How to complete:

The Royal Australasian College of Surgeons (RACS) Council has delegated the responsibility for the assessment of training posts to the Specialty Boards (see Appendix), using the approved Criteria for the Accreditation of Training Posts. Refer to the Accreditation of Hospitals and Posts for Surgical Education and Training booklet available on the RACS website for more information. Each criterion has its minimum requirements listed, and hospitals are requested to attach documentation that substantiates the achievement of this.

- **Criteria requiring a single response**
  For some criteria, a single response will satisfy requirements irrespective of the number of specialties for which accreditation is sought.
  An *example* of this is Standard 3, criterion 14: Supervised experience in Intensive Care Unit (ICU). The minimum requirement for this is evidence of accreditation by the Australasian College of Emergency Medicine. By attaching a copy of the accreditation certificate from the applicable body, this criterion is satisfied.

RACS ACCREDITATION CRITERIA

Standard 1 – Building and maintaining a Culture of Respect for patients and staff. **A hospital involved in surgical training must demonstrate and promote a culture of respect for patients and staff that improves patient safety.**				
Accreditation Criteria	**Factors Assessed**	**Minimum Requirements**	**Essential in the Hospital / within Hospital Network**	**List of documents attached that substantiate the achievement of minimum criteria**
1. The hospital culture is of respect and professionalism	Expressed standards about building respect and ensuring patient safety.	¢ Hospital provides a safe training environment free of discrimination, bullying and sexual harassment. ¢ Hospital actively promotes respect, including teamwork principles. ¢ Hospital has policies and procedures, including training for all staff, which promotes a culture and environment of respect.	In the hospital In the hospital In the hospital	
2. Partnering to Promote Respect: MoU or similar statements/agreements about the need for 'Building Respect, Improving Patient Safety	Hospital collaboration with RACS about complaints of unacceptable behaviours (Fellows, Trainees and			

Standard 2 -

Standard 8 - Clinical governance, quality and safety[2] **A hospital involved in surgical training must be fully accredited and have the governance structure to deliver and monitor safe surgical practices**				
Accreditation Criteria	**Factors Assessed**	**Minimum Requirements**	**Essential in the Hospital / within Hospital Network**	**List of documents attached that substantiate the achievement of minimum criteria**
37. Hospital accreditation status	Evidence of accreditation	¢ Hospital accredited by ACHS or NZCHS	In the hospital	
38. Risk management processes with patient safety and quality committee reporting to Quality Assurance Board	Documentation on processes including those for correct site surgery	¢ Quality Assurance Committee or equivalent (with senior external member) reporting to appropriate governance body ¢ Documentation published by hospital on HR, clinical risk management and other safety policies	In the hospital In the hospital	
39. Head of Surgical Department and governance role	Documentation on structure of surgical department Position description and reporting lines	¢ Designated head of department with defined role in gf• bGÔ hpni ™		

44.	Occupational safety	Documented measures available to ensure safety against hazards such as toxins, exposure to infectious agents transmitted through blood and fluid, radiation, and potential exposure to violence from patients and others.	∉ Available measures to prevent these occurring ∉