

Education and Training

ACCREDITATION - POLICY AND PROCEDURE



Authorising Committee/ Department:	RANZCP Board
Responsible Committee/ Department:	Education Committee
Document Code:	POL PRC EDT-TRN Accreditation - Policy and Procedure

1 POLICY PURPOSE

- 1.1 For the accreditation of Fellowship Programs, Certificates of Advanced Training, training posts, and Formal Education Courses (FECs) in compliance with the Royal Australian and New Zealand College of Psychiatrists (RANZCP) 2012 Fellowship accreditation standards.

2 PRINCIPLES OF ACCREDITATION

- 2.1 Accreditation is a quality assurance process to ensure that training delivered under the RANZCP 2012 Fellowship Regulations meets accreditation standards which specify educational, clinical and governance requirements for Fellowship Programs, Certificates of Advanced Training, training posts and FECs.
- 2.2 The RANZCP accredits Fellowship Programs, Certificates of Advanced Training, training posts and FECs. Individual training locations or health services are not accredited by the RANZCP.
- 2.3 The Education Committee (EC) is responsible for the assessment and recommendations regarding accreditation of Fellowship Programs, FECs and Certificates of Advanced Training.
- 2.4 Branch Training Committees (BTCs) and the New Zealand Training Committee (NZTC) are responsible for the accreditation of training posts in which RANZCP trainees are located.
- 2.5 ¹Subcommittees for Advanced Training (SATs) are responsible for accreditation of Certificate of Advanced Training Programs.
- 2.6 Fellowship Programs, Certificates of Advanced Training, training posts and FECs must be, at a minimum, provisionally accredited by the RANZCP before a trainee is placed in the Fellowship Program, Certificate of Advanced Training, a training post or commences an FEC.
- 2.7 Full, partial or provisional accreditation may be awarded to Fellowship Programs, Certificates of Advanced Training, training posts and FECs. The RANZCP has the authority to remove accreditation from Fellowship Programs, Certificates of Advanced Training, training posts and FECs.

¹ The RANZCP acknowledges that the governance structure relating to accreditation of Certificates of Advanced Training is inconsistent with accreditation processes for the Fellowship Program and, while clause 2.4 represents the situation at the time of this policy's publication, it is under review via the College Governance and Risk Committee.

- 2.8 A Fellowship Program, Certificate of Advanced Training, a training post or an FEC that partially meets accreditation standards may be awarded provisional accreditation with conditions or recommendations that must be addressed to be awarded full accreditation.
- 2.9 The accreditation process is a five-year cycle, which may include an accreditation location visit, a mid-cycle desktop audit, and surveys of trainees and supervisors. Fellowship Programs, Certificates of Advanced Training, training posts and FEC providers must demonstrate continuing compliance with the RANZCP accreditation standards.
- 2.10 A Fellowship Program, Certificate of Advanced Training, training post or FEC is provisionally accredited for the time between the assessment and the date of the formal outcome regarding eligibility for accreditation. Upon approval of the accreditation report, by the EC, the accreditation status recommended within the report can be backdated to cover the preceding period of interim, provisional accreditation.
- 2.11 The RANZCP determines accreditation standards for Fellowship Programs, Certificates of Advanced Training, training posts and FECs, and the Accreditation Committee (AC) monitors and maintains the standards.
- 2.12 The AC and/or the Committee for Training (CFT) reserve the right to commence an accreditation process at any time should either Committee deem it necessary, having regard to compliance, at the time, with the accreditation standards.
- 2.13 The AC and/or the CFT may receive recommendations from the SATs in regard to accreditation of Certificates of Advanced Training.
- 2.14 Fellows, Affiliates who are not on a training pathway, and Associates (trainees) of the RANZCP, and the appointed staff member/s, are eligible for membership of accreditation panels. Other representatives may be appointed to panel/s at the AC's discretion.
- 2.15 An observer may be permitted by the AC to join the accreditation panel.
- 2.16 New Fellowship Programs, FECs and Certificates of Advanced Training must apply to the EC for RANZCP Board approval to commence the accreditation process.
- 2.17 An application for the accreditation of a new Fellowship Program must be submitted with sufficient time for the application outcome to be determined prior to the start of the program in line with training rotation cycles. Following initial approval from the EC, content of the Program is to be provided and approved before final approval may be granted. Similarly, an application for accreditation of new a FEC must be submitted with sufficient time prior to the start of the training year (see Section 5).
- 2.18 An application for a new training post must be submitted to the BTC or to the NZTC to commence the accreditation process which includes the following:
- 2.18.1 The BTC or the NZTC can recommend to the CFT accreditation of a training post should the BTC or the NZTC agree that the post meets the Training Post Accreditation Standards. If met, the CFT may approve accreditation, and inform the BTC or the NZTC (and the AC for noting, if this is reinstatement of a post which had had its accreditation removed) of the post's accreditation.
- 2.18.2 The training post is unaccredited if it does not meet the Accreditation Standards. Provisional accreditation may be granted by the BTC or the NZTC with a timeline for full compliance and implementation of the recommendations of the BTC or the NZTC to meet the Accreditation Standards.
- 2.18.3 While a training post with provisional accreditation is working towards meeting the Accreditation Standards, the BTC or the NZTC will inform the CFT on the health service's progress towards meeting requirements.

- 2.18.4 The BTC or the NZTC may conduct a site assessment to confirm that the Accreditation Standards are met if the training post had provisional accreditation.
- 2.19 Accreditation processes ensure procedural fairness. A governance structure oversees processes and incorporates the right to appeal. The [Appeals Process](#) Policy and Procedure document is accessible on the RANZCP website.
- 2.20 All stakeholders must adhere to accreditation outcomes, such as recommendations and accreditation status, in relation to Fellowship Programs, Certificate of Advanced Training Programs, training posts and FECs.
- 2.21 Representatives of the RANZCP involved in the accreditation process will sign a Deed of Undertaking in Relation to Confidential Information and Conflict of Interest.
- 2.22 In the event of the removal of accreditation of a Fellowship Program, Certificate of Advanced Training, training post or FEC, the welfare and training of trainees are the primary concern of the RANZCP. For more information regarding the removal of accreditation, refer to the Removal of Accreditation Policy and Procedure [Removal of Accreditation Policy and Procedure](#).
- 2.23 Information obtained from communications and interviews during accreditation assessments will be de-identified.

3 ACCREDITATION OF FELLOWSHIP PROGRAMS

- 3.1 The accreditation of Fellowship Programs operates on a five-year cycle, which includes a mid-cycle accreditation review, and may include a location accreditation assessment.
- 3.2 Fellowship Program accreditation includes:
- I. The collection and provision of evidence by the Fellowship Program, before the accreditation assessment, demonstrating compliance with the Training Program Accreditation Standards, in preparation for the accreditation panel.
 - II. A potential review by the accreditation panel of one or more training locations in the Fellowship Program by an accreditation panel.
 - III. After the accreditation assessment, the completion of the accreditation panel's report on the Fellowship Program's compliance with the Training Program Accreditation Standards, which may include recommendations where the Standards have been partially met, or not met.
- 3.3 During the assessment, the accreditation panel meets RANZCP trainees, supervisors, members of the health service management, the BTC or the NZTC, and/or local training committees.
- 3.4 For current Fellowship Programs, the AC informs the Program (who can inform the local health services) the year prior to the scheduled accreditation assessment, with a six-month reminder.
- 3.5 In consultation with the Director of Training (DOT) (who drafts the timetable in conjunction with RANZCP staff), the AC determines the scope of the accreditation assessment based upon the size and geography of the Fellowship Program, feedback from trainees in the responses to the pre-assessment survey, and any current or priority issues for the Program.
- 3.6 The AC can initiate an extraordinary accreditation assessment at any time, with the CFT's consultation, should there be any training issues that require immediate attention or any circumstances that affect the safety and welfare of the trainees, and/or patients.

3.7 The accreditation panel consists of a Lead member, a Second member, a trainee representative, and an RANZCP staff member. Other representatives and/or an observer may be permitted by the AC, if appropriate.

3.8 The accreditation panel is appointed by the AC and chosen from amongst eligible members of the RANZCP who have no conflict of interest.

3.9 Accreditation Report and Outcomes

3.9 The accreditation report is drafted by the RANZCP staff member of the panel and approved in the first instance by the accreditation panel.

3.9.1 The scope of the accreditation report is limited to assessing compliance with the Fellowship Accreditation Standards. However, if there are issues of concern relating to psychiatric care provided by a health service, this will be addressed separately with the health service and any relevant authority through the appropriate channels within the RANZCP.

3.9.1.1 Any significant issue of concern identified, which is outside of the scope of the accreditation assessment, will be taken initially to the Executive Management Group (EM), including the Chief Executive Officer (CEO) and the President. The EM will discuss and recommend appropriate actions.

3.9.2 The draft accreditation report is sent to the DOT for factual review prior to its finalisation.

3.9.3 Following factual review, the accreditation report is reviewed by the AC Chair, or delegate.

3.9.4 The final draft of the accreditation report is submitted to the AC for consideration and approval of the accreditation outcome and recommendations.

3.9.5 When accreditation is recommended, the report remains watermarked “draft” and is submitted by the AC:

i) to the EC for approval of accreditation of the Program, which is then noted by the CFT and RANZCP Board.

Upon verification of EC approval, the watermark is removed from the report and it is also then submitted by the AC:

ii) to the DOT and the BTC or the NZTC, who may disseminate the report and/or its appendices as appropriate.

3.9.6 The Fellowship Program is accredited for a maximum of five years from the date of the accreditation assessment.

3.9.7 If the accreditation report includes recommendations, the AC may recommend provisional accreditation, with a timeline for implementation of the recommendations.

3.9.7.1 The AC shall inform the BTC or the NZTC of any recommendations, timelines for their implementation and deadlines for reporting progress. An initial plan against the recommendations will be required within six weeks of the provision of the report. The AC will then monitor the timeline and progress on implementations and will keep the EC informed of the Program’s accreditation status.

3.9.8 The CFT may ask the BTC or the NZTC to provide an update on progress regarding accreditation recommendations. Any response to the CFT is copied to the AC.

- 3.9.9 Should a Fellowship Program not meet the Accreditation Standards removal of accreditation may be recommended. For more information regarding the removal of accreditation of a Fellowship Program, refer to the [Removal of Accreditation Policy and Procedure](#).

3.10 New Fellowship Programs

- 3.10.1 An application for a new Fellowship Program must be submitted initially to the CFT for consideration. If the application is not submitted by the BTC or NZTC directly, then the BTC or NZTC must be consulted for endorsement. The CFT can request further information from the BTC, NZTC or applicant to assist in making a recommendation to the EC requesting “in principle” approval of RANZCP accreditation of the Program. The EC, upon endorsement of the CFT recommendation, advises the AC who will assess and make a formal recommendation regarding RANZCP accreditation of the program. Final decision requires RANZCP Board approval. See Appendix 1 for flowchart summary.
- 3.10.2 An application for a new Fellowship Program should demonstrate the capacity, support, and funding, to deliver the program with trainees, supervisors, training posts, an FEC, and plans to recruit an appropriate number of DOTs and DOATs, training coordinators, and support staff.
- 3.10.3 Should the Fellowship Program application not be approved, applicants may request the decision be reviewed according to the provisions of the RANZCP [reconsideration or appeals Policy](#). The applicant can make future applications as each application is considered on a stand-alone basis and separately to any previous application.
- 3.10.4 All Fellowship Programs must be provisionally accredited by the AC and the EC before trainees are placed in the Program. Following a positive assessment of an application by the AC, the Program will be granted 12 calendar months of provisional accreditation.
- 3.10.5 An accreditation assessment of the Program (clause 3) is conducted within 12 months after approval of the application as the first of the 5-yearly cycle of Program accreditation.

3.11 Application for new local Programs in an existing Certificate of Advanced Training

- 3.11.1 An application for a new local Certificate of Advanced Training Program in an existing Certificate of Advanced Training must be submitted in consultation with BTC or the NZTC, initially to the relevant SAT for consideration, before any recommendations as described for Fellowship Programs at clauses 3.10.2 – 3.10.6.

3.12 Application for new Certificates of Advanced Training in new areas of practice

- 3.12.1 An application for a new Certificate of Advanced Training Program, from an area of practice which does not yet have an established advanced training Program, must be submitted via the [New Area of Practice process](#) prior to receiving any recommendations as per 3.10.
- 3.12.2 A SAT for a new Certificate of Advanced Training Program must be developed and approved through the relevant pathway, in order for the Program application to continue as described for Fellowship Programs at clauses 3.10.

4 ACCREDITATION OF TRAINING POSTS

- 4.1 BTCs and the NZTC are responsible for the accreditation of training posts including advanced training posts.
- 4.2 Accreditation of Certificate of Advanced Training posts must be considered in consultation with the Director of Advanced Training (DOAT) with the option to refer to SATs for recommendation before making a final decision.
- 4.3 Training posts require accreditation review no later than every five years.
- 4.4 Health services must apply to the BTC or the NZTC to have a new training post accredited.
 - 4.4.1 The accreditation of a training post after it has lost its accreditation may require a new application for accreditation from the health service and, in some cases, an accreditation location visit or assessment by the BTC or the NZTC. For more information, refer to the Removal of Accreditation Policy and Procedure [Removal of Accreditation Policy and Procedure](#).
- 4.5 A trainee cannot occupy a training post until it has been granted full or provisional accreditation by the BTC or the NZTC.
 - 4.5.1 The accreditation of a training post cannot be backdated.
- 4.6 The BTC and the NZTC are responsible for the appointment of training post accreditation panels which must be composed of at least one Fellow or Affiliate member of the BTC or NZTC members (or delegate) and must include a trainee representative.
 - 4.6.1 A training post accreditation report is drafted upon conclusion of the accreditation assessment and is provided to the BTC or the NZTC. The report may include recommendations to be met by the health service before full or provisional accreditation is awarded, or for the retention of accreditation.
 - 4.6.2 If the draft accreditation report does not support accreditation, it is sent to the health service for factual review prior to finalisation.
 - 4.6.3 If the training post meets the Training Post Accreditation Standards, with no recommendations, it is accredited from the date of the accreditation assessment.
 - 4.6.4 If the training post partially meets the Training Program Accreditation Standards, with recommendations, it may be provisionally accredited.
 - 4.6.4.1 Conditions or recommendations may be imposed by the panel with a timeline to be addressed. Trainees may be placed in a provisionally accredited post, with the approval of the BTC or the NZTC.
 - 4.6.5 Progress towards addressing recommendations or conditions is monitored via ongoing liaison with the health service by the BTC or the NZTC, involving SAT representation as required.
 - 4.6.6 If the timelines for the recommendations are not met, but the BTC or the NZTC determine that satisfactory progress has been demonstrated, then provisional accreditation may continue pending approval by the BTC or the NZTC.
 - 4.6.7 Should a training post not meet the Training Program Accreditation Standards, removal of accreditation may be recommended by the BTC or the NZTC. For more information, refer to the Removal of Accreditation Policy and Procedure [Removal of Accreditation Policy and Procedure](#).

5 FORMAL EDUCATION COURSES

- 5.1 FECs are accredited for a maximum of five years against the RANZCP FEC Accreditation Standards. Accreditation includes:
- I. The collection and provision of evidence by the FEC provider, before the accreditation assessment, demonstrating compliance with the FEC Accreditation Standards, in preparation for the accreditation panel's assessment.
 - II. A review by the accreditation panel of feedback from the FEC provider and trainees participating in that FEC.
 - III. After the accreditation assessment, the preparation of the accreditation panel's report on the FEC's compliance with the FEC Accreditation Standards, which may include recommendations where the Standards have been partially met, or not met.
- 5.2 For current FECs, the AC informs the FEC one year in advance of the scheduled accreditation assessment.
- 5.3 Any core FECs in both Fellowship and Certificates of Advanced Training that are a mandatory requirement of the curriculum will be subject to accreditation standards.
- 5.4 Providers proposing new FECs, or substantial change² to an existing FEC, must submit to the AC their proposal with course details and evidence to demonstrate how the proposal meets the RANZCP Fellowship syllabus, and FEC Accreditation Standards.
- 5.4.1 The AC reviews the content and conduct of the FEC against the Fellowship Program syllabus and the FEC Accreditation Standards.
- 5.4.2 An initial assessment of the FEC, using the information submitted by the FEC provider and participating trainees, is conducted by two members of the AC who will constitute the panel, who will form a recommendation to the AC.
- 5.4.3 The initial assessment by the AC may be followed by a visit to the FEC provider, or review of the FEC delivery by member of the AC attending lectures or tutorials, or requests to the FEC provider for further information to clarify any concerns or queries raised by the AC.
- 5.5 The AC can initiate an extraordinary accreditation assessment at any time, in consultation with the CFT, should there be any issues that require immediate attention or any circumstances that affect the safety and welfare of the trainees.
- 5.6 The accreditation panel consists of a Lead member, a Second member, a trainee member, and an RANZCP staff member. An observer may be permitted by the AC, if appropriate.
- 5.7 The accreditation panel is appointed by the AC chosen from amongst Fellows and Associates (trainees) of the RANZCP who have no conflict of interest.
- 5.8 The accreditation report is drafted by the RANZCP staff member of the panel and approved in the first instance by the accreditation panel.
- 5.8.1 The scope of the accreditation report is limited to assessing compliance with the FEC Accreditation Standards.

² When an FEC is accredited, any substantial change must be approved prospectively by the Accreditation Committee. An example of a substantial change would be a complete change of delivery format from live to online. A change of facilitator personnel, or a reformat of content (provided it remains within the syllabus), would not constitute a substantial change. Clarification can be sought from the RANZCP, i.e. the BTC/NZCT, Director of Training (DOT) or Accreditation team, and may require a new accreditation review.

- 5.8.1.1 Any significant issue of concern which is identified, which is outside of the scope of the accreditation assessment, will be taken initially to the Executive Management Group (EM) to discuss and recommend appropriate actions.
- 5.8.2 The draft accreditation report is sent to the FEC provider for fact checking.
- 5.8.3 Following fact checking, the accreditation report is reviewed by the AC Chair, or delegate.
- 5.8.4 The accreditation report is submitted to the AC for consideration of the accreditation outcome and recommendations.
- 5.8.5 When accreditation is recommended, the report is watermarked “draft” and submitted by the AC:
- i) to the EC for approval of accreditation of the FEC, which is then noted by the Board.
 - ii) to the FEC provider noting that accreditation status is pending EC approval.
 - iii) to the CFT for noting.
- 5.8.6 Should the FEC meet the FEC Accreditation Standards, the AC will recommend to the EC (and for noting by the Board) that the FEC is accredited for five years from the date of advice of accreditation approval. FECs are provisionally accredited for the time between the time of the review and the advice of accreditation outcome.
- 5.8.7 If the accreditation report includes recommendations, the AC may recommend to the EC provisional accreditation, with a timeline to implement the recommendations.
- 5.8.7.1 The AC shall inform the FEC provider, advising of any recommendations, timelines for their implementation and deadlines for reporting progress to the AC. The AC will monitor the timeline and progress on implementations and will keep the EC informed of the FEC’s accreditation status.
- 5.8.7.2 If FEC response to recommendations demonstrates to the AC evidence of satisfactory progress towards implementing recommendations, a revised timeline may be given to the FEC provider to fulfil the recommendations.
- 5.8.7.3 If the FEC response to recommendations is not accepted by the AC, the AC informs the CFT and the EC. If it is a new FEC, the process ends pending appeal. For an existing FEC, the issue is escalated to the EC for review.
- 5.8.7.4 Should the FEC not respond to the accreditation report’s recommendations a recommendation for removal of FEC accreditation is made to the EC for endorsement by the Board. For more information regarding removal of FEC accreditation, refer to the Removal of Accreditation Policy and Procedure [Removal of Accreditation Policy and Procedure](#).
- 5.8.8 The CFT may ask the FEC provider to provide an update on progress regarding accreditation recommendations. Any response to the CFT is copied to the AC.
- 5.8.9 Should an FEC not meet the Accreditation Standards removal of accreditation may be recommended. For more information regarding the removal of accreditation of an FEC, refer to the Removal of Accreditation Policy and Procedure [Removal of Accreditation Policy and Procedure](#).

6 MONITORING DURING ACCREDITATION CYCLE

6.1 The following activities occur during the accreditation cycle to ensure continuing compliance with the RANZCP accreditation standards throughout the accreditation cycle:

- A mid-cycle desktop review, of Programs and FECs, may be undertaken by the College and considered by the AC. Processes for monitoring post accreditations during the cycle is delegated to the respective BTC or NZTC to be determined as suitable within the [Branch Training Committees and New Zealand Training Committee Regulations \(ranzcp.org\)](#).
- Actions to address recommendations made in an accreditation report are monitored by the local BTC/NZTC and reported to the AC as required.
- Ad hoc feedback received by the College from trainees, BTCs, DoTs, or other stakeholders is reported to the CFT and/or AC for consideration as outlined in the [Accreditation-Committee-Guideline-Feedback \(ranzcp.org\)](#).

6.2 Should any issues or concerns arise from the monitoring of accredited Programs, posts or FECS, the AC may initiate a reaccreditation process which may result in accreditation being removed, as described in the [Removal of Accreditation Policy \(ranzcp.org\)](#).

7 RECRUITMENT AND SELECTION OF ACCREDITATION PANEL MEMBERS³

7.1 Recruitment of accreditation panel members will be through a periodic call for expressions of interest from amongst the membership of the RANZCP.

7.2 The AC will appoint members of accreditation panels based on their eligibility, expressions of interest, and confirmation of good standing in the RANZCP.

7.3 Criteria for the selection of Fellows includes:

- Current active Fellowship of the RANZCP.
- No perceived or potential or real conflict of interest.
- Current specialist medical registration and professional indemnity.
- For the purposes of Certificates of Advanced Training, the Fellows cannot be enrolled as a Fellow in Training in the Certificate being accredited. One however should be a member of the relevant Faculty or Section, and the other should not.
- Participation in the Continuing Professional Development Program.
- Demonstrated experience in Psychiatry practice.
- Experience as a DOT, a DOAT, a service director, an accredited RANZCP supervisor, or previous experience in two accreditation assessments as a trainee member of an accreditation panel.

7.4 Criteria for selection of Affiliates includes:

- Current active Affiliate membership of the RANZCP.

³ In Australia, as per the 14 March 2012 Statement [Medical Board of Australia - Codes, Guidelines and Policies](#), retired Fellows may be eligible to participate in accreditation panels at upon approval by the AC. This is not possible in New Zealand as per the [Policy on registration within a general scope of practice \(eDOCS 44614\) \(mcnz.org.nz\)](#).

- Not current participation in a training pathway.
- No perceived or potential or real conflict of interest.
- Current specialist medical registration and professional indemnity.
- Participation in the Continuing Professional Development Program.
- Demonstrated experience in Psychiatry practice.
- Experience as at least one of the following:
 - a DOT,
 - a DOAT,
 - a service director,
 - experience in prior accreditation activity,
 - AND
 - at least five years as an accredited RANZCP supervisor.

7.5 Criteria for selection of trainees includes:

- Current active membership of the RANZCP either as an associate or a “new” Fellow (admitted to the Fellowship within the past twelve months).
- No perceived or potential or real conflict of interest.
- Demonstrated excellence in Psychiatric training (via CV).
- Active or recent (within the past twelve months) participation in the Fellowship Program as verified with the RANZCP Training Department. Trainees who are “not in training” are ineligible to apply to apply to be an accreditation panel member. Trainees who have been on a break in training for longer than twelve months will need Accreditation Committee Chair consideration.

7.6 A panel will usually comprise three members and one staff member. Should, for unforeseen circumstances, the composition of a planned panel be changed – including number of members – the accreditation can proceed if agreed to by the AC Chair.

8 TRAINING AND ROLES OF THE ACCREDITATION PANEL

8.1 Members selected as Program or FEC accreditation panel members shall undertake accreditation assessment training as directed by the AC. This may include induction by the AC and members of previous accreditation panels, completion of online training modules, and-on-the job training.

8.1.1 Members selected as Post accreditation panel members shall will be at the discretion of the BTC or NZTC and in accordance with the [Branch Training Committees and New Zealand Training Committee Regulations \(ranzcp.org\)](http://www.ranzcp.org).

8.2 The primary model for accreditation training is an apprenticeship style.

8.3 Ideally, the Lead Fellow will have completed a minimum of two assessments as a Second Fellow during the previous five calendar years.

- 8.4 Lead Fellows will ideally maintain currency of experience in accreditation by participating in accreditation activities (a minimum of one assessment, either of a training post or training Program) every two calendar years.
- 8.5 A Lead Fellow who does not maintain currency of experience may be required to become a Second Fellow and complete refresher training as requested by the AC.

9 ALLOCATION OF ACCREDITATION PANEL MEMBERS

- 9.1 Accreditation panel members will not be allocated to an accreditation assessment in their own state, territory, or training zone. This is relevant to all accreditation visits including Fellowship, FEC and Certificates of Advanced Training.
- 9.2 The appointing body will endeavour to provide gender balance in the accreditation panel.
- 9.3 The accreditation panel will be appointed according to the specific circumstances of the assessment.

10 RESPONSIBILITIES OF THE ACCREDITATION PANEL

- 10.1 Responsibilities of the accreditation panel are outlined in the relevant Position Descriptions and include, where applicable:

- participation in the assessment subject to completion of the required training,
- participation in pre- or post-assessment meetings deemed necessary by the Lead Fellow, or the AC, BTC or NZTC, for the conduct of the assessment, or completing the accreditation report,
- familiarity with any accreditation pre-assessment documentation, and
- liaison with other accreditation panel members including a review of accreditation documentation, identification of key areas of focus for a assessment, and development of recommendations.

- 10.2 Panel members must exhibit integrity, professionalism, objectivity, and impartiality, and must treat all information acquired during the assessment as confidential used only for the purposes of the assessment.

The panel will treat discussions during the assessment with trainees, supervisors, and health service staff as confidential as per their signed Deed of Undertaking in Relation to Confidential Information and Conflict of Interest.

- 10.3 Panel members are to form one of the following ratings against each Accreditation Standard:

Fully met: The requirements of the standard/criteria are demonstrated in all circumstances and supported by comprehensive documentation and consistent verbal evidence.

Substantially met: The requirements of the standard/criteria are demonstrated in most circumstances, supported by basic documentary evidence and correlated by verbal discussions and evidence.

Partially met: The requirements of the standard/criteria are demonstrated in some circumstances with minimal documentation and/or verbal evidence.

Not met: The requirements of the standard/criteria fail to meet the standard owing to the lack of provision of documentary evidence or the failure to improve or address the standard if previously identified in past reports.

11 RECOGNITION OF SERVICE AS AN ACCREDITATION PANEL MEMBER

- 11.1 Trainees will be provided with a letter of thanks to their health service for releasing them to participate in the accreditation assessment.
- 11.2 Service as an accreditation panel member may contribute to Section 3 Quality Improvement requirements of the RANZCP's Continuing Professional Development (CPD) program.
- 11.3 Fellows will be provided at the end of each year with a letter acknowledging their service as an accreditation panel member. This letter may be used as substantiation for the hours claimed for CPD.

12 MONITORING, EVALUATION AND REVIEW

- 12.1 The AC shall implement, monitor, and review this Policy.
- 12.2 This Policy will be reviewed every three years and updated as required.

13 ASSOCIATED DOCUMENTS

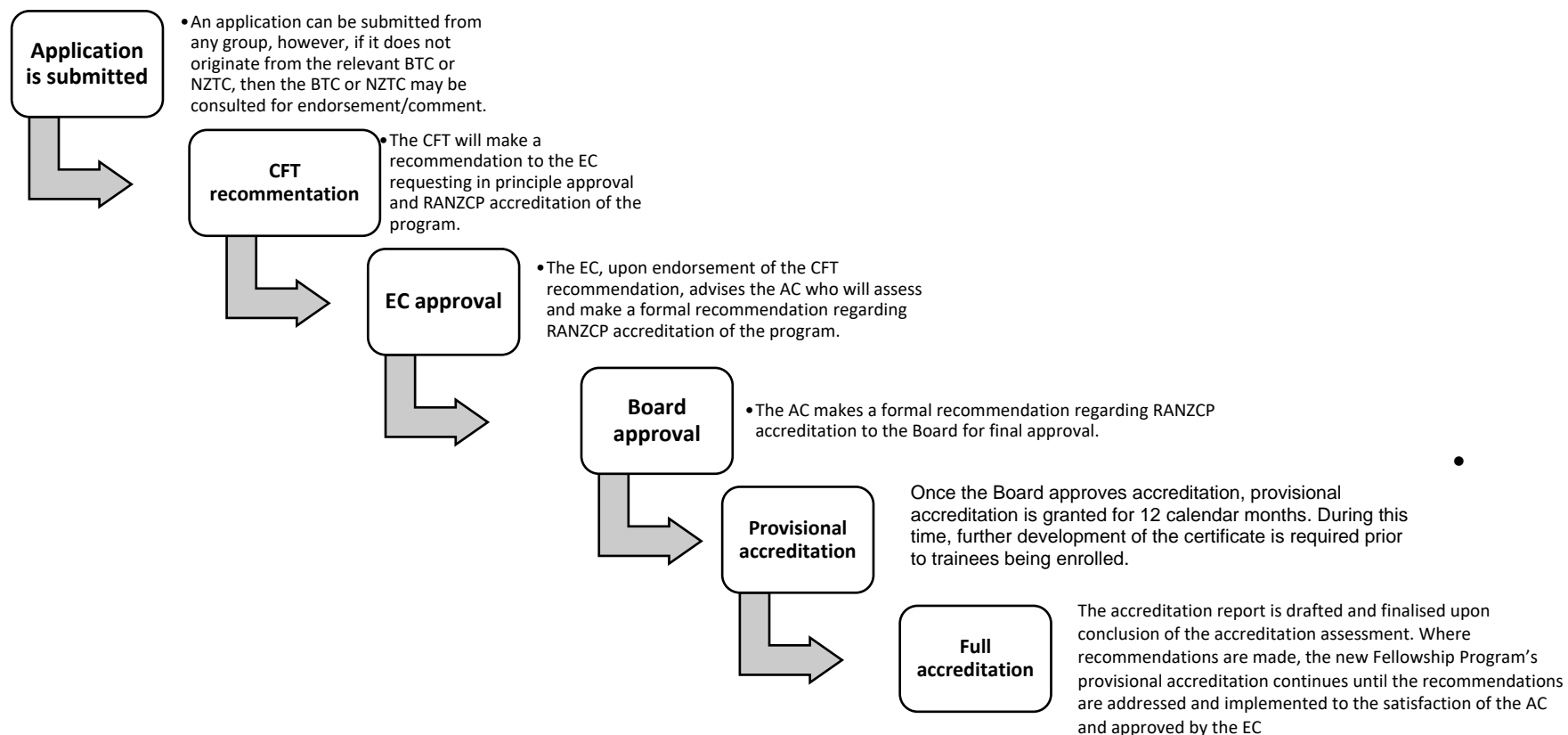
- a. RANZCP Regulations:
 - i. Regulations, policies and procedures
 - ii. Privacy Policy
 - iii. Code of Ethics
 - iv. Reconsideration and Appeals Policy
- b. RANZCP Accreditation Standards
 - i. Addiction Psychiatry
 - ii. Adult Psychiatry
 - iii. Child and Adolescent Psychiatry
 - iv. Consultation-Liaison Psychiatry
 - v. Forensic Psychiatry
 - vi. Psychiatry of Old Age
 - vii. Psychotherapies
 - viii. Training Program Accreditation Standards
 - ix. FEC Accreditation Standards
 - x. Training Post Accreditation
 - xi. Standard Operation Procedures
 - xii. Guidelines for appropriate adult acute inpatient workloads for RANZCP trainees

14 GLOSSARY

Glossary of Definitions

Term	Definition
Formal Education Course	A structured academic program accredited by the RANZCP which is designed to cover the Stage 1 and Stage 2 syllabus.
Fellowship Program	A Program accredited by the RANZCP to provide the training curriculum. Each Program will have a Branch Training Committee or the New Zealand Training Committee who are responsible for the quality of any Fellowship Programs in their area. Each Program must have a Director of Training.
Training Post	An accredited position through which trainees can rotate during their training. Each post must provide the experiences outlined in the RANZCP Fellowship regulations 2012.
Provisional Accreditation	An accreditation granted with the purpose of gaining full compliance within the time given. Full accreditation will not be granted until these requirements are fully satisfied.

Appendix 1



Note: Due to the number of steps involved and meeting schedules of relevant committees, the process from application to provisional approval is estimated to take 12 months. Following provisional accreditation, it is estimated that the pathway to full accreditation will take a further 24 months.

- **REVISION RECORD**

Contact: Manager, Accreditation, CPD and Reporting

Date	Version	Approver	Description
14/08/21	V1	B2021/10 R18	New document
11/08/2023	V2	B2023/7 R13	Reviewed for updates and to address Certificates of Advanced Training
NEXT REVIEW 2025			
