



5 JUN 2006

PLEASE ADDRESS ALL CORRESPONDENCE TO

CHIEF EXECUTIVE OFFICER AUSTRALIAN MEDICAL COUNCIL PO BOX 4810 KINGSTON ACT 2604 AUSTRALIA
8/3/11

QUOTE REFERENCE NUMBER

2 June 2006

Professor John Collins
Dean of Education
Royal Australasian College of Surgeons
Spring Street
Melbourne Vic 3000

Dear John,

I am writing concerning the annual reports the Australian Medical Council requires the Royal Australasian College of Surgeons to provide as a condition of its accreditation.

The purpose of the annual reports is to inform the AMC of new, significant developments in education and training, and any matters relating to the training program that are of concern to the college. For colleges that have been formally reviewed by an AMC team, the Specialist Education Accreditation Committee is principally concerned with how the college's programs have developed since the AMC review, with particular interest in the college's response to issues raised in the AMC accreditation report.

Review of this year's annual report

The 24 May 2006 meeting of the AMC's Specialist Education Accreditation Committee considered the annual report submitted by the Royal Australasian College of Surgeons in April 2006. The Committee also considered a commentary on the report by Dr Robin Mortimer, the chair of the 2001 AMC assessment of the RACS programs.

The Committee accepted the report, noting the thoughtful and very significant changes in the College's approach to selection, training, assessment, interactions with its specialty bodies and communication with its trainees.

The Committee identified a number of topics to be addressed in the College's next report and agreed on a process for considering the College's next report. These issues and the proposed process are set out below.

Program development: The Committee notes that the RACS has, over the past 12 months, been very active in reviewing its surgical training program. It also notes that the RACS plans to bring in, by 2008, an integrated program that will allow early selection into a chosen six year surgical specialty training program. The Committee notes that curricula, robust in training assessment tools and clinically aligned Basic Science and Clinical Examinations will be developed. The initial AMC Team had indicated that the RACS concentrated on technical aspects of the specialty, but the Committee is encouraged to learn that the new educational strategy will include development of modern curricula. This is an area that the AMC will wish to examine carefully.

The Committee considers that the development of the integrated program represents a significant change to the program accredited by the Australian Medical Council. Further information on the ramifications of this change for the College's accreditation is provided below, in the section on *Next year's report*.

Assessment: The Committee notes that innovative in-training assessments, such as 360 reviews, Mini-CX, direct observation of skills are being proposed for formative assessments. The AMC will be interested in further information on the development of these approaches, including training and preparing College Fellows and trainees for the changes, and the College's mechanisms to evaluate their success.

The 2001 AMC assessment of the College's program recommended that the system of standard setting used in the Basic Surgical Training examinations be reviewed by a medical educationalist who specialises in testing and measurement. The Committee notes that this has not occurred and will be seeking further information on the College's processes for external review of the reliability of its assessment processes.

Accreditation of posts and programs: The Committee notes there have been major changes in accreditation of institutions, training programs and positions, and a very significant increase in training positions.

Communication with trainees and supervisors: The College's upgraded web site is commended. The Committee also commends the measures introduced to gain feedback about training from trainees and supervisors and to use this for program design, and the establishment of an Interim Trainees' Association.

Next year's report

The AMC asks for a more substantial report in the fifth year of a college's accreditation. For the Royal Australasian College of Surgeons, this will be the report required next year (2007). This is expected to be a comprehensive report that provides assurance, and where possible evidence, that standards of education and training and appropriate resources have been maintained. Subject to a satisfactory report from the College in its fifth year of accreditation (i.e. 2007), the Specialist Education Accreditation Committee may recommend that the AMC grant the College a further period of accreditation, up to a maximum of four years, before a new accreditation review.

As noted above, the new integrated program that the College is introducing appears to represent a significant change to the program that has been accredited by the AMC. The AMC Guidelines, *Accreditation of Specialist Medical Education and Training and Continuing Professional Development Programs*, describe a separate process that the AMC may institute to review a proposal for a major change to an established and accredited program. This would generally entail a small AMC team reviewing the plans before the change is implemented.


The Specialist Education Accreditation Committee is proposing to combine these two assessment tasks, namely the review of the College's fifth-year report and the assessment of the plans for the new integrated program. The AMC would appoint a small team to review the standard information that the AMC seeks in a College's fifth-year report and to assess the College's plans for the integrated program. The team would conduct a short program of meetings with College officers and committees and then produce a report to the Specialist Education Accreditation Committee. This report would be the basis for a decision by the Council on the ongoing accreditation of the College.

To begin this process, the AMC and the RACS would need first to agree on the information that RACS would provide for the review, establish a timeframe for the review, and appoint members of the AMC team.

- The AMC Secretariat will develop a report outline that combines the information required for these two assessments. Once the College has received a copy of this document, I would be willing to meet College officers to discuss the requirements.
- The AMC will determine a date for the team to discuss the fifth-year report and the plans for the integrated program with appropriate College officers and committees, through a site inspection process. This is likely to require two or three days of meetings. I should be grateful if the College would indicate a month, between May and August 2007 that would be suitable for this short assessment.
- Once a date has been agreed, it will be possible to set a deadline for the College to submit its documentation to the AMC, and to seek nominations for appointment to the AMC Team. Following usual AMC practice, I expect that the Team would include at least one member of the AMC Team which assessed the College's programs in 2001, as well as a couple of new members.

Please call me if you wish to discuss these plans.

Yours sincerely



Richard Smallwood
Chair
Specialist Education Accreditation Committee

Tel: 02 6270 9706

O:\reviews\RACS\Annual Reports\05 SEAC response 05-06.doc