

Area of Need Site Accreditation Standards

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The Royal Australian
and New Zealand
College of Radiologists®

The Faculty of Radiation Oncology

Area of Need Site Accreditation Standards

Radiation Oncology

Standards

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TABLE OF CONTENTS

1. Introduction	4
2. Area of Need Site Accreditation Process	5
3. Area of Need Site Accreditation Standards	7
4. Related documents	15

About the College

The Royal Australian and New Zealand College of Radiologists (RANZCR) is a not-for-profit professional organisation for clinical radiologists and radiation oncologists in Australia, New Zealand and Singapore. RANZCR is a membership organisation led by clinicians who are elected by the membership, with oversight from a Board of Directors.

We are the leaders in medical imaging and cancer care. We enable the best practice of clinical radiology, radiation oncology and associated subspecialty areas through engagement, education and advocacy; and by supporting clinical excellence. Our Fellows play a critical role in the diagnosis and monitoring of disease, provide interventional treatments and targeted treatments for cancer.

Our evidence-based culture focuses on best practice outcomes for patients and equity of access to high quality care, underpinned by an attitude of compassion and empathy. As an organisation we are committed to diversity and inclusion and to the training and professional development of our Fellows and trainees throughout their career. We are dedicated to enhancing the health outcomes of Māori, Aboriginal and Torres Strait Islander peoples and to increasing their participation in the professions of clinical radiology and radiation oncology by ensuring our educational programs support the best outcomes for them. This includes a commitment to cultural safety in our organisation, for staff and members.

Purpose

To enable the safe and appropriate use of clinical radiology and radiation oncology to optimise health outcomes for our patients and society.

Values

Our leadership values underpin all that we do and embody our focus on quality patient outcomes.

Integrity

We maintain the confidence and trust of our stakeholders through our honesty, transparency and authenticity.

Accountability

We take responsibility for all our actions, behaviours, performance, commitments and decisions.

Inclusivity

We foster an inclusive workplace and clinical environments for people in Australia and New Zealand.

Innovation

We constantly strive to reimagine excellence in everything we do.

Code of Ethics

The Code defines the values and principles that underpin the best practice of clinical radiology and radiation oncology and makes explicit the standards of ethical conduct the College expects of its members.

1. INTRODUCTION

1.1 Purpose and scope

The Royal Australian and New Zealand College of Radiologists (RANZCR) is responsible for ensuring that International Medical Graduates (IMGs) practising in Australia are fully supported to practise safely. To achieve this aim, RANZCR's core role is to ensure there are structures, processes and policies to support IMGs to reach the standard of a RANZCR-trained radiation oncologist in order to practise safely, effectively and collaboratively.

A broader aim is to ensure those upskilling in RANZCR accredited Area of Need sites in regional and rural Australia and/or state and territory determined as Areas of Need (AoN) are well supported.

The aim of AoN accreditation is to ensure that a minimum acceptable standard of facilities (staff, equipment, diversity of clinical material and support) is available to provide a successful upskilling environment for International Medical Graduates working in Areas of Need positions and also for IMGs towards specialist recognition in Australia.

This document lays out the requirements for radiation oncology sites and practices to gain Area of Need accreditation for the upskilling of IMGs on the Specialist Recognition pathway.

1.2 Definitions

In this document:

Ahpra means Australian Health Practitioner Regulation Agency which is the administrative body for the Medical Board of Australia.

AMC means Australian Medical Council which is an independent national standards body for medical education and training. The AMC is an external accreditation entity for the purposes of the Health Practitioner Regulation National Law in Australia.

AoN means Area of Need which are the geographical locations determined by state and territory governments, primarily in rural and remote areas, where there is an inability of employers to attract locally trained specialists.

CAO means Chief Accreditation Officer (CAO). The CAO is the officer in charge of all matters with site accreditation. The CAO is a member of the Radiation Oncology Education and Training Committee.

College means The Royal Australian and New Zealand College of Radiologists.

CPD means Continuing Professional Development. CPD is how health practitioners maintain, improve and broaden their knowledge, expertise and competence and develop the personal and professional qualities required throughout their professional lives. CPD is also referred to as Continuing Medical Education (CME).

DWS means District Workforce Shortage which are geographical areas determined by the Federal Government based on statistical data where the local population has less access to Medicare subsidised medical services.

Fellow means a College member admitted to Fellowship of The Royal Australian and New Zealand College of Radiologists.

FRANZCR means Fellow of The Royal Australian and New Zealand College of Radiologists.

IMG means International Medical Graduates. IMGs are graduates who have completed their primary and specialist medical training in radiation oncology overseas; outside of Australia and/or New Zealand.

IMG Committee means the College body tasked with addressing all matters relating to International Medical Graduates (IMGs) including administering International Medical Graduate Specialist Recognition assessment and Area of Need assessments.

MBA means Medical Board of Australia. The MBA is responsible for the registration of medical practitioners, developing standards, codes and guidelines as well as investigating complaints about medical practitioners.

National Law means the Health Practitioner Regulation National Law 2009 (Commonwealth) as applicable from time to time.

ROETC means the Radiation Oncology Education and Training Committee. The ROETC is the governing body that develops the educational content, assessments and accreditation mechanisms that ensure that trainees can become competent clinical radiologists

RANZCR Accredited Training Site means an organisation that actively engages and is responsible and accountable for the delivery of training in radiation oncology. These organisations may be public or private entities who are accredited by the College and are required to follow the relevant training curriculum and accreditation standards as set out by the College.

Specialist Assessment means assessment for either comparability to an Australian-trained clinical radiologist or radiation oncologist (Specialist Recognition) or suitability for an Area of Need (AoN) position.

SR means Specialist Recognition. SR is the pathway for international medical graduates who are overseas-trained specialists applying for assessment of comparability to the standard of a specialist trained in that specialty in Australia.

Specialty means a branch of medicine. At RANZCR there are two specialities; clinical radiology and radiation oncology.

2. AREA OF NEED SITE ACCREDITATION PROCESS

2.1 Accreditation period

To align with the MBA requirement for IMGs found partially comparable to complete the Specialist Recognition pathway within four years, RANZCR AoN accreditation is granted for a period of up to four years.

A new AoN site will undergo a site assessment to validate the ability of the site to meet the AoN accreditation standards as part of the initial accreditation process. Once an AoN IMG has commenced in the position a follow-up site visit is required to be undertaken within the first 12 months.

2.2 Accreditation process

- (a) The AoN accreditation standards are a subset of RANZCR's radiation oncology training site accreditation standards.
- (b) The AoN Site Accreditation process is a 4-stage process.
Full details: [AoN Site Accreditation Application Guidelines](#)
- Stage 1: Paper based review of the Site Self-Assessment application.
 - Stage 2: Site assessment to ensure site meets the AoN Site Accreditation standards
 - Stage 3: Follow up site assessment after the IMG has been on site to ensure
 - Stage 4: Variation not involving a site visit



2.3 Conditions of Accreditation

- (a) Specific conditions or requirements of accreditation will be applied to each AoN site. Such conditions may include limitations as to the scope of upskilling the site is accredited to provide an IMG.
- (b) The CAO may request a visit outside the regular accreditation cycle to any site at his/her discretion. A progress report may be required prior to that visit irrespective of whether it is a regular visit or not.
- (c) Failure to meet the accreditation standards may result in suspended, conditional or removal of accreditation of that site.

2.4 Accreditation Outcomes

The ROETC will determine if a site meets the requirements to be accredited to upskill IMGs on the specialist recognition pathway. There are two possible outcomes:

- (a) Accredited or
- (b) Not accredited

Outcome	Definition	Follow-up
Accredited	Site has demonstrated that there are adequate systems, structures and staffing to support IMGs requiring up to 12 months upskilling on the Specialist Recognition pathway.	Site visit within 12 months of IMG commencing at the site.
Not accredited	Concern the site does not have sufficient systems, structures and staffing to adequately support the IMG.	a. Site advised to reapply for accreditation at a later date once noted concerns have been addressed or b. Site requested to refer to accreditation standards.

3. AREA OF NEED SITE ACCREDITATION STANDARDS

3.1 Structure of AoN Standards

The AoN Standards have been developed to:

- (a) Promote the welfare and interests of IMGs
- (b) Ensure IMGs have the appropriate knowledge, skills and supervision to provide quality patient care.
- (c) Support a wide range of educational and upskilling opportunities for IMGs to ensure that IMGs are competent, safe and supported on the Specialist Recognition pathway
- (d) Support IMGs to complete the Specialist Recognition pathway requirements, including work-based assessments and, where required, examinations.
- (e) Ensure accredited sites meet College standards and requirements for education, training, workplace safety and patient care and safety.

Standard 1. Governance

A clear governance structure in relation to upskilling and training delivery in each AoN site is a key element of satisfactory governance. The following standards outline the key minimum criteria and requirements to meet satisfactory AoN accreditation site arrangements.

Standard 1.1

The AoN site adheres to the RANZCR reporting requirements as relevant to the Specialist Recognition pathway requirements

Criteria:	Specific Requirements:	Evidence:
1. AoN site and AoN supervisor complies with the RANZCR reporting requirements.	<ul style="list-style-type: none">Undertakes supervisor assessments on the IMG's performanceCompletes assessments as per the IMG's SR assessment outcome report and requirements.	
2. AoN supervisor oversees IMGs to comply with the RANZCR reporting requirements.	<ul style="list-style-type: none">IMG assessments are submitted as per the SR assessment outcome requirements.IMGs notify the College in writing of any variations to the information submitted to the College.	
3. AoN site ensures that RANZCR is advised of changes to AoN supervisor.	<ul style="list-style-type: none">AoN site to ensure RANZCR is notified to any change in supervisor within two weeks of the change.	
4. Site notifies RANZCR of any change of circumstances within their department which may potentially lead to its failing to meet the minimum criteria for its accreditation status.	<ul style="list-style-type: none">Initial written notification to Chief Accreditation Officer (CAO) via the College within two weeks of any change.	

Standard 2 Upskilling Environment

The AoN site must be able to provide the required upskilling for IMGs on the Specialist Recognition pathway. To be accredited for AoN upskilling, sites must meet the following requirements.

Standard 2.1

The AoN site provides an effective orientation program to ensure the IMG is supported and cognisant of the Australian clinical environment.

Criteria:	Specific Requirements:	Evidence:
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<p>1. The AoN site provides orientation to the site.</p>	<p>Including but not limited to;</p> <ul style="list-style-type: none"> • An introduction to all key staff members. The supervision level and responsibilities of the IMG are known by all • The role and relationships between the IMG, IMG supervisors, other members of the healthcare team • The departmental layout and equipment • Training on systems (i.e. planning and contouring software) • Site and Australian systems including electronic medical records, referral systems and Medicare • Case-mix description / models of care / work practices / referral mechanisms • Training on all processes pertaining to receiving referrals, management correspondence, rostering, after hours and on call work and WH&S procedures • The administrative arrangements and organisational structures within the practice including legal matters • IMG management (supervision, training and teaching processes) • Awareness of the location of all resources available including policies and procedures related to discrimination, bullying, harassment and cultural safety. 	<ul style="list-style-type: none"> • Specific and complete departmental orientation program.
<p>2. The AoN site provides orientation to the Australian clinical environment.</p>	<ul style="list-style-type: none"> • Systematic program to become cognisant of the Australian health system • Cultural competency for the local community • Indigenous and cultural health processes and resources. 	

Standard 2.2		
The AoN site delivers a commitment to effective communication, cultural awareness and ethical conduct.		
Criteria:	Specific Requirements:	Evidence:
1. Effective communications	<ul style="list-style-type: none"> • IMGs are aware of availability and appropriate use of interpreter services for patients, their families / carers. 	<ul style="list-style-type: none"> • Staff interviews • Consultant interviews • Department policies.
2. Cultural awareness	<ul style="list-style-type: none"> • IMGs provided with cultural competency training relevant to the local environment • Site is aware of RANZCR's Statement of Intent for Māori, Aboriginal and Torres Strait Islander Health • Site is aware of RANZCR Grievance Policy (on discrimination, harassment and bullying) and other relevant local policies. 	
3. Ethical criteria	<ul style="list-style-type: none"> • Site is aware of RANZCR's Code of Ethics • As above. 	

Standard 2.3		
The AoN site provides access to educational activities aligned to the SR pathway requirements.		
Criteria:	Specific Requirements:	Evidence:
1. Site ensures IMGs have access to educational activities which may include but not limited to those listed in the evidence section.		<ul style="list-style-type: none"> • AON Site Self-Assessment Form (SSAF): List of educational activities including: <ul style="list-style-type: none"> ➤ tutorials ➤ journal clubs ➤ teaching courses ➤ mock examinations ➤ ward rounds ➤ multi-disciplinary team meetings ➤ morbidity and mortality audits ➤ incident reports ➤ planning audits.

2. IMGs at the AoN site have access to appropriate RANZCR supported educational activities and Faculty teaching courses.	<ul style="list-style-type: none"> Activities/courses that are listed on or relevant to the IMGs SR assessment outcome requirements and may include but not limited to: Statistical Methods, Evidence Appraisal & Research for Trainees(SMART) workshop Paediatric teaching seminar / Brachytherapy courses Exam preparation courses. 	
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Standard 2.4

The AoN site provides training experiences necessary to fulfil the SR pathway requirements

Criteria:	Specific Requirements:	Evidence:
1. IMGs are provided the opportunity to complete the practical requirements as detailed in the SR assessment outcome report.	<ul style="list-style-type: none"> IMGs are given protected time to complete assessments and activities as detailed in the SR assessment outcome report IMGs are supported to undertake and successfully complete the SR pathway requirements. 	

Standard 2.5

The AoN complies with the RANZCR Guideline *Clinical Supervision and 'Protected' Time for Trainees and Directors of Training - A Practical Guideline*.

Criteria:	Specific Requirements	Evidence:
1. The training site provides the mandatory hours required for IMGs to spend in supervision, training and teaching onsite.	<ul style="list-style-type: none"> Supervisors spend teaching hours with the IMG, discussing cases, clinical issues and management plans IMG is allocated four hours of protected time and a minimum of fifteen hours of clinical time per week as outlined in the Clinical Supervision and 'Protected' Time for Trainees and Directors of Training–A Practical Guideline based on 1 FTE position. 	<ul style="list-style-type: none"> IMG Roster

Standard 2.6		
The AoN site provides time, resources and support to ensure IMGs are able to meet the SR pathway requirements.		
Criteria:	Specific Requirements:	Evidence:
1. AoN supervisor completes the range of IMG assessments as detailed in the SR assessment outcome.	<ul style="list-style-type: none"> • IMGs have the appropriate support and opportunity to complete all requirements as detailed on the SR assessment outcome. 	
2. IMGs attend and actively participate in both new patient and follow-up clinics.	<ul style="list-style-type: none"> • IMGs gain experience in the management of inpatients and outpatients with a range of clinical problems, including toxicities from radiation treatment, complications of malignancy and symptom control and palliative care • IMGs have an active involvement in assessment and decision-making processes • IMGs have the opportunity to present clinical cases to ROs as a component of clinics. 	<ul style="list-style-type: none"> • IMG Roster
3. IMGs attend and actively participate in team meetings.	<ul style="list-style-type: none"> • IMGs attend (in person or virtual) and contribute to multidisciplinary team meetings in a range of subspecialties including but not limited to: <ul style="list-style-type: none"> • Head and Neck • Lung • GIT • Urology • Breast • Skin. 	<ul style="list-style-type: none"> • List of available Multi-Disciplinary Team (MDT) meeting.
4. IMGs have dedicated time for supervised planning activities including contouring and plan evaluation.		<ul style="list-style-type: none"> • Rostered timetable of planning activities • Use of Contouring and Planning evaluation tool.

Standard 2.7		
The AoN site provides a safe working environment free from any bullying, harassment, or discrimination.		
Criteria:	Specific Requirements:	Evidence:
1. The AoN site offers IMGs, regular opportunities to discuss with AoN supervisors or clinical supervisors any issues of bullying, harassment, or discrimination confidentially.		<ul style="list-style-type: none"> • IMG interview • Supervisor interviews • Incident reports.
2. The AoN supervisor understands the organisations WH&S policies and protocols to follow should an incident occur. RANZCR Grievance Policy		<ul style="list-style-type: none"> • Induction protocol • Incident reports • Services offered to an IMG if required.
3. The AoN site has access to support services, if required by the IMG.		<ul style="list-style-type: none"> • Supply details of services offered to an IMG (if required), for example, an employee assistance program (EAP) or other professional services.

Standard 3 Physical Environment
To be an AoN site accredited for IMG upskilling the site must ensure the following physical requirements are met.

Standard 3.1		
The AoN site provides adequate resources and support for IMGs.		
Criteria:	Specific Requirements:	Evidence:
1. IMGs have access to a physical environment conducive to supporting training needs.	<ul style="list-style-type: none"> • Quiet office space for IMGs away from clinical areas • Ready access to computers with internet and current software packages • Access to videoconferencing and/or web-based learning for educational activities. 	<ul style="list-style-type: none"> • Site visit inspection of facilities.

2. Oncology medical records are available for all patient management episodes.	<ul style="list-style-type: none"> Departmental medical records are of a standard that facilitates good patient care Site is able to provide details of the total number of patients and of case-mix. 	<ul style="list-style-type: none"> Twelve-month report of patient numbers and case-mix.
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Standard 4 Workforce Arrangements

The following standards outline the important principles surrounding recruitment, retention, supervision and support of the IMGs within AoN sites.

Standard 4.1

The ratio of supervisor to IMG at the AoN site must be appropriate to the IMG's requirements.

Criteria:	Specific Requirements:	Evidence:
1. The ratio of IMG to full-time equivalent (FTE) consultant radiation oncologists is never greater than 1:1.	<ul style="list-style-type: none"> The ratio of AoN supervisor to IMG at the AoN site must be commensurate with the supervision level required The AoN site is able to support Level 2 supervision for the designated period that the IMG requires Level 2 supervision Level 2 supervision requires the supervisor to be on-site at least 80% of the time. 	<ul style="list-style-type: none"> Documentation of filled radiation oncologist FTE positions and number of IMGs Documentation of number of FTE radiation oncologists on site at any given time.

Standard 4.2

Each site has a designated AoN supervisor

	Specific Requirements:	Evidence:
1. The designated AoN supervisor is a Fellow of the Royal Australian and New Zealand College of Radiologists (FRANZCR).	<ul style="list-style-type: none"> The AoN supervisor must be a minimum of three years FTE post Fellowship. 	<ul style="list-style-type: none"> Confirmation by RANZCR.
2. Site fully supports the AoN supervisor in their supervisory responsibilities.	<ul style="list-style-type: none"> Support AoN supervisor to attend relevant RANZCR activities, such as Director of Training workshops There is a balanced distribution of educational activities among all radiation oncologists (clinical supervisors). 	

Standard 4.3

Staffing within each AoN site must be adequate to support the SR pathway requirements of the IMG.

Criteria:	Specific Requirements:	Evidence:
1. There is a minimum number of (FTE) consultant radiation oncologists with an active workload to support the IMG.	<ul style="list-style-type: none">The AoN supervisor to be able to provide Level 2 supervision for at least the initial 6-month period. Level 2 supervision requires on-site, in person supervision for at least 80% of the time.	<ul style="list-style-type: none">AON Site Self-Assessment Form (SSAF): List of radiation oncologists staffingDocumentation of individuals' clinical workload.
2. Non-medical staff, including medical physicists, radiation therapists, nurses, allied health workers and administrative staff are available to support the training experience.	<ul style="list-style-type: none">AoN site to have full complement of clinical and radiation therapy staff to provide adequate support for the IMG.	
3. IMGs have the opportunity to communicate with other medical specialists as relevant to individual patient care.	<ul style="list-style-type: none">Access to Multi-Disciplinary Team (MDT) meetings.Video conferencing facilities as required.	<ul style="list-style-type: none">SSAF: List of MDTs.

4. RELATED DOCUMENTS

- [International Medical Graduate Assessment Policy \(Australia\)](#)
- [Reconsideration Review and Appeal of Decisions Policy](#)
- [RANZCR's Code of Ethics](#)
- [RANZCR's Conflict of Interest Policy](#)