

| 2022 Principle                                     | Based on previous  | Explanatory Notes  | Key Changes   |
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| <b>Principle 1: Respect and Patient Safety</b>     | <b>Standard 1: Building and maintaining a Culture of Respect for patients and staff.</b> | <ul style="list-style-type: none"> <li>• This standard was first included in 2016 and was RACS' earliest attempt to address prevention of unacceptable behaviours in the hospital training settings.</li> <li>• The revised standards reflect the goals of RACS Discrimination, Bullying, and Sexual Harassment principles and recognise the legal obligation for RACS regarding its duty of care to trainees and ethical responsibility of Fellows to ensure training and workplace environments are free from DBSH.</li> <li>• The inclusions are informed by findings from the growing body of published literature and evidence-informed practice which indicate that action is required in hospital culture, hospital policy and complaints processes.</li> <li>• It also reflects evidence linking unprofessional conduct and patient safety.</li> </ul> | <p><b>New standards added:</b></p> <p><b>S2)</b> The hospital has a policy framework to support a zero-tolerance approach to unprofessional conduct.</p> <p><b>S3)</b> Education and training includes a focus on professional conduct and speaking up.</p> <p><b>S4)</b> The hospital has an effective complaints reporting, monitoring and investigation mechanism.</p> |
| <b>Principle 2: Cultural Competency and Safety</b> | <b>NEW</b>   | <ul style="list-style-type: none"> <li>• RACS' accreditation with the AMC (Condition 33), includes a requirement that hospitals demonstrate a commitment to Aboriginal and Torres Strait Islander and/or Māori cultural competence.</li> <li>• Developed with the assistance of the RACS Indigenous Health Committee.</li> </ul>   | <p><b>Standard added:</b></p> <p><b>S5)</b> There is a hospital-wide commitment to provide culturally safe care.</p>  |

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| <p><b>Principle 3:<br/>Learning Environment</b></p>                         | <p><b>Standard 2:<br/>Education systems and facilities required</b></p> <p><b>Standard 3:<br/>Quality of education, training and learning.</b></p> | <ul style="list-style-type: none"> <li>• Focuses on the facility's ability to deliver learning opportunities, and the general educational opportunities available to trainees within the hospital that aren't specifically related to the SET program.</li> <li>• This is common practice in many other accreditation standards but was not explicitly stated in the RACS standards.</li> </ul>  | <p><b>Standard added:</b></p> <p><b>S9)</b> The hospital and surgical unit offer a comprehensive introduction to the unit</p>  |
| <p><b>Principle 4:<br/>Supporting Trainees</b></p>                          | <p><b>Standard 5:<br/>Support services and flexibility for trainees</b></p>  | <ul style="list-style-type: none"> <li>• Previously named 'Support services and flexibility for trainees'</li> <li>• Updated in accordance with the agreed domains, standards and criteria for use by medical colleges accrediting training sites for medical specialist training produced by the Australian Health Ministers' Advisory Council/Committee of Presidents of Medical Colleges.</li> <li>• Revised standards based on feedback received directly from Trainees relating to their experience.</li> </ul> | <p><b>Criteria added:</b></p> <p>10.1.4 The hospital adheres to the relevant government workplace legislation to offer breastfeeding facilities and adequate breaks for Trainees returning to work following parental leave. Breastfeeding facilities must be located in proximity to the surgical unit and/or operating theatres.</p> |
| <p><b>Principle 5:<br/>Supporting Surgical Supervisors and Trainers</b></p> | <p><b>Standard 4:<br/>Surgical Supervisors and staff</b></p>   | <ul style="list-style-type: none"> <li>• Previously named 'Surgical supervisors and staff'</li> <li>• Updated in accordance with requirements of the Australian Health Ministers' Advisory Council/Committee of Presidents of Medical Colleges.</li> <li>• Intention is for these standards to also advocate for Supervisors to be provided with the time, skills and resources to complete the requirements of the role and develop as a supervisor.</li> </ul>   | <p>Name change</p>   |

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| <p><b>Principle 6:<br/>Leadership<br/>and<br/>Governance</b></p> | <p><b>Standard 8:<br/>Clinical<br/>governance,<br/>quality and<br/>safety</b></p>  | <ul style="list-style-type: none"> <li>• The previously named 'Clinical governance, quality and safety' standard largely remains the same, though we have moved two criteria into this standard</li> </ul>   | <p><b>Criteria moved:</b></p> <p>a - Hospital has mechanism for dealing with feedback, and responds to feedback conveyed by RACS on behalf of trainees</p> <p>b- Hospital has the accredited status to undertake surgery</p> |
| <p><b>Principle 7:<br/>Clinical<br/>Experience</b></p>           | <p><b>Standard 6:<br/>Clinical load<br/>theatre<br/>sessions</b></p> <p><b>Standard 7:<br/>Equipment<br/>and clinical<br/>support<br/>services</b></p> <p><u>Elements of:</u><br/><b>Standard 3:<br/>Quality of<br/>education,<br/>training and<br/>learning</b></p> | <ul style="list-style-type: none"> <li>• The original Standard 6 'Clinical load and theatre sessions' has evolved in an effort to streamline the standards.</li> <li>• The aim of this standard is now to assess that: <ul style="list-style-type: none"> <li>- The post is structured to drive the Trainee's achievement of RACS competencies and curriculum requirements</li> <li>- Trainees have access to a range and volume of clinical and operative experience</li> <li>- The hospital has the equipment and clinical support services required to manage surgical cases in a particular specialty</li> </ul> </li> </ul> | <p>Criteria moved from 3 Standards into a new Principle.</p>   |