framework now mentions this as a purpose: The M&E Framework sets out the approach to determining the performance of the Surgical Education and Training (SET) Program. The

	<p>Framework identifies the evidence that will be generated to enable the following:</p> <ul style="list-style-type: none"> • establish clear roles, responsibilities and processes for M&E and guidance on reporting processes, including documentation and dissemination of data. • measure program performance, make evidence-based management decisions, enable learning and continuous improvement, and demonstrate the effectiveness of the SET Program. • develop a more robust understanding of best practice in surgical training education. • report to the AMC/MCNZ, partners, internal and external stakeholders. <p><i>This recommendation is closed.</i></p>
Standard 7: Issues relating to trainees	
Nil.	
Standard 8: Implementing the program – delivery of education and accreditation of training sites	
Nil.	
Standard 9: Continuing professional development, further training and remediation	
Nil.	
Standard 10: Assessment of specialist international medical graduates	
<p>FF The College and specialty training boards are strongly encouraged to consider:</p> <ol style="list-style-type: none"> Ways to improve timelines and transparency in communicating assessment decisions to SIMGs. If expectations of SIMG candidates in the assessment of comparability in both Australia and New Zealand were reasonable. (Standard 10.3 and 10.4) 	<p>Not reported on specifically by the College.</p>