

The Australasian
College of
Dermatologists
ACN 000 551 824



THE AUSTRALASIAN COLLEGE
OF DERMATOLOGISTS

ACCREDITATION STANDARDS FOR TRAINING POSITIONS

Version 9
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ACD CRITERIA FOR ACCREDITATION OF COLLEGE TRAINING POSITIONS

The Criteria for Accreditation of College Training Positions is as described in the College Standards for Accreditation of Training Positions.

The Criteria outlines the minimum criteria requirement to be met by a Training Facility Network. However the College encourages Training Facility Networks to meet all criteria.

Mandatory Criteria is considered as absolutely necessary by the College for the provision of education and training to trainees. Training Facility Networks must meet each mandatory criterion for full accreditation of a training position to be granted. Mandatory criteria can be identified by the use of the word '**must**'. For example, *trainees **must** actively participate in supervised dermatological clinics each week.*

If a position being accredited is less than 1 Full Time Equivalent, all Criteria as listed in the Standards should be apportioned on a part time pro rata basis.

If during a review it is found that a Training Facility Network is unable to fulfil each of the mandatory criteria, a recommendation of development required in this area will be documented, and an effective strategy for change is required. If this strategy is not complied with, accreditation of a training position may be withdrawn. For more information please refer to the current copy of the College's Accreditation Reviews and Outcomes Guidelines available on the College website www.dermcoll.edu.au.

A Training Facility Network where a training position is principally based **must** notify the College when and/or if there will be or has been any significant change to the way in which education and training is delivered. Notification is particularly important if the change affects the Training Facility Network in meeting fulfilment of the mandatory criteria.

ACD RATING SCALE FOR ACCREDITATION OF COLLEGE TRAINING POSITIONS

During a review the Criteria as listed in the Standards will be assessed by a three point rating scale. Each Standard will be given a rating of either:

- Below Accreditation Standard
- Expected Accreditation Standard
- Above Accreditation Standard

The rating scale is determined by simultaneous assessment across five variables. The variables relate to:

- **Strength of evidence** – judged by corroborating verbal and documentary evidence (inspection as appropriate)
- **Consistency of application** – judged by assessing whether the standard/criterion is being met in all appropriate circumstances on all appropriate occasions
- **Maintenance over time** – judged by assessing the length of time a process has been in place or the period over which outcomes can be demonstrated.
- **Sustainability infrastructure** – judged by assessing the level and sophistication of infrastructure in place to support the process outcomes (infrastructure includes staff, equipment, technology, support, space and time as appropriate to the circumstances)
- **Quality improvement** – judged by assessing the presence or absence of the elements of the quality cycle (monitoring, assessment, action and evaluation)

Definitions of rating scale with reference to each of the variables:

	Below Accreditation standard	Expected Accreditation standard	Above Accreditation standard
Strength of Evidence	There is scant or no documentary evidence. Verbal evidence supports some achievement.	Basic documentation is available and corroborates verbal evidence.	A range of corroborating documentation is available.
Consistency of application	Number of circumstances where the standard is not achieved at all.	Few circumstances where the standard is not achieved.	There is consistent application in all circumstances.
Maintenance over time	Most achievements are the result of recent efforts	Position has achieved basic requirements of the standard/criterion for some time.	Most of the provisions of the standard are met and have been for some time.
Sustainability infrastructure	Little or no infrastructure.	Basic infrastructure is in place.	Infrastructure to support continuous achievement is in place.
Quality Improvement	Little or no evidence of performance review.	Little evidence of on-going performance review and no evidence of improvement actions.	Reviews of performance are conducted with evidence of continuous improvement and effort to strive for best practice.
Summary	Requirements of standard scarcely met. Minimal effort made by the hospital to address the standard/criterion.	The requirements of the standard are generally met in most circumstances.	Accreditation standards are fully met or exceeded

ACD STANDARDS FOR ACCREDITATION OF COLLEGE TRAINING POSITIONS:

The following Standards are used when accrediting a College training position.

Standard One: Education and Training

Training positions provide educational and clinical training opportunities that contribute to enabling trainees to attain the competencies of the ACD curriculum and the requirements of the ACD four year training program.

- 1.1 Schedule of Learning Experiences
- 1.2 General Dermatological Clinics
- 1.3 Surgical Sessions
- 1.4 Patient Case mix and numbers
- 1.5 Dermatopathology
- 1.6 In Training Assessment
- 1.7 Inpatient Exposure
- 1.8 Research
- 1.9 Meetings and Conferences

Standard Two: Supervision and Coordination

Training positions provide effective supervision to support trainees in acquiring the necessary skills, behaviours and knowledge to become competent dermatologists, including an increasing degree of independent responsibility as the Trainee progresses.

- 2.1 Heads of Department
- 2.2 Supervisor of Training
- 2.3 Clinical Supervisors
- 2.4 Supervision of International Medical Graduates
- 2.5 Feedback and Responsibility
- 2.6 Training Facility Network

Standard Three: Equipment, Facilities and Clinical Support

Training positions provide access to the equipment, facilities and clinical support that contribute to enabling Trainees' to deliver and manage patient care across the breadth of the curriculum.

- 3.1 Equipment
- 3.2 Supervision
- 3.3 Diagnostic laboratory services

Standard Four: Learning and Working Environment

Participating training facilities provide an environment that fosters a commitment to learning and a structure that delivers and monitors safe practices.

- 4.1 Educational Services
- 4.2 Orientation
- 4.3 General Education
- 4.4 Trainee Wellbeing
- 4.5 Supervision Support
- 4.6 Audit Program

STANDARD 1: EDUCATION AND TRAINING

1.1 Schedule of Learning Experiences

- 1.1.1 Trainees **must** have one formal structured education session each week (or equivalent), which is protected teaching time (this may be out of hours time).
- 1.1.2 Trainees **must** have rostered "On Site Professional Development (half day per week pro rata per full time equivalent of unstructured time).

Education sessions are based on principles of adult learning and a range of teaching methods is used.

Education sessions are developed with reference to the curriculum and cover an extensive range of dermatology topic areas (linked to learning outcomes of the curriculum).

On Site Professional Development is to be used for Professional Development activities: examples include private study, fulfilment of research and publication requirements and attendance at tutorials. Trainees may spend this time doing clinical work if absolutely necessary and are required to give priority to urgent matters at their institution if there is no other trainee available during this time to attend to them. The Supervisor of Training and Head of Department are required to make every effort to ensure that this time is available to the trainee for the purpose it is intended.

1.2 General Dermatological Clinics

Trainees **must** attend a minimum of four **supervised** general dermatology clinics.

Trainees may attend no more than two additional unsupervised general dermatology clinics per week.

Supervised general dermatology clinics should include both new and review patients with a variety of dermatological conditions, and no diagnostic restriction, which are seen on a referred basis. This includes rural rotations.

One clinic in paediatric dermatology, a three hour session in a private practice setting or a subspecialty clinic, is equal to one general dermatology clinic.

Only one telehealth session per week may be considered as a dermatology clinic providing the session is not limited to audio, is 3 hours in duration and includes a minimum of 5 patients.

If the training position provides less than two supervised general dermatology clinics, any one trainee may occupy this training position for a maximum of six months.

A supervised clinic is defined as a clinic attended by one or more clinical supervisors, supervising no more than five trainees (it is recommended that a supervisor with 5 trainees should not have a patient load and be free to supervise).

1.3 Surgical Sessions

Trainees **must** attend at least one dermatological surgery session per week (or equivalent), and at least one session per fortnight must be **directly** supervised.

A supervised session should include no more than **two** trainees per supervisor at any one time. Exceptions may be granted depending on the surgical arrangements of the site.

Within the training facility network, trainees must have the opportunity to perform essential procedures and observe (or perform where appropriate) advanced procedures documented in the Procedural Dermatology Curriculum.

Facilities can make application for special consideration in exceptional circumstances if this surgical standard cannot be achieved. Applications will be considered by the NACC and the NEdC and if special consideration is granted, the position must be linked to another position within the training facility network that meets the standard.

1.4 Patient Casemix and numbers

Trainees **must** be exposed to a suitable number of patients to obtain the breadth and depth of experience as defined by the Curriculum.

Caseload – Trainees see a minimum of **10-12 new** patients and **20 review** patients per week.

Numbers – Trainees should be allocated no more than **10-12 patients** per three-hour clinic

Casemix – Trainees obtain clinical training experience as defined by the specialist content modules of the curriculum.

1.5 Dermatopathology

Trainees **must** receive instruction in dermatopathology per week and **must** attend at least one dermatopathology training session per week.

Facilities and protected time are available for instruction in dermatopathology, mycology, microbiology, immunology and patch testing.

1.6 In Training Assessment

In Training Assessments **must** be conducted in accordance with College Policy.

Rotation Learning Plans, completed by trainees, are reviewed by Supervisors of Training.

Supervisors are available to complete all work based assessments (ProDAs, DermCEXs and CbDs) in the day to day clinical environment.

Summative In Training Assessment (SITA) are to be conducted twice per year. International Medical Graduates who are required to complete less than 24 months of upskilling must complete a SITA every 3 months.

International Medical Graduates working predominately in private practice must complete two case based discussions and DERMCEXs externally and annually.

Performance Improvement and Performance Improvement Follow Up forms are completed when required.

1.7 Inpatient exposure

Trainees should be directly involved in the management of inpatients.

Trainees are involved in the management of inpatients and see and assess all consultations referred to the Department of Dermatology.

1.8 Research

Trainees should have the opportunity to participate in research.

Trainees are encouraged to prepare and publish research papers to meet training requirements.

Trainees should have access to medical records once ethics approval is obtained.

1.9 Meetings and Conferences

Trainees should be given leave to attend mandatory conferences and/or courses. Trainees are encouraged to attend relevant conferences and meetings and are to have the opportunity for conference leave.

Mandatory conferences include the 1st and 3rd year training days; 2 ACD Annual Scientific Meetings or equivalent in the first three years of training.

STANDARD 2: SUPERVISION AND COORDINATION

2.1 Heads of Department

2.1.1 Trainees must have a designated Head of Department.

2.1.2 Heads of Department (HoDs) **cannot** be Supervisors of Training (SoT) or Directors of Training (DoT). HoDs can only be SoTs if the position is in a rural location. ?

The HoD **must** fulfil their role and responsibilities.

The HoD must always adhere to the college [Professional Code of Ethics](#)

The HoD must be FACD or another appropriate specialist. If the HoD is from another speciality, a deputy HoD with FACD should be appointed where possible.

The HoD must have a minimum of five years Post-Fellowship experience, though more is preferable.

The HoD is required to complete the college's Supervisor Training online CPD module.

The HoD is required to complete the college's Workplace Behaviour CPD module.

The HoD is required to complete a course or workshop in cultural safety training.

The HoD may be considered one of the clinical supervisors.

The HoD is responsible for notifying the National Accreditation Committee of any permanent changes to the training position including, but not limited to:

- Changes to number and type of clinics
- Changes to number of new and review patients
- Changes to times of clinics
- Changes to Supervisors of Training and the number of available Clinical Supervisors

2.1.3 Role and responsibilities within a Training Facility Network:

The HoD's role and responsibilities reflect the relationship that HoDs have with both the Training Facility Network and the College.

Training Facility Network

The HoD and the Training Facility Network ("the Facility") may have an employer-employee relationship created by a written contract. In this case the role and responsibilities of the HoD are described by the Facility and form a part of the contractual agreement. It is understood that in this relationship the HoD will act in the interests of the Facility.

College

The HoD and the College have a relationship based on the HoD's interest in having the Facility accredited by College. In this case the HoD is responsible for ensuring the Dermatological Department meets the standards outlined in College's Accreditation Standards for Training Positions ("the Standards"). The interests of College will have been served by having these standards met.

Conflict of interest

A conflict of interest arises when the HoD's duty to the Facility conflicts with College's standards for meeting accreditation. For example, the HoD has a role in the recruitment of personnel to the position of Dermatology Registrar within a Facility and a responsibility to ensure the applicant is of sufficient professional standard. The HoD must also abide by the rostering and job allocation of trainees as recommended by the College-appointed State Training Structure's Director of Training. A conflict may arise when the allocation of a trainee by the DoT to the HoD's Dermatological Department is considered by the HoD to not be in the best interests of the Facility. As a general principle, where a conflict exists between the HoD's duty to the Facility and the College the HoD should disclose this to both parties. Disclosure to College is a necessary step towards avoiding a breach of duty and is considered a responsibility of the HoD.

HoD responsibilities and the Standards

The role of the HoD in relation to College and work within the Facility is to ensure the Dermatological Department meets College's accreditation standards. As such, the Standards can be considered a template for the responsibilities expected of HoDs. The HoD is responsible for meeting each of the Mandatory Criteria outlined in the Standards and the HoD's responsibilities are limited to meeting these Mandatory Criteria (although College encourages HoDs to meet all criteria listed in the Standards).

In short, the HoD's responsibilities are defined by and limited to meeting the accreditation standards of the College.

Below is a selection of criteria from the Standards (Version 4), with the word "must" indicating that the criterion is a mandatory one.

Standard	Clause no.	Criterion (in part)
Education and Training	1.1	"Trainees must have one formal structured education session each week ..."
	1.2	"Trainees must attend a minimum of four supervised general dermatology clinics ..."
	1.3	"Trainees must attend at least one dermatological supervised surgery session every fortnight ..."
	1.4	"Trainees must be exposed to a suitable number of patients ..."
	1.8	"Trainees should have the opportunity to participate in research; trainees are encouraged to prepare and publish research papers ..."
Supervision and Coordination	2.1	"Trainees must have a designated Supervisor of Training ... (and) be assisted/supervised by a sufficient number of appropriately qualified Clinical Supervisors ..."
	2.5	"The training position must form part of a Training Facility Network, within a State Training Structure ..."
	2.5	"Training Facility Networks and Dermatological Departments must abide by the rostering and job allocation of trainees including "visiting registrars" as recommended by the State Training Structure's Director of Training ..."
Equipment, Facilities and Clinical Support	3.1	"Each trainee must have access to ... (a) dermatoscope, microscope, cryotherapy devices ..."
	3.2	"Training facilities should allow trainees to be supervised appropriately ..."
Learning and Working Environment	4.1	"Educational services and facilities ... must be provided ... (including) a medical library ... major dermatological tests and journals ... designated private study area ..."
	4.2	"General education activities must be provided ... (including) access to the publicised weekly education activities (eg. grand rounds) ..."
	4.4	"Training Facility Networks must ... comply with all Federal and State Laws and Regulations ... including Workplace Health and Safety Standards, the Anti-Discrimination Act and Anti-Bullying Codes ... ensure trainees are not required to work excessive hours ... have physical security and safety when leaving work at unusual hours ..."

2.2 Supervisor of Training

2.2.1 Trainees **must** have a designated Supervisor of Training.

2.2.2 The Supervisor of Training (SoT) **must** fulfil their role and responsibilities.

The Head of Department(HoD) should appoint the SoT

The SoT must always adhere to the college [Professional Code of Ethics](#).

The SoT must be FACD and must have previously been a clinical supervisor in a college accredited training site for a minimum of 3 years.

The SoT should have a minimum of three years Post-Fellowship experience, though more is preferable.

At training facilities with multiple consultants (more than 1) the SoT **cannot** also be the Head of Department.

The SoT cannot be a Director of Training unless the position is in a rural location.

The SoT may be considered one of the clinical supervisors.

The SoT should be readily available to the trainee including after hours.

The SoT is allocated no more than five trainees at any one time.

The SoT should have regular one on one supervision with their trainees (regular is preferred as at least one clinic per fortnight and in rural settings once a month may be acceptable).

The HoD and SoT are responsible for ensuring that notification to the National Accreditation Committee relating to permanent changes to the training position has occurred.

The SoT is required to complete the college's Supervisor Training online CPD module.

The SoT is required to complete the college's Workplace Behaviour CPD module.

The SoT is required to complete a course or workshop in cultural safety training.

The SoT must have the appropriate AHPRA registration and continue to be of good standing.

The SoT **must** conduct their duties as outlined in the current version of the ACD Dermatology [Training Program Handbook](#)

2.3 Clinical Supervisors

2.3.1 Trainees **must** be assisted/supervised by a minimum of two appropriately qualified Clinical Supervisors.

If the training position is in a rural location, one clinical supervisor is acceptable for a maximum period of 6 months. A second external Clinical Supervisor via telederm for rural training positions is encouraged.

2.3.2 The Clinical Supervisor(s) **must** fulfil their role and responsibilities.

The Clinical Supervisor must always adhere to the college [Professional Code of Ethics](#).

All Clinical Supervisor(s) must be FACD or equivalent, with at least one of them FACD.

All Clinical Supervisors should have a minimum of two years Post-Fellowship experience, though more is preferable. If the clinical supervisor has less than two years Post-Fellowship experience, then they must not complete any in-training assessments.

Each Clinical Supervisor is allocated no more than 5 trainees, including junior doctors, at any one time, depending on the type of clinic; however, a ratio of 5 trainees to one Clinical Supervisor is not ideal. It is recommended there be a ratio of 3 trainees to one Clinical Supervisor.

Each Clinical Supervisor has regular supervision of trainee(s). (regular is defined as at least one clinic per month). If the clinical supervisor goes on extended leave, a replacement clinical supervisor should be made available to the trainee(s).

All Clinical Supervisors are required to complete the college's Supervisor Training online CPD module.

All Clinical Supervisors are required to complete the college's Workplace Behaviour CPD module.

All Clinical Supervisors are required to complete a course or workshop in cultural safety training.

All Clinical Supervisors must have the appropriate AHPRA registration and continue to be of good standing.

The Clinical Supervisor(s) **must** conduct their duties as outlined in the current version of the ACD Dermatology [Training Program Handbook](#)

2.4 Supervision of International Medical Graduates

International Medical Graduates who are required to complete 6-12 months upskilling in private practices must have a minimum of two supervisors who are FACD.

International Medical Graduates requiring 6-12 months upskilling should only work for a maximum of 6 months in rural private or public settings if there is only one supervisor.

Approval may be given for 12 months if there is more than one regular supervisor, and satisfactory outcomes of any accreditation reviews.

2.5 Feedback and Responsibility

Constructive feedback and increasing responsibility **must** be given to trainees.

Regular constructive feedback – formal and informal - on performance is provided by supervisors.

Trainees are given increasing responsibility, commensurate with level of experience.

2.6 Training Facility Network

The training position **must** form part of a Training Facility Network, within a State Training Structure.

Each State Training Structure has a designated Director of Training.

The training position participates in a scheduled rotational system within its Training Facility Network. Rotations for each trainee are coordinated by the Director of Training to provide each trainee with maximum exposure to all aspects of the curriculum over the course of the training program, and are arranged to reflect increasing experience.

A trainee should usually spend no longer than twelve or twenty four months (depending on their training facility) in any one accredited training position.

A trainee should only work for a maximum of 6 months in rural private or public settings if there is only one supervisor. Approval may be given for 12 months if there is more than one regular supervisor, and satisfactory outcomes of any accreditation reviews.

A trainee should spend no longer than six months in private practice. Exceptions may be granted depending on location and funding requirements. Trainees working in private practice should keep weekly logs of their patient cases to demonstrate the types of cases they have encountered.

Trainees should have exposure to First Nations patients during their training. The training facilities which have capacity to see First Nations patient will be mapped during the accreditation cycles and the DoTs will ensure the trainees rotate to different sites where they have appropriate exposure to First Nations patients.

International Medical Graduates (IMG) working in private practice should be given the opportunity to attend public hospital clinics on a regular basis. IMGs who require 24 month upskilling and the fellowship examinations should complete at least 50% of their training in a public teaching hospital.

Training Facility Networks and Dermatological Departments must abide by the rostering and job allocation of trainees including "visiting registrars" as recommended by the State Training Structure's Director of Training.

Trainees are to have access to learning opportunities provided within both the Training Facility Network and the State Training Structure.

All trainees must have the appropriate AHPRA registration and continue to be of good standing.

All trainees must have the appropriate residency status or working visas before commencing training in accredited training positions.

STANDARD 3: EQUIPMENT, FACILITIES AND CLINICAL SUPPORT

3.1 Equipment

Equipment **must** enable trainees to be involved in a range of clinical experiences.

Each training position **must** have access to the following within their Training Facility Network:

- Dermatoscope
- Microscope
- Cryotherapy devices
- Electrosurgical devices, especially hyfrecator
- Resuscitation equipment

The following **must** be available within the State Training Network:

- Phototherapy machines: NB UVB or BB UVB, PUVA, Bath PUVA, Hand and foot PUVA
- Pulsed dye laser, PDT light source.
- Other lasers: CO2 or erbium, Non-pulsed dye vascular, Tattoo, Pigment, Hair removal
- Intensified pulsed light

3.2 Supervision

Training facilities should allow trainees to be supervised appropriately.

Training facilities allow trainees to be supervised effectively while obtaining clinical experience.

A designated area must be provided for the trainee, and resource materials are to be easily accessible when required.

3.3 Diagnostic Laboratory Services

Diagnostic laboratory services **must** be accessible and available.

Diagnostic laboratory services within the Training Facility Network are accredited by the appropriate body.

STANDARD 4: LEARNING AND WORKING ENVIRONMENT

4.1 Educational Services

Educational services and facilities that support the delivery of the training program **must** be provided.

Trainees have access to:

- A medical library.
- Major dermatological texts and journals as listed on the College's reading list.
- Download journals.
- View College learning materials on line.
- Designated private study area that is isolated from busy clinical areas.
- Tutorial rooms (when required).

4.2 Orientation

Orientation for new trainees **must** be provided.

Orientation **must** include Workplace Health and Safety Inductions for each facility to be attended in the Training Facility Network.

Trainees must partake in orientation to the facility and department practices.

It is recommended that there be trainee to trainee handover of positions.

4.3 General Education

General educational activities **must** be provided.

The trainee must:

- Have access to the publicised weekly educational activities (e.g. grand rounds).
- Have the opportunity to present cases.
- Be able to attend monthly journal club sessions.
- Have the opportunity to attend educational programs in other disciplines if appropriate.

4.4 Trainee Wellbeing

Doctors are exposed to and more vulnerable to mental health issues than the general population. Trainees are a particularly vulnerable group. A safe and supportive work environment is essential.

Training Facility Networks **must** support the training program with practices that support the health and wellbeing of trainees

Rosters and work schedules need to take into account the principles outlined by the AMA.

Training Facilities must ensure that trainees only partake in overtime in accordance with the AMAs Nationals Code of Practice – Hours of Work, Shift work and Rostering for Hospital Doctors; and in accordance with the relevant Federal and State Government Industrial Instruments, Awards and Guidelines, in particular with regard to continuous on call duty.

Training Facilities must comply with all Federal and State Laws and Regulations relevant to providing a training opportunity and safe working environment for College trainees, including Workplace Health and Safety, and in relation to prevention of bullying, harassment and discrimination.

Training Facilities must ensure that trainees have access to flexible work arrangements in accordance with the Health Services' policy.

Trainees must be made aware of these, and any other relevant Standards, Acts and Codes.

Training Facility Networks **must**:

1. Support conducive learning environments to enable the trainee to fulfil the training program requirements and support practices that support the wellbeing of trainees,
2. Clearly define trainee roles and responsibilities,
3. Encourage trainees to access supports for work life balance and assist them to manage their own wellbeing,
4. Provide mentoring, access to confidential counselling and services for trainees in difficulty

Training Facility Networks **must** ensure the following are in place for all trainees:

Employment	<p>Regardless of duration and placement in a public or private setting:</p> <ul style="list-style-type: none"> • Employment contract with appropriate terms and conditions • Position description • Remuneration package in accordance with relevant Federal and State Government awards • Safe On-call rostering in accordance with AMA requirements and relevant Federal and State industrial requirements • Leave managed by Heads of Department in accordance with the Training Program Handbook.
Health and Safety	<ul style="list-style-type: none"> • Trainees not required to work excessive or unsafe hours • Trainees have physical security and safety at work and when leaving work at unusual hours • Trainees have the provision of transport when work induced fatigue prevents trainees from driving home. • Trainees not required to undertake excessive travelling throughout their rotations • Trainees have access to appropriate accommodation if they are required to rotate to a rural setting • Trainees will have access to hospital EAP, and other wellbeing supports
Clinical Work	<ul style="list-style-type: none"> • Timetable of activities meets the minimum National Accreditation Standards and continues to deliver as accredited • Appropriate number of patients per trainee • Appropriate number of supervisors per trainee • Trainee can develop autonomy under supervision
Trainee Welfare	<ul style="list-style-type: none"> • Trainees have an appropriate number of supervisors • Trainees can rapidly report issues as they arise including standard mechanisms in place on who to report to. Examples include: <ul style="list-style-type: none"> ○ Clinical supervisors ○ Supervisors of Training ○ Supervisors escalate to Heads of Department ○ College Wellbeing & Engagement Officers • Wellbeing & Engagement Officers should be available for site visits and/or private and confidential telephone discussions. • Trainee welfare and wellbeing should always be upheld in accordance with: <ul style="list-style-type: none"> ○ College Professional Code of Ethics ○ college Training Charter ○ all applicable AMA, Federal and State legal and industrial requirements ○ the training site's working condition policies ○ the training site's policies in relation to bullying, harassment and discrimination ○ the training site's employment and industrial policies

4.5 Supervision Support

Training Facilities should promote commitment to the training program by providing support for Supervisors of Training and Clinical Supervisors.

Supervisors of Training and Clinical Supervisors **must** have access to the college's Supervisor Training online CPD module.

Supervisors of Training and Clinical Supervisors have the opportunity to attend education session in their training networks and in Hospitals.

Supervisors of Training and Clinical Supervisors should have negotiated time for supervision/teaching of trainees, and negotiated leave to attend Supervisor Training courses/workshops.

4.6 Audit Program

An audit and peer review program should be regularly conducted.

All Training Facility Networks should have a case review system conducted within the department/practice. Trainees should have the opportunity to be involved in this review.