



RCSI SURGICAL
AFFAIRS



CRITERIA AND STANDARDS FOR THE ACCREDITATION OF FELLOWSHIP POSTS



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DOCUMENT CONTROL				
Document Title	Criteria and Standards for the Accreditation of Fellowship Posts in Ireland			
Document Number	QMS Assigned			
REVISION	STATUS	AUTHOR	APPROVED BY	DATE
2.0	Draft	EOK		08-02-19

RCSI SURGICAL AFFAIRS MISSION

“We will support the RCSI Noble Purpose by delivering excellence in Surgical Education and Training and by setting and supporting the highest possible standards in Surgical Practice. We will at all times act in the interest of patients and the quality of their care.”

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Section 1 - Accreditation Criteria

Documents and information submitted as part of the Fellowship Accreditation process to the Royal College of Surgeons in Ireland should demonstrate that the Fellowship meets the following criteria:

Accreditation Criteria	
1.1	The Fellowship should be of 12-24 months duration.
1.2	The Fellowship has a clearly defined curriculum or learning outcomes.
1.3	There is clear evidence of deliverability of the proposed curriculum.
1.4	The required clinical activity for satisfactory completion of the Fellowship is clearly defined (for example, minimum logbook numbers, case-mix, primary/secondary operator level, operating sessions or outpatient clinics).
1.5	Within the Fellowship, there should be a defined requirement for research during training
1.6	Within the Fellowship, there are processes to assess satisfactory performance in training. At a minimum, there should be two mid-point reviews (including progression and remediation of unsatisfactory performance) and a mechanism to confirm satisfactory completion of training.
1.7	In developing the Fellowship consideration has been given to workforce issues including the impact of sub-specialisation on the workplace.
1.8	Any commercial sponsorship of the Fellowship is clearly stated and has no inappropriate influence on the educational programme content, structure and outcomes.
1.9	The Fellowship content is underpinned by evidence-based research and practice and aims to promote the development of competent surgeons.
1.10	The target audience of the Fellowship falls within the remit of and is in line with The Fellowship title and content.
1.11	The learning objectives of the Fellowship are clearly defined, appropriate for the target audience, and are properly referenced in the Fellowship content.
1.12	The learning outcomes are achievable and properly reflected in the Fellowship content, structure and assessment.
1.13	The Fellowship structure and teaching and learning methods used are relevant and appropriate to deliver the defined learning outcomes.
1.14	The Fellowship includes in-training formative assessments. Assessment methods are relevant and appropriate and in accordance with the Fellowship learning outcomes. Fellowship providers may be required to use electronic assessment tools or quality management systems to ensure the optimal quality of the programme.
1.15	Appropriate resources and learning materials are available to support the learning by the delegates.
1.16	The Fellowship Director has proven relevant expertise, skills, and knowledge to deliver the learning outcomes within the Fellowship.
1.17	The Fellowship Director is on the Specialist Division of the Register and in good standing with the Medical Council.

Section 2 – Accreditation Standards

The criteria for accreditation define the set of standards that have to be met by the Fellowship organiser. The Accreditation Standards represent qualitative characteristics that define the evidence required from Fellowship organisers sufficient to meet the Accreditation Criteria.

Accreditation Standards	
2.1 – Organisation	
2.1.1	The provider must supply full details of the organisation running each Fellowship. This should include the job titles and contact details of The Fellowship Director.
2.1.2	The post has a single Fellowship Director assigned, with authority and accountability for the Fellowship post.
2.1.3	<p>It is the responsibility of the Fellowship Director to support the Fellowship program by devoting his or her efforts to its management and administration. The director is also expected to be an active and recognized participant in the institution’s clinical and educational programs. This general responsibility includes the following specific activities:</p> <ul style="list-style-type: none"> ○ Preparation of a written statement: to include an outline of the goals of the Fellowship program with respect to knowledge, skills, and other attributes, a narrative description of the Fellowship, including details of fellows’ involvement in clinical, research, teaching, administrative activities and a description of the relationship between the Fellowship and the core or specialty training programs within the institution. ○ Selection of fellows for the program in accordance with institutional and departmental policies and procedures. ○ Supervision of fellows through explicit written descriptions of supervisory lines of responsibility for the care of patients. Such guidelines must be communicated to all members of the Fellowship program staff and to the general surgery staff and residents. Fellows must be provided with prompt, reliable systems for communicating and interacting with supervising physicians. ○ Organisation and supervision of the research activities of fellows. ○ Organisation and supervision of fellows’ participation in conferences and other educational activities, and oversight of implementation of the Fellowship curriculum. ○ Organisation and supervision of fellows’ interaction with general surgery residents at the educational, research, administrative, and patient care levels. ○ Implementation of fair procedures, as established by the sponsoring institution, regarding academic discipline complaints and grievances.
2.1.4	<p>The education provider should ensure that the educational activity/event:</p> <ul style="list-style-type: none"> ○ should not be inappropriately influenced or biased by commercial organisations in its content or organisation; ○ Should provide the opportunity for faculty to declare any financial or other interest related to the educational activity/event.
2.1.5	The Fellowship Director must be a surgeon who is qualified to supervise and to educate fellows in the broad field of the Fellowships focus as defined previously and must meet requirements similar to those required of program directors of RCSI-approved specialty training programs. The director must be recognized nationally or regionally by his or her peers as a leader in some facet of the area of the program’s focus. Specifically, the Fellowship Director must:

	<ul style="list-style-type: none"> ○ Have completed a recognised specialty training programme and be on the Specialist Division of the medical register. ○ Have an appointment in good standing to the medical staff of the institution sponsoring the Fellowship program. ○ Be licensed to practice in their specialist area in the state in which the sponsoring institution is located. ○ Must have a minimum of two years' experience, post specialist training. ○ Must have published in a peer-reviewed journal or presented at a national or regional meeting. ○ Demonstrated experience and/or expertise in teaching residents, fellows, or postgraduate surgeons on a regional, national or international level.
2.1.6	Providers must demonstrate that the trainer's qualifications and experience are appropriate to deliver the Fellowship. Presenters/trainers/facilitators must have relevant expertise, knowledge, and skills to deliver the Fellowship content identified in the program/syllabus.
2.1.7	Fellowship accreditation requires that fellows are employed on contracts with appropriate terms and conditions. The programme director must detail the conditions of employment for the post along with the policies, mechanisms, and practices in place to support the fellows. The provider must supply a draft copy of the Fellowship employment contract and learning agreement.

2.2 Fellowship Details	
2.2.1	A Fellowship rationale should be provided including an explanation for why the Fellowship was originally developed and how it will contribute to the development of competent surgeons.
2.2.2	The provider must detail any eligibility criteria for Fellowship applicants, such as prerequisite knowledge, skills, qualifications or level of entry.
2.2.3	The provider must provide evidence that the proposed program provides education and training that is significantly more specialised than that currently provided at a generalist level in one or more of the RCSI's specialty training programs.
2.2.4	The post provides a structured educational experience designed to deliver the requirements of a particular subspecialty that are not readily available within the CCST training programme.
2.2.5	The post has an established curriculum (which defines levels of patient care, patient safety, medical knowledge, practice-based learning and improvement, communication skills, and professionalism required).
2.2.6	The post should not impinge on the training of pre-CCST trainees.
2.2.7	The post takes place in an institution that assumes ultimate responsibility for delivery of the programme of training and education; this includes providing sufficient protected time for both trainer(s) and trainees (fellows) and necessary financial support for the programme.
2.2.8	The post has identified faculty that will assume educational and supervisory responsibilities throughout the programme.

2.3 - Facilities	
2.3.1	Fellowship trainees should have easy access to educational facilities, including library and IT resources, for personal study, audit, and research and their timetables should include an equivalent to half a day per week to allow for this.

2.4 – Aims, Objectives & Learning Outcomes	
2.4.1	The Fellowship learning outcomes should be described in full. A learning outcome is a statement of what a participant is expected to know, understand and be able to do at the end of a period of learning and of how the learning is to be demonstrated. It is therefore concerned with the achievements of the learner and is a way of communicating clearly what we expect our learners to be able to achieve by the end of the Fellowship. Learning outcomes can fall under the following headings: Knowledge and understanding; Practical (Clinical and Technical) Skills; Personal and professional skills.
2.4.2	There must be clear linkages between the Fellowship learning aims and learning outcomes.

2.5 – Fellowship Post Details	
2.5.1	Fellowship trainees should be allocated to approved posts commensurate with their level of training and appropriate to the educational opportunities available in that post. Due consideration should be given to individual training requirements to minimise competition for educational opportunities.
2.5.2	Fellowship trainees should have at least 2 hours of facilitated formal teaching each week (on average). (For example, locally provided teaching, regional meetings, annual specialty meetings, journal clubs, and x-ray meetings).
2.5.3	Fellowship trainees should have the opportunity and study time to complete and present at least one clinical audit or quality improvement project in every twelve months.
2.5.4	Fellowship trainees should have the opportunity to complete a minimum of 20 WBAs per year (not including those done in a simulated setting), with an appropriate degree of reflection and feedback, the mix of which will depend upon their specialty and level of training.
2.5.5	Fellowship trainees must be assigned an educational supervisor and should have negotiated a learning agreement prior to commencing the Fellowship.
2.5.6	Fellowship trainees should have the opportunity to undertake three or more clinics a week with a mix of new and follow-up patients that relate directly to the Fellowship.
2.5.7	Fellowship trainees should have the opportunity to participate in four or more operating sessions per week and have access to a network of colleagues working in the same specialist area.
2.5.8	Fellowship trainees should have the opportunity to make independent clinical decisions and to operate, both independently and under supervision, on the full range of surgery as defined by the Fellowship curriculum.
2.5.9	Fellowship trainees should have one session per week protected study time, which would usually be expected to result in publications/presentations.
2.5.10	Fellowship trainees must have the opportunity to attend a specialist multidisciplinary team (MDT) clinics for the investigation and case management in their specialist area.

2.6 – Learning Methods	
2.6.1	The provider must detail the range of teaching and learning methods employed in The Fellowship and the reasons behind the choice of methods.

2.6.2	The provider must detail the range of assessment methods employed on the Fellowship (if any), and the reasons behind the choice of assessment. There should be clear linkages between the Fellowship learning outcomes and any assessment undertaken.
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2.7 – Evaluation and Feedback	
2.7.1	On completion of a Fellowship, the fellow and supervisor should provide feedback on the Fellowship – particularly regarding the extent to which the fellow’s learning outcomes have been met – together with the fellow’s logbook. These will be assessed by the RCSI and surgical specialty reviewers. Those successfully completing their Fellowship will be awarded a certificate signed by the RCSI and the appropriate surgical specialty association.
2.7.2	Where previous Fellowship trainee feedback highlights areas of dissatisfaction, details of any remedial action should be included within the submission.
2.7.3	The provider must detail any planned future changes or quality improvements to the Fellowship programme.

Section 3 – Conditions for Fellowship Accreditation

Once Fellowship Accreditation has been granted, the applying organisation will be subject to the conditions outlined below.

Conditions for Fellowship Accreditation	
3.1 – Organisation	
3.1.1	Fellowship accreditation from The Royal College of Surgeons in Ireland is not transferrable.
3.2 Statements Regarding Accreditation	
3.2.1	Once the programme director has received a confirmation stating that their Fellowship has been accredited and full payment has been received, the following statement can be made: 'Accredited by the Royal College of Surgeons in Ireland'. Details of all accredited Fellowships will be listed on the website.
3.3 - Logo	
3.3.1	Accredited Fellowships can use the 'Accredited by the Royal College of Surgeons in Ireland' Logo on Fellowship materials, certificates and websites relating to the Fellowship. The initials 'RCSI', the words 'The Royal College of Surgeons in Ireland', and the RCSI logo are all registered trademarks and may not be used without the written consent from the Royal College of Surgeons in Ireland.
3.4 – Certificates	
3.4.1	Accredited Fellowships will be able to provide certificates to Fellowship trainees following the conclusion of the Fellowship, which bear the 'Accredited by the Royal College of Surgeons in Ireland' Logo.
3.5 – Eligibility	
3.5.1	Fellowship accreditation is only applicable to Fellowships that run for 12 to 24 months unless stipulated. Only Fellowships that meet RCSI standards will be accredited.
3.6 – Validity	
3.6.1	Fellowship accreditation will be valid for a specific Fellowship for four years unless stated otherwise by the College. Once the Fellowship accreditation term has expired, the Fellowship Director will be required to apply for re-accreditation. If fellowship accreditation is not renewed, the Fellowship provider must cease to advertise or publicise any association with the RCSI.

3.7 – Quality Assurance	
3.7.1	Organisers of accredited Fellowship programmes will be required to comply with the monitoring processes. All Fellowship participants and supervisors will be required to complete an annual evaluation on the online monitoring platform. The Fellowship organisers will also be required to provide an annual progress report. The RCSI reserves the right to send a representative(s) to review any accredited Fellowships at any time.

3.8 – Equality Diversity and Inclusion	
3.8.1	All Fellowships must comply with RCSI guidelines in relation to Equality Diversity and Inclusion, including RCSI policies on bullying and inappropriate behavior.
3.8.2	Programme directors are required to sign and comply with RCSI Charter on EDI, bullying and dealing with inappropriate behavior.

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