



## RECOMMENDATIONS FOR HOSPITALS SEEKING COLLEGE APPROVAL FOR VOCATIONAL TRAINING IN ANAESTHESIA

(Document effective from the beginning of the 2004 Hospital Employment Year)

### 1. GENERAL

- 1.1 An Approved Hospital Department is one that has been accredited by the College for the purpose of providing trainees with supervised training experience in anaesthesia.
- 1.2 Approved Hospital Departments will be recognised by the College for training only if they are part of one or more Approved Training Programs. (see College Professional Document TE 10 - *Recommendations for Vocational Training Programs*)

### 2. THE APPROVED HOSPITAL DEPARTMENT

- 2.1 Hospital Departments that request accreditation for ANZCA training will be assessed by College representatives with approval being granted by Council.
- 2.2 Approved Hospital Departments must agree to re-inspection by College representatives when requested by Council.
- 2.3 Job descriptions for the specialist anaesthesia staff, anaesthesia trainees and other anaesthesia providers must be acceptable to the College (see College Professional Document TE6 *Guidelines on the Duties of an Anaesthetist*).
- 2.4 When specialist anaesthesia staff are appointed, the advice of a properly constituted committee capable of evaluating the applicants must be sought. See College Professional Document PS44 – *Guidelines to Fellows Acting on Appointments Committees for Senior Staff in Anaesthesia*.
- 2.5 Positions in Departments approved for training in anaesthesia by the College must be advertised with that approval noted.
- 2.6 An Approved Hospital Department of Anaesthesia must be under the direction of a suitably qualified anaesthetist who is responsible for the organisation, teaching and service requirements of that Department.
- 2.7 A Supervisor of Training in Anaesthesia must be nominated by the Department of Anaesthesia and notified to College Council. It is not permissible for the Supervisor of Training to be the Director of the Department of Anaesthesia. This appointment

requires ratification by Council. The duties of the Supervisor of Training are specified in College Professional Document TE5 *Policy for Supervisors of Training in Anaesthesia*.

- 2.8 There must be adequate supervision of trainees by specialist anaesthesia staff who hold the FANZCA or another qualification acceptable to Council (see College Professional Document TE3 *Policy on Supervision of Clinical Experience for Vocational Trainees in Anaesthesia*). Specialist anaesthesia staff must be familiar with the College's training program.
- 2.9 Trainees may be employed full or part-time. Their duties must include normal, emergency and out-of-hours supervised work. Part-time training is subject to the requirements of the relevant College Regulations.
- 2.10 The hospital must agree to notify Council via the Supervisor of Training and the Regional Education Officer of any changes that might affect training. Importance is placed on changes such as alterations in work-load and increases or decreases in the number of senior staff and trainees working in the Department.
- 2.11 The Department of Anaesthesia must have:
  - 2.11.1 A minimum of one specialist anaesthetist who holds the FANZCA.
  - 2.11.2 A minimum of two full time equivalent (FTE) specialist anaesthesia staff with qualifications acceptable to Council.
  - 2.11.3 Sufficient FTE anaesthesia specialists to provide supervision for all trainees in accordance with College Professional Document TE3 *Policy on Supervision of Clinical Experience for Vocational Trainees in Anaesthesia*.
  - 2.11.4 Adequate secretarial staff. Most departments will require at least one full-time secretary with several being needed in larger hospitals (see College Professional Document TE7 *Recommendations on Secretarial and Support Services to Departments of Anaesthesia*).
  - 2.11.5 Adequate office space for the specialist staff.
  - 2.11.6 Suitable study facilities for trainees.
  - 2.11.7 Access to a suitable conference room for quality assurance, clinical review and educational activities.
  - 2.11.8 Regular programs of quality assurance and teaching appropriate to the size of the department (see College Professional Document TE9 *Quality Assurance*)
  - 2.11.9 Adequate library facilities with information sources appropriate to anaesthesia and its sub-specialities.
  - 2.11.10 Ready access to appropriate computer facilities for specialists and trainees.
  - 2.11.11 Access to clinical support services appropriate to the role of the hospital.

2.11.12 Anaesthesia specialists participating in the College's *Maintenance of Professional Standards* Program or its equivalent.

This Professional Document should be interpreted with regard to the following Documents:

- PS4 *Recommendations for the Post-Anaesthesia Recovery Room*
- PS6 *Recommendations on Minimum Requirements for the Anaesthesia Record*
- PS7 *Recommendations on the Pre-Anaesthetic Consultation*
- PS8 *Guidelines on the Assistant for the Anaesthetist*
- PS18 *Recommendations on Monitoring During Anaesthesia*
- T1 *Recommendations on Minimum Facilities for Safe Administration of Anaesthesia in Operating Suites and Other Anaesthetising Locations*
- TE2 *Policy on Vocational Training Modules and Module Supervision*
- TE3 *Policy on Supervision of Clinical Experience for Vocational Trainees in Anaesthesia*
- TE4 *Policy on Duties of Regional Education Officers in Anaesthesia*
- TE5 *Policy for Supervisors of Training in Anaesthesia*
- TE6 *Guidelines on the Duties of an Anaesthetist*
- TE7 *Guidelines for Secretarial and Support Services to Departments of Anaesthesia*
- TE9 *Guidelines on Quality Assurance in Anaesthesia*
- TE10 *Recommendations for Vocational Training Programs*
- TE13 *Guidelines for the Provisional Fellowship Program*
- TE17 *Policy on Advisors of Candidates for Anaesthesia Training*
- PS44 *Guidelines to Fellows Acting on Appointments Committees for Senior Staff in Anaesthesia*

## **COLLEGE PROFESSIONAL DOCUMENTS**

*College Professional Documents are progressively being coded as follows:*

<i>TE</i>	<i>Training and Educational</i>
<i>EX</i>	<i>Examinations</i>
<i>PS</i>	<i>Professional Standards</i>
<i>T</i>	<i>Technical</i>

**POLICY** – defined as ‘a course of action adopted and pursued by the College’. These are matters coming within the authority and control of the College.

**RECOMMENDATIONS** – defined as ‘advisable courses of action’.

**GUIDELINES** – defined as ‘a document offering advice’. These may be clinical (in which case they will eventually be evidence-based), or non-clinical.

**STATEMENTS** – defined as ‘a communication setting out information’.

*This document has been prepared having regard to general circumstances, and it is the responsibility of the practitioner to have express regard to the particular circumstances of each case, and the application of this document in each case.*

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*Whilst the College endeavours to ensure that professional documents are as current as possible at the time of their preparation, it takes no responsibility for matters arising from changed circumstances or information or material which may have become available subsequently.*

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