

New Accreditation Standards

Information Webinar Series

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The Royal
Australian &
New Zealand
College of
Psychiatrists





Acknowledgement of Country

We acknowledge Aboriginal and Torres Strait Islander Peoples as the First Nations and the Traditional Owners and Custodians of the lands and waters now known as Australia, and Māori as tangata whenua in Aotearoa, also known as New Zealand.

We recognise and value the traditional knowledge held by Aboriginal and Torres Strait Islander Peoples and Māori.

We honour and respect the Elders past and present, who weave their wisdom into all realms of life — spiritual, cultural, social, emotional, and physical.

Recognition of Lived Experience

We recognise those with lived and living experience of mental health challenges and distress, their chosen families, whānau, carers and kin. Their contributions, diverse perspectives, insight, and courage keep us grounded and inclusive, and focused on humanity, healing, and hope. We strive to work in genuine partnership in all that we do, honouring their voices by centring their experiences and expertise.



Housekeeping



Microphone will be muted during the webinar



The webinar will be recorded



Please use the chat function for any comments and questions



Opportunity for questions at the end of the webinar

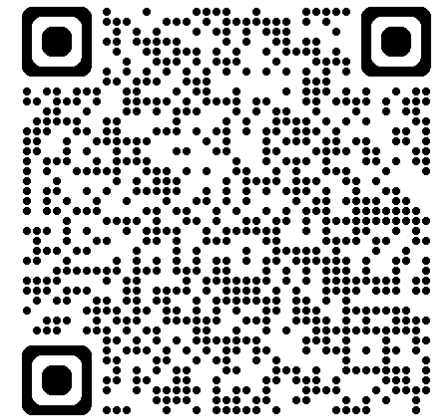


Have you seen our FAQs?



For further information: contact the Accreditation Team on

accreditation@ranzcp.org



Purpose

To provide information about the updated accreditation standards, how they impact RANZCP accreditation activities and stakeholders, and the timelines for implementation.

Target Audience

RANZCP Accreditation stakeholders:

- ❖ Accreditation Assessors/panel members
- ❖ Trainees and Supervisors
- ❖ Directors of Training/Advanced Training
- ❖ DOT Admin Support Staff
- ❖ Governance and oversight committees
(AC, BTC/NZTC, CFT, EC, BCT, SATs, TAC)
- ❖ Other RANZCP members and staff who are interested in accreditation activities

Webinar Objectives

1. Purpose of Accreditation Standards
2. Explain key changes and implications
3. Outline updated accreditation terminology
4. Introduce the Accreditation Decision-Making Risk Framework
5. Promote consistent interpretation and application of the standards
6. Build awareness of accreditation at the College

Webinar Content

- ❖ Background leading to the changes
- ❖ Purpose of Accreditation Standards
- ❖ Accreditation Standards Hierarchy
- ❖ Old vs New terminology & definitions
- ❖ Accreditation Risk Matrix
- ❖ Supporting resources
- ❖ Accreditation activities and responsibilities

Notes:

1. This webinar will **not** go through the new standards.
2. The RANZCP Accreditation Standards have been approved by the Board and can be accessed on the website: [Link to the new Accreditation Standards](#)

Background – Why change?

- ❖ Following the 2023 NHPO¹ review, Health Ministers directed the AMC² to introduce a **standardised national accreditation framework** for specialist medical training.
- ❖ The AMC Model Standards aim to improve **consistency, transparency and procedural fairness** across colleges.
- ❖ All specialist medical colleges must align their accreditation frameworks with the AMC model.
- ❖ The RANZCP is an **early adopter**, updating its accreditation approach while maintaining AMC and MCNZ³ accreditation.

¹ NHPO = National Health Practitioner Ombudsman

³ MCNZ = Medical Council of New Zealand

² AMC = Australian Medical Council

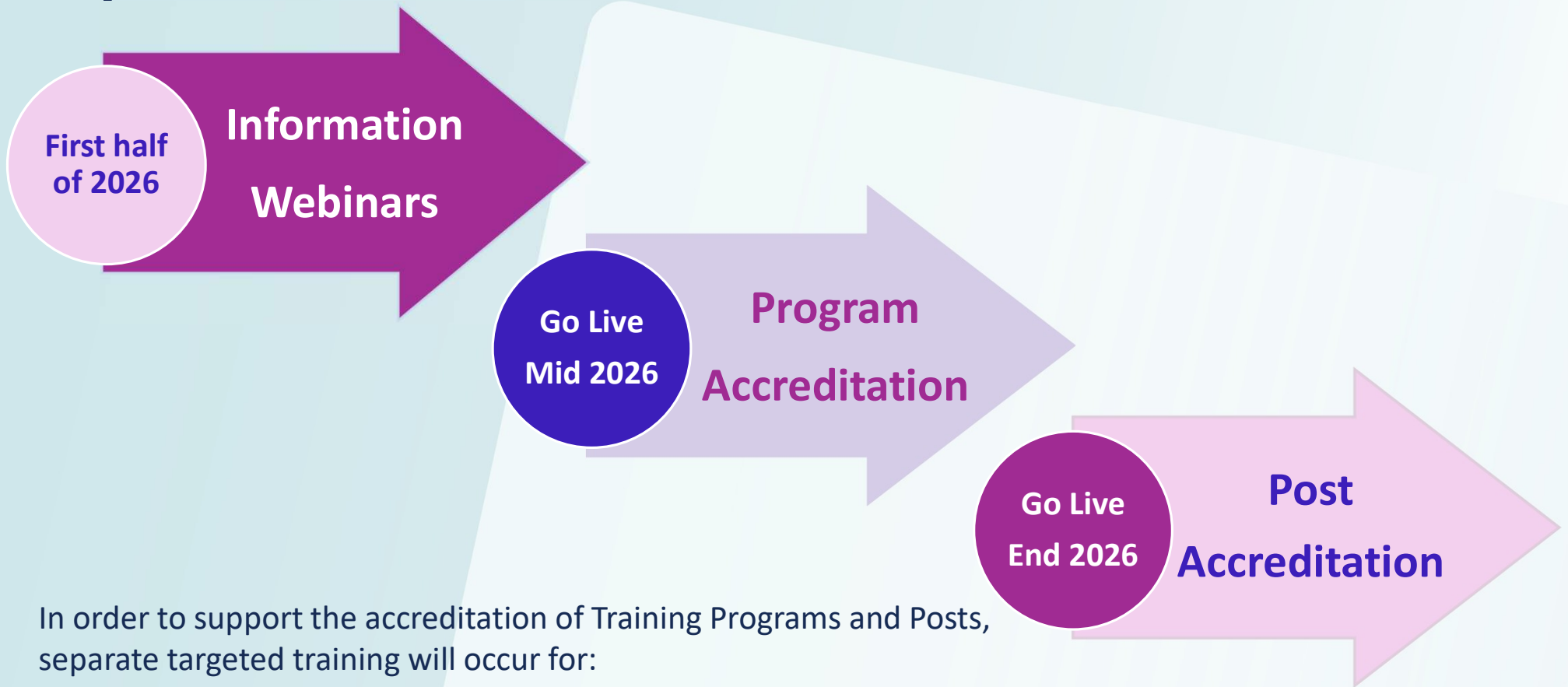
What these changes bring to RANZCP

- ❖ A **Single set of outcome-based accreditation standards** for training settings (programs and posts)
- ❖ A **risk-based** decision making model that will support **consistency and transparency** and provide a **standardised approach** to accreditation of training settings across all specialist medical colleges
- ❖ **Modernised terminology** that aligns with the AMC
- ❖ **Fully aligned supporting documents** across the accreditation system with **separate procedures** for each different accreditation activity

Other benefits

- ❖ A **standardised approach** to accreditation of training settings across all specialist medical colleges
- ❖ **Reduces duplication and confusion** for health services managing multiple training programs
- ❖ **Emphasises procedural fairness:**
 - ❖ **review draft reports** including draft findings and decisions prior to finalisation
 - ❖ the **decision-making process is transparent** (supported by the risk framework)
- ❖ **Building public trust** and improving quality assurance

Implementation Timeline



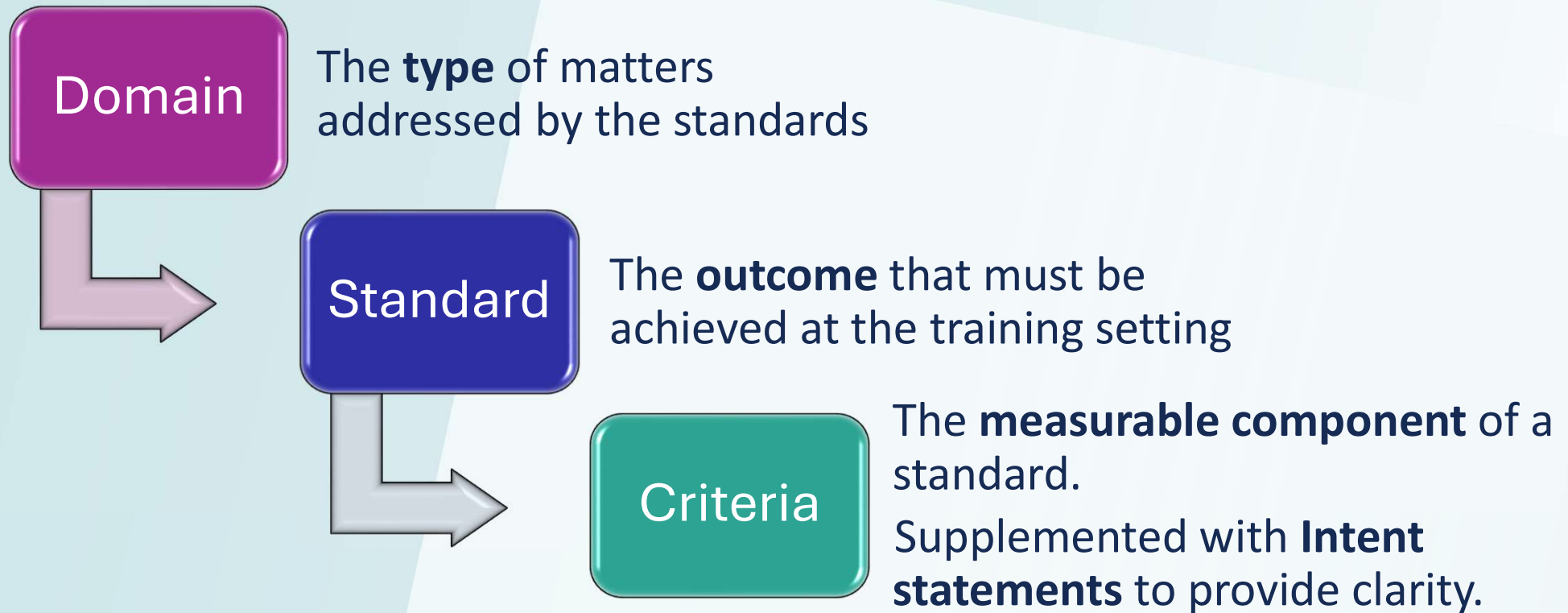
In order to support the accreditation of Training Programs and Posts, separate targeted training will occur for:

- Accreditation Committee Panel Members
- Branch/New Zealand Training Committees

Accreditation Standards – What are they?

- ❖ *General:* Pre-determined, evidence-based requirements used to assess the quality, safety and performance of an organisation, program, or service.
- ❖ Key Aspects of Accreditation Standards:
 - Focus on Quality & Safety
 - Independent External Evaluation
 - Continuous Improvement
- ❖ *RANZCP context:* The Accreditation Standards define the outcomes that must be achieved at the training setting and is assessed through measurable criteria.

New Accreditation Standards Hierarchy

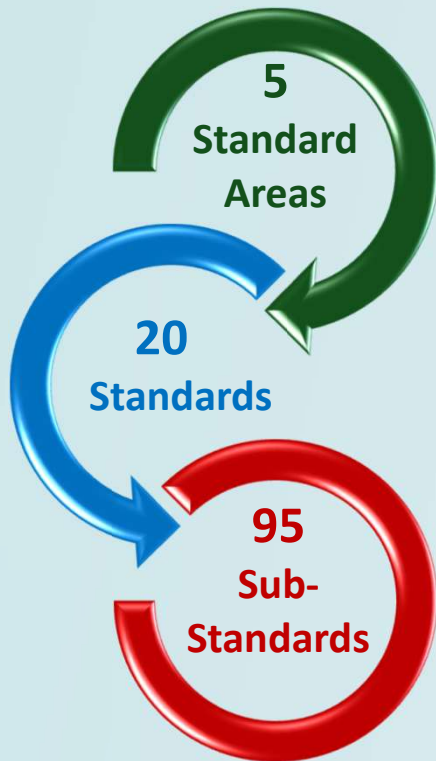


What are the Differences?

Current RANZCP Standards

New Standards

Training Programs



Training Posts



Training Programs + Posts



What are the Differences?

Current Standards

Training Programs

Standard Areas:

- # 1 – Training Program Coordination
- # 2 – Provision of Required Training Experiences
- # 3 – Selection, Monitoring & Support of Trainees
- # 4 – Standard of Training
- # 5 - Supervisors

Training Posts

Standard Areas:

- # 1 – Service Requirements & Post Position Description
- # 2 – Provision of Required Training Experiences
- # 3 – Organisation, Monitoring & Support of Trainees
- # 4 – Institutions, Services & Training Posts
- # 5 - Supervision

New Standards

Training Programs + Posts (Settings)

Domains:




- Domain 1** – Trainee Health and Welfare
- Domain 2** – Supervision, Management and Support Structures
- Domain 3** – Educational and Clinical Training Opportunities
- Domain 4** – Educational Resources, Facilities and Equipment

Strong alignment with AMC Model Standards

- Mapping of existing RANZCP standards to the AMC Model Standards showed **strong alignment**
- Only **four new criteria** were identified as not already covered
- These relate to:
 - cultural safety, diversity, equity and inclusion of both trainees and their training environment, and also in relation to delivery of care.
- Consultation with partnership committees informed interpretation and evidence expectations

NEW - Intent Statements

To clarify the rationale and expected impact of each accreditation criterion:

-  Guide interpretation and consistent application of each criterion across accreditation processes.
-  Articulate the educational and quality assurance outcomes the criterion is designed to support.
-  Promote transparency and shared understanding among stakeholders, including training providers and assessors.

Intent Statement – example with approved CSR

Criterion 1.1.10: Trainees have access to resources that support their health and welfare.

Intent: *Colleges should assess whether there are a range of resources that are appropriate to the size and nature of the training setting to support trainee health and welfare, and that trainees are aware of, and are able to access, those resources. Examples of resources include training on workplace hazards relevant to the specialty, peer support networks, opportunities for professional debriefing, support after experiencing traumatic events, mentorship or confidential counselling services such as Employee Assistance Programs. Large settings may offer a range of formal resources and programs. Small settings may have more informal ways of providing resources or utilise external resources.*

Addition to Intent (RANZCP-specific):

Training settings must ensure that there are adequate and robust processes and controls in place to ensure trainee safety, particularly in relation to facilities for patient interviews and consultations.

Intent Statement – example with approved CSR

Criterion 3.2.3: Trainees are supported to complete their training program assessments in a timely manner.

Intent: *Colleges should assess whether there are sufficient opportunities for trainees to meet milestones and progress through the training program at the expected rate. This includes the opportunity to complete workplace-based assessments in a timely manner and time to attend and study for college examinations. Reasonable steps should be taken to remove any systemic barriers to the progression of trainees, for example, lack of time with colleagues who can assess workplace-based assessments.*

Addition to Intent (RANZCP-specific):

It is expected that trainees have access to resources and consultant support reasonably required to complete the compulsory RANZCP Scholarly Project and the Psychotherapy Written Case, including through linkages with other settings where required.

Terminology Changes – Criteria assessments

Current Standards

Met

Substantially
Met

Partially Met

Not Met

New Standards

Met

- There is evidence that the criterion has been fully met.

**Substantially
Met**

- Some but not all aspects of the criterion have been met. For example, there is alignment of policy/intent, but evidence of delivery is not yet available, or there is some misalignment of policy/intent that needs to be addressed.

Not Met

- The criterion has not been met, i.e. there is a gap or significant misalignment of outcome or policy with the criterion.

Terminology Changes – Accreditation Outcomes

Current Standards

New Standards

Fully
Accredited

Provisionally
Accredited

Not
Accredited

**NEW
Settings**

Provisionally
Accredited

Not
Accredited
(Refused)

**Existing
Settings**

Accredited

Conditionally
Accredited

Not Accredited
(Revoked)

**Accreditation
Decision**

=

**Accreditation
Outcome**

+

Duration

+

Conditions

Definitions – NEW Training Settings

Outcome	Alignment to Risk Framework	Duration & Conditions
<p>Provisionally Accredited</p>	<ul style="list-style-type: none"> meets all of the accreditation criteria OR does not meet all of the accreditation criteria but has the potential to meet them once trainees are in place. The overall risk assessment is rated as low or medium with conditions required. 	<p>Provisionally accredited for up to 12 months, allowing trainee appointments, with monitoring and a review within 12 months to confirm conditions. If no trainees are appointed, provisional status may lapse or require a new application before trainees can be appointed.</p>
<p>Not Accredited (Refused)</p>	<p>A new training setting that does not meet all of the accreditation criteria. The overall risk assessment is rated as high or extreme.</p>	<p>Accreditation not granted.</p> <p>Any requirements that must be met in the future will be outlined. Once requirements have been met, the setting may be required to submit a new accreditation application providing assurance that it continues to meet all other accreditation criteria at the time of reapplication.</p>

Definitions – Existing Training Settings

Outcome	Alignment to Risk Framework	Duration & Conditions
Accredited	<ul style="list-style-type: none"> meets all of the accreditation criteria OR does not meet all of the accreditation criteria but the overall risk assessment is rated as low and it has been determined conditions are not required. 	Accredited to a maximum of 5 years , subject to satisfactory routine monitoring submissions.
Conditionally Accredited	<ul style="list-style-type: none"> does not meet all of the accreditation criteria and the overall risk assessment is rated as low, medium or high with conditions required. 	Accredited for 3 months to 5 years depending on the severity of the risk and: <ul style="list-style-type: none"> conditions being addressed within the defined timeframe satisfactory routine monitoring submissions meeting any other specific monitoring requirements.
Not Accredited (Revoked)	An existing training setting that: <ul style="list-style-type: none"> does not meet all of the accreditation criteria and the overall risk assessment is rated as extreme with conditions required. 	Accreditation is not granted . A revocation date is set, with feedback and timeframes provided for addressing requirements. From the revocation date, training cannot be counted and no new trainees may be appointed. Reaccreditation requires a new application once requirements are met.

Definitions – other

Accreditation Assessment and Outcomes Terminology

Condition	A qualification attached to the granting of accreditation at a training setting which requires action within a defined timeframe. * Previously RANZCP Recommendation
Commendation	A training setting's area of strength relevant to the delivery of the training program.
Recommendation	A non-mandatory action to improve trainee experience and/or outcomes at the training setting. * Previously RANZCP Quality Improvement
Training Setting	The place or position accredited, or applying for accreditation, by the college. This includes sites, posts, practices and networks (which are composed of multiple settings). Where RANZCP accredit networks or programs, these standards will apply, recognizing that various settings will contribute to meeting the standards overall.
Procedural Fairness	At RANZCP, before an accreditation decision is approved, training settings are given the draft report and proposed outcome to check facts and review conditions, ensuring fairness and transparency.

Accreditation Risk Matrix

Purpose: To guide accreditation decisions using a structured evaluation of risk.

Benefits:

- Promotes fair decision making.
- Improved consistency across the College.
- Enables safe service delivery while managing risk.
- Clarifies education and quality assurance outcomes.

Application of the Risk Matrix

- **Not applied at the individual criterion level** (i.e. met/substantially met/not met)
- **Undertaken after reviewing the totality of the criteria** that are assessed as *substantially met and/or not met* with deficiencies identified
- **If all criteria are assessed as “met”, a risk assessment is not required.**
- The assessment focuses on 2-key dimensions:
 - Impact:** How areas of non-compliance affect training quality and patient safety
 - Likelihood:** How likely the training setting is to address identified issues within a reasonable timeframe

Standards		Met ¹	Substantially Met ¹	Not Met ¹
Domain 1 – Trainee Health and Welfare				
1.1	Training takes place in a learning environment that supports trainee health and welfare.	/10	/10	/10
Domain 2 Supervision, management and support structures				
2.1	Clear governance structures support the delivery of effective education and training.	/7	/7	/7
2.2	Trainees receive appropriate and effective supervision.	/5	/5	/5
2.3	Trainees are supported in delivering quality patient care, including culturally safe care.	/3	/3	/3
Domain 3 Educational and clinical training opportunities				
3.1	Trainees are provided with the appropriate depth, volume and variety of clinical and other learning experiences.	/4	/4	/4
3.2	Learning opportunities are transparent, equitable and appropriate for the level of training.	/3	/3	/3
Domain 4 Educational resources, facilities and equipment				
4.1	Trainees have access to appropriate educational resources and facilities.	/2	/2	/2
4.2	Trainees have access to appropriate clinical equipment.	/1	/1	/1
Overall Risk Assessment Evaluation Rating <i>This must be undertaken if there are any scores for 'Substantially Met' or 'Not Met' to determine the overall impact on training and the likelihood of the setting being able to implement actions to meet the criteria within a reasonable period. Refer to Appendix E for the matrix.</i>		<input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Extreme		

Accreditation Risk Matrix



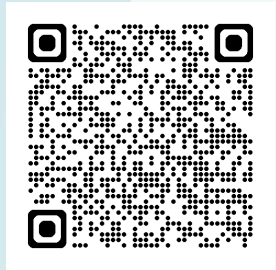
The **IMPACT** on training at the training setting, noting that this has consequences for patient safety. This includes considering the impact on current and future trainees.

The **LIKELIHOOD** of the training setting/training provider being **ABLE** to implement actions to meet the criterion/criteria within a reasonable period.

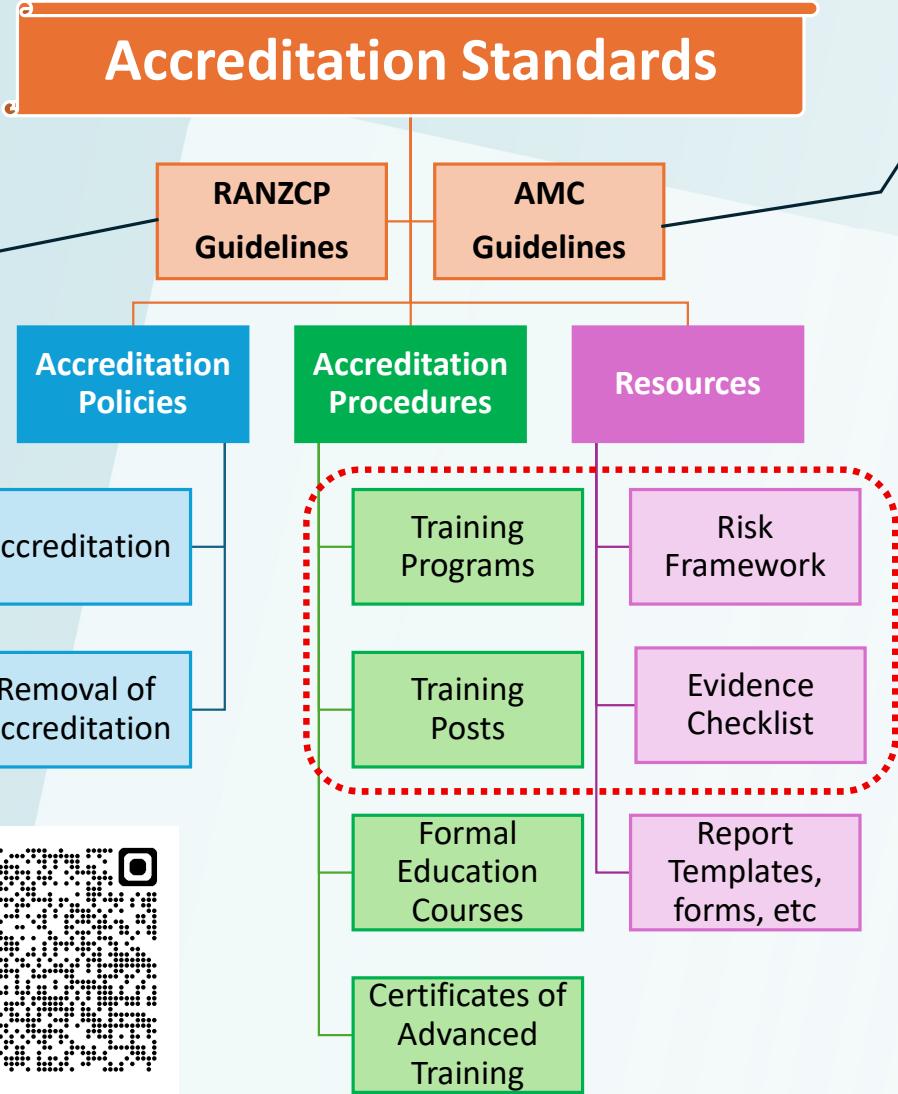
	Insignificant	Minor	Moderate	Major	Severe
Rare	Low	Medium	High	Extreme	Extreme
Unlikely	Low	Medium	High	High	Extreme
Possible	Low	Low	Medium	High	High
Likely	Low	Low	Low	Medium	Medium
Almost certain	Low	Low	Low	Low	Medium

Supporting Resources

- Stage 1 Trainees
- Acute Adult Inpatient Workloads for Trainees
- *Community Patient Workloads*
- Recommended Infrastructure for Rural/Remote Trainees
- Remote Supervision
- *Evidence Checklist*
- *Accreditation Handbook*



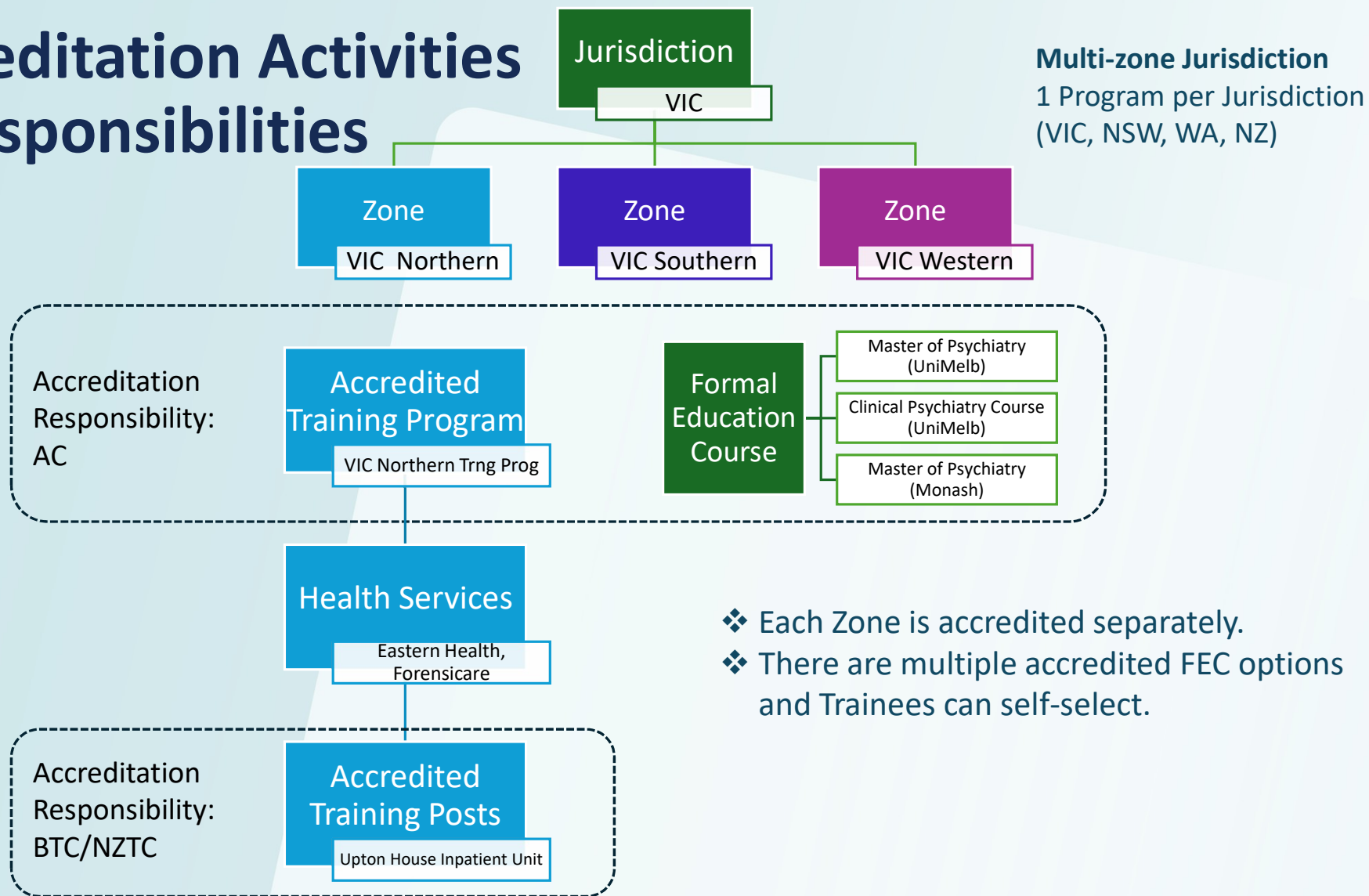
Dedicated webpage with FAQs



- Application of the Risk Framework & Development of Conditions
- Assessing Supervision
- Design of Accreditation Surveys
- *Structured Learning (§3.1.2)*
- *Assessing standards relating to cultural safety and delivery of culturally safe care*

Training Settings

Accreditation Activities & Responsibilities



- ❖ Each Zone is accredited separately.
- ❖ There are multiple accredited FEC options and Trainees can self-select.

Jurisdiction

SA

Zone

SA

Accredn
Resp: AC

Accredited
Training Program

SA Psychiatry Training
Program

FEC

SA Psychiatry BTC
FEC

Health Services

CALHN, NALHN, SALHN

Accredn
Resp:
BTC/NZTC

Accredited
Training Posts

RAH Neuro-Psychiatry

Jurisdiction

QLD

Zone

QLD

Single-zone Jurisdiction
1 Program per Jurisdiction
(ACT, NT, QLD, SA, TAS)

Accredited
Training Program

QLD Psychiatry Training
Program

FEC

Postgraduate Training in
Psychiatry FEC QLD

Health Services

Mater Health Services,
Sunshine Coast Hospital & HS...

Accredited
Training Posts

Mater Young Adult HS
Public – Consultation Liaison

We love feedback

About the Information Webinar

- please complete the feedback form

Accreditation Standards Changes:
Information Webinar Feedback



About the upcoming accreditation changes or any other accreditation queries

- Accreditation@ranzcp.org

