

# Accredited Training Site Assessment Report



The Royal Australian  
and New Zealand  
College of Radiologists®

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Faculty of Radiation Oncology

**Site Name: Central Coast Cancer Centre  
(Gosford Hospital)**

**Date: 9 May 2022**

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# INTRODUCTION

The Royal Australian and New Zealand College of Radiologist is the Peak Body who engages in accreditation of sites for the provision of training of clinical radiologists in Australia, New Zealand and Singapore.

The Australian Medical Council accredits the College and its training programs. AMC Standard 8.2 delegates accreditation of workplace training to the College. The College Accreditation Standards facilitate evaluation of a training site with the aim to ensure that a minimum acceptable standard of facilities (staff equipment, diversity of clinical material and tuition) is available to provide successful training in clinical radiology and providing a training environment that is supportive of trainee needs and meets curriculum and regulatory requirements. This is a shared responsibility of the College, training sites, training networks, clinical supervisors and trainees.

The Accreditation Standards have been developed around 3 goals:

1. Promote the welfare and interests of trainees
2. Ensure trainees have the appropriate knowledge, skills and supervision to provide quality patient care
3. Support a wide range of educational and training opportunities for trainees to ensure that they are competent and safe

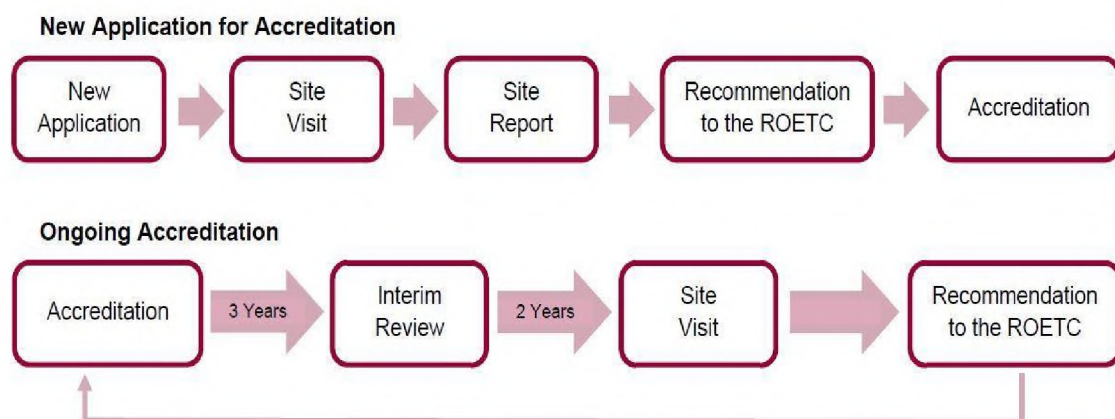
Several standards support each goal and to fulfil the goal a training site must comply with the objectives defined in the standard.

# PURPOSE

The purpose of this accreditation report is to summarise the training site's achievement in meeting the accreditation standards. This is demonstrated by the evidence provided in the pre-site documentation submitted to the College and discussions and observation that occurs during the site visitation. The complex nature of teaching makes this report a central part of the process. It provides a framework for the training site to reference in conjunction with the current Radiation Oncology Curriculum. An opportunity then exists for the training site to work with training networks and the College to address any outstanding standards.

Through the provision of high-quality training and appropriate supervision for the trainees, this ensures safeguarding trainees and trainee delivered patient whilst producing, high quality, competent, safe radiation oncologists.

The accreditation standards work in combination with the Radiation Oncology Network Training Policy. Currently the accreditation cycle is five years with a paper based interim review at the three-year mark. Additionally, progress reports may be requested by the College to monitor any Non-compliance. The accreditation cyclic review is outlined below:



The assessors will award an accreditation status and compose a report that will be reviewed provisionally by the site in the first instance to fact check. The Chief Accreditation Officer (CAO) will make a recommendation to the Radiation Oncology Education and Training Committee for approval.

A status of A or B-level sites will normally be reviewed every three years by desk audit and every five years by a site visit, or more frequently if required. The status of C or D-level sites will be reviewed as determined by the CAO. Linked sites will be reviewed in conjunction with the linked Full site.

The accreditation status of a site or network may be reviewed at the request of that site or network, provided an accreditation report and supporting documentation (indicating the change of circumstances) are submitted.



The accreditation report is confidential and privileged. It is intended only for the use of the training site for whom it is addressed and not for circulation without prior permission from the College.

## SITE ASSESSMENT

Accreditation Site Visit Details:	
Date:	9 May 2022
Time:	10am – 3:30pm
The Accreditation Panel:	
Assessors:	
Dr Vanessa Estall	Chief Accreditation Officer
Dr Madhavi Chilkuri	Radiology Oncologist
Dr Matthew Seel	Radiology Oncologist
Dr Nicola Lowrey	Clinical Observer
Dr Daisy Mak	Clinical Observer
RANZCR Accreditation Team:	
Ms Bettina Brooke	Manager, Accreditation
Ms Caro Napier	Program Officer, Accreditation Training
Site Representatives:	
HoD / DoT(s):	
Dr Roland Yeghiaian-Alvandi	Head of Department
Dr Louise Nardone	Director of Training
Consultants:	
Dr Hester Lieng	Apology
Dr Apsara Windsor	
Dr Simon Tang	Apology
Dr Michael Back	
Dr Thomas Eade	
Dr Andrew Kneebone	Apology
Trainees:	
Dr Jonathon Toby	Year 5 trainee
Dr Daniel Mills	Year 3 trainee
Dr Anzela Anzela	Year 4 trainee
Dr Ina Liang	Non accredited trainee
Training Site Executive Officers:	
Ms Kate Lyons	Executive Director of Operations (Apology)
Dr Campbell Tiley	Director of Cancer Services
Dr Steevie Chan	Director of Medical Services (in lieu Kate Lyons)



# CURRENT ACCREDITATION STATUS

SITE DETAILS:				
Accreditation valid until:	31 December 2022			
Site Classification:	<input checked="" type="checkbox"/> Full	<input type="checkbox"/> Specialty		<input type="checkbox"/> New
	<input checked="" type="checkbox"/> Regional	<input type="checkbox"/> Rural	<input type="checkbox"/> Private	<input checked="" type="checkbox"/> Public
	<input type="checkbox"/> Area of Need		<input type="checkbox"/> STP Funded	
Level of Accreditation:	<input type="checkbox"/> A	<input checked="" type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D
Provisional (new applications):	<input type="checkbox"/> Yes		<input checked="" type="checkbox"/> No	

Training Network Director	
Name:	Dr Jane Ludbrook
Email:	jane.ludbrook@calvarymater.org.au
Phone:	0419 441 962
Education Support Officer	
Name:	Ms Kylie Withnell
Email:	Kylie.Withnell@health.nsw.gov.au
Phone:	0428 875 259

Constituent Sites: Please list ALL onsite associated training entities and external training sites within the Network relevant to this application:										
Site (Including geographical location)	Head / Clinical Director(s) of Department	Director(s) of Training	Number of accredited training positions		Regional	Rural	Private	Public	Area of Need	STP Funded
			RANZCR Trainees	IMG Pathway						
Blacktown Hospital	Dr Verity Ahern	Dr Eric Hau, Dr Jennifer Chard, Dr Jayasingham Jayamohan	1		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Calvary Mater Newcastle Hospital	Dr Mahesh Kumar	Dr Swetha Sridharan	7		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Central Coast Cancer Centre (Gosford Hospital)	Dr Roland Yeghiaian-Alvandi	Dr Louise Nardone	3		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chris O'Brien Lifehouse (Royal Prince Alfred Hospital)	A/Professor Chris Milross	Dr Kavita Morarji Dr Raymond Wu	6		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mid North Coast Cancer Institute (MNCCI - Coffs Harbour Hospital)	A/Prof Tom Shakespeare	Dr Rahim Tahir	3		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mid North Coast Cancer Institute (MNCCI - Port)	A/Prof Tom Shakespeare	Dr Jacques Hill	3		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Macquarie Base Hospital)											
Nepean Cancer Care Centre (Nepean Hospital)	Dr Maira Azzi	Dr Roland Yeghiaian-Alvandi	3		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
North Coast Cancer Institute (NCCI - Lismore Base Hospital)	A/Prof Tom Shakespeare	Dr Patrick Dwyer	3		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Northern Sydney Cancer Centre (Royal North Shore Hospital)	A/Professor Michael Back	Dr Andrew Kneebone Dr Dasantha Jayamanne	4		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The Crown Princess Mary Cancer Centre (Westmead Hospital)	Dr Verity Ahern	Dr Eric Hau, Dr Jennifer Chard, Dr Jayasingham Jayamohan	6		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

# SECTION 2 – ACCREDITATION STANDARDS FOR NETWORK TRAINING SITES

## 2.1 Governance

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

Standard 2.1.1		
The training site identifies with an endorsed network.		
Criterion 2.1.1.1 Site meets definition as per Standard 1.1.1 (Criteria 1-4)		
<ul style="list-style-type: none"> <li>➤ The network is comprised of a minimum of two training sites</li> <li>➤ At least two of the training sites are administered separately</li> <li>➤ The training sites are separated geographically</li> <li>➤ The trainees are supervised by different radiation oncologists within the network sites</li> </ul>		
<input checked="" type="checkbox"/> Met	<input type="checkbox"/> Not Met	
<b>Site Self-Assessment Comments received (if applicable):</b> CCC has been a member of the Northern Alliance Training Network since 2013.		
<b>RANZCR Comments:</b> Central Coast Cancer Centre (Gosford Hospital) meets Criterion 2.1.1.1.		
Criterion 2.1.1.2 Site signs a Memorandum of Understanding (MOU), or equivalent, with the network		
<ul style="list-style-type: none"> <li>➤ Network endorsed MOU</li> </ul>		
<input checked="" type="checkbox"/> Met	<input type="checkbox"/> Not Met	
<b>Site Self-Assessment Comments received (if applicable):</b> Attached a copy of the MOU for CCCC- Gosford Hospital with the Network.		
<b>RANZCR Comments:</b> Central Coast Cancer Centre (Gosford Hospital) meets Criterion 2.1.1.2		
RANZCR (Administrative Use Only)		
	Met	Not Met
Standard 2.1.1:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Assessor Comments:</b> Central Coast Cancer Centre (Gosford Hospital) meets Standard 2.1.1		



## Standard 2.1.2

The training site adheres to the RANZCR reporting requirements as relevant to curriculum implementation and network operations.

### Criterion 2.1.2.1 Director of Training (DoT) complies with the RANZCR reporting requirements

- Undertakes DoT assessments on their trainee
- Completes current assessments as per the RANZCR curriculum using the Trainee Information Management System (TIMS) platform

**Met**

**Not Met**

#### Site Self-Assessment Comments received (if applicable):

The DoT is compliant with the RANZCR reporting requirements as evidenced on ePortfolio

#### RANZCR Comments:

Central Coast Cancer Centre (Gosford Hospital) meets Criterion 2.1.2.1.

The site is currently in transition from TIMS to ePortfolio and all trainee assessments are up to date.

### Criterion 2.1.2.2 DoT encourages trainees to comply with the RANZCR reporting requirements

- Initial applications for training submitted within required timeframe
- Trainee assessments submitted as per current curriculum requirements
- Trainees notify the College in writing of any variations to the information submitted to the College

**Met**

**Not Met**

#### Site Self-Assessment Comments received (if applicable):

#### RANZCR Comments:

Central Coast Cancer Centre (Gosford Hospital) meets Criterion 2.1.2.2.

The DoT encourages trainees to comply with RANZCR reporting including reminding them to assign the correct DOT on ePortfolio

### Criterion 2.1.2.3 Director of Department (DoD) ensures that RANZCR is advised of changes to DoT

- DoT nominations are submitted to the ROETC for ratification

**Met**

**Not Met**

#### Site Self-Assessment Comments received (if applicable):

The Head of Department ensures that RANZCR is advised of any changes to the DoT at the site.

#### RANZCR Comments:

Central Coast Cancer Centre (Gosford Hospital) meets Criterion 2.1.2.3.

The HOD is aware of the process to notify the Collage of any changes to the DoT role.

### Criterion 2.1.2.4 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

- Initial written notification to Chief Accreditation Officer (CAO) through the College via [accreditation@ranzcr.edu.au](mailto:accreditation@ranzcr.edu.au)

**Met**

**Not Met**

**Site Self-Assessment Comments received (if applicable):**

The Site would inform the CAO should the department circumstances change in a manner sufficient to lead to its failing to meet the minimum criteria for its accreditation status.

**RANZCR Comments:**

Central Coast Cancer Centre (Gosford Hospital) meets Criterion 2.1.2.4.

The Department is aware of the process to notify the College of any changes that may lead to its failing to meet this criterion.

**Criterion 2.1.2.5 Site applies to CAO for approval of any additional training positions or an increase in maximum trainee numbers**

- DoT to provide initial written notification to Chief Accreditation Officer (CAO) through the College via [accreditation@ranzcr.edu.au](mailto:accreditation@ranzcr.edu.au)

**Met**

**Not Met**

**Site Self-Assessment Comments received (if applicable):**

The Site would apply to the CAO if an increase to accredited positions was required.

**RANZCR Comments:**

Central Coast Cancer Centre (Gosford Hospital) meets Criterion 2.1.2.5.

The Department is aware of the process to apply for additional training positions.

**RANZCR (Administrative Use Only)**

	Met	Not Met
<b>Standard 2.1.2:</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

**Assessor Comments:**

Central Coast Cancer Centre (Gosford Hospital) meets Standard 2.1.2



## 2.2 Training Environment

Each training site within a network must build and continuously evolve a training environment. To be accredited for training, all training sites must, as a minimum, meet the following training requirements

Standard 2.2.1	
The training site delivers a commitment to effective communication, cultural awareness and ethical conduct.	
Criterion 2.2.1.1 Effective communications	
➤ Trainees are aware of interpreter services available to patients and carers	
<input checked="" type="checkbox"/> <b>Met</b>	<input type="checkbox"/> <b>Not Met</b>
<b>Site Self-Assessment Comments received (if applicable):</b> CCCC has interpreter services available to patients and carers. Information for this is included in the Orientation manual for registrars	
<b>RANZCR Comments:</b> Central Coast Cancer Centre (Gosford Hospital) meets Criterion 2.2.1.1 Trainees are aware of interpreter services available to patients and carers.	
Criterion 2.2.1.2 Cultural awareness	
➤ Site is aware of RANZCR <b>Grievance Policy</b> (on discrimination, harassment, and bullying) and other relevant local policies	
<input checked="" type="checkbox"/> <b>Met</b>	<input type="checkbox"/> <b>Not Met</b>
<b>Site Self-Assessment Comments received (if applicable):</b> During trainee orientation, and included in the Orientation manual for registrars, information on accessing RANZCR policy documents	
<b>RANZCR Comments:</b> Central Coast Cancer Centre (Gosford Hospital) meets Criterion 2.2.1.2 Consultants and trainees are aware of the RANZCR Grievance Policy.	
Criterion 2.2.1.3 Ethical criteria	
➤ As above	
<input type="checkbox"/> <b>Met</b>	<input checked="" type="checkbox"/> <b>Not Met</b>
<b>Site Self-Assessment Comments received (if applicable):</b>	
<b>RANZCR Comments:</b> Central Coast Cancer Centre (Gosford Hospital) does not meet Criterion 2.2.1.3  The assessors noted conflicting reports regarding attendance in clinics/simulation by some radiation oncologists and the level of supervision provided. The assessors sought information on this issue from multiple and varied sources and were not able to clarify the situation to their satisfaction and were concerned regarding a lack of transparency and obvious disagreement in perceptions. While not directly impacting trainees, the inconsistencies and obvious conflict are nonetheless disturbing and contribute to an uncomfortable work environment. The assessors await the outcome of the external cultural review of the department.	



RANZCR (Administrative Use Only)		
	Met	Not Met
<b>Standard 2.2.1:</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Assessor Comments:</b>		
<p>Central Coast Cancer Centre (Gosford Hospital) does not meet Standard 2.2.1</p> <p>Recommendations:</p> <ul style="list-style-type: none"> <li>Central Coast Cancer Care Centre (Gosford Hospital) to provide the College with the outcome of the recent External Culture Review as soon as is practicable</li> </ul>		

Standard 2.2.2		
The training site participates in, and contributes to, a formal network education program aligned to the curriculum.		
Criterion 2.2.2.1 Site contributes to network activities		
➤ As above		
<input checked="" type="checkbox"/> <b>Met</b>		<input type="checkbox"/> <b>Not Met</b>
<b>Site Self-Assessment Comments received (if applicable):</b> Participate in the combined NSW network teaching program (as attached)		
<b>RANZCR Comments:</b> Central Coast Cancer Centre (Gosford Hospital) meets Criterion 2.2.2.1 The site actively contributes to the shared network education program.		
Criterion 2.2.2.2 Site provides access for trainees to attend network educational activities		
➤ Site has adequate AV conferencing facilities ➤ Trainees are provided with four hours of protected time per week, which includes time to attend the shared educational activities as mandated by the <b>Clinical Supervision and 'Protected' Time for Trainees and Directors of Training - Practical Guideline</b>		
<input checked="" type="checkbox"/> <b>Met</b>		<input type="checkbox"/> <b>Not Met</b>
<b>Site Self-Assessment Comments received (if applicable):</b> Trainees are given Phase 1 and 2 teaching days as entirely protected (similarly with BSOC). They get protected time during internal teaching sessions and are encouraged to provide internal cover for each other to ensure protected time on Fridays.		
<b>RANZCR Comments:</b> Central Coast Cancer Centre (Gosford Hospital) meets Criterion 2.2.2.2 The network educational program uses established videoconferencing facilities. Trainees are provided with protected time which does not affect clinics.		
RANZCR (Administrative Use Only)		
	Met	Not Met
<b>Standard 2.2.2:</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

<b>Assessor Comments:</b>	
Central Coast Cancer Centre (Gosford Hospital) meets Standard 2.2.2	
<b>Standard 2.2.3</b>	
The training site provides a formal internal education program.	
<b>Criterion 2.2.3.1 Site provides an internal educational program aligned to the curriculum</b>	
➤ Site has a formalised system for reviewing and adapting program structure	
<input type="checkbox"/> Met	<input checked="" type="checkbox"/> Not Met
<b>Site Self-Assessment Comments received (if applicable):</b> See attached CCCC-RO Teaching program (2020, 2021, 2022).	
<b>RANZCR Comments:</b> Central Coast Cancer Centre (Gosford Hospital) does not meet Criterion 2.2.3.1 The assessors were provided with the internal tutorial programme and note that the sessions are inconsistent and infrequent. On average there is an internal tutorial provided once a month or so. A more proactive approach with an increase in input from the clinical supervisors is recommended.	
<b>Criterion 2.2.3.2 Site ensures trainees have access to educational activities which may include but not limited to those listed below</b>	
➤ List of educational activities including: Tutorials; journal clubs; teaching courses; mock examinations; ward rounds; multi-disciplinary case conferences; morbidity and mortality audits; incident reports; planning audits	
<input checked="" type="checkbox"/> Met	<input type="checkbox"/> Not Met
<b>Site Self-Assessment Comments received (if applicable):</b> Tutorials (as per internal teaching schedule). Teaching courses are via RANZCR and trainees are encouraged to attend, similarly for Mock exams. Ward Rounds are conducted daily. Registrars attend each MDT (which are mostly held fortnightly besides Lung and haematology/Lymphoma which are weekly and Thyroid which is monthly). Morbidity and Mortality audits are held monthly and are prepared by the trainees. Incident reports are summarised and discussed at monthly M&M Planning audits are performed at fortnightly Peer Review with each trainee taking 2 cases each for review and presentation.	
<b>RANZCR Comments:</b> Central Coast Cancer Centre (Gosford Hospital) meets Criterion 2.2.3.2 The site ensures that trainees have protected time and access to a wide range of educational activities.	
<b>Criterion 2.2.3.3 Trainees at the training site have access to appropriate RANZCR-supported educational activities and Faculty teaching courses</b>	
➤ Activities/courses include but not limited to: ➤ Statistical Methods, Evidence Appraisal & Research for Trainees (SMART) workshop ➤ Paediatric teaching seminar and courses ➤ Exam preparation courses	
<input checked="" type="checkbox"/> Met	<input type="checkbox"/> Not Met



**Site Self-Assessment Comments received (if applicable):**

Trainees are encouraged to attend RANZCR- supported education activities and Faculty teaching courses. The department supports trainee attendance at these events and arranges for appropriate clinical cover

**RANZCR Comments:**

Central Coast Cancer Centre (Gosford Hospital) meets Criterion 2.2.3.3

The DoT and trainees are aware of the RANZCR supported educational activities and Faculty Teaching Courses available for trainees.

However, many of the ROs need significant upskilling in applying the new tools in the enhanced training program, which is understandably due to the current transition.

**RANZCR (Administrative Use Only)**

Standard 2.2.3:	Met	Not Met
	<input checked="" type="checkbox"/>	<input type="checkbox"/>

**Assessor Comments:**

Central Coast Cancer Centre (Gosford Hospital) meets Standard 2.2.3

However, the internal tutorial programme is inadequate in its current form as noted in Criterion 2.2.3.1

**Recommendations:**

- Central Coast Cancer Centre (Gosford Hospital) to provide a prospective schedule of internal tutorials for end of 2022/ first half of 2023 including speakers and topics. Department to ensure attendance records/logs are kept and available
- Central Coast Cancer Centre (Gosford Hospital) to consider encouraging all clinical supervisors to attend a DoT workshop or webinar over the next 12months to ensure all are aware of the educational changes associated with the new training program.

**Standard 2.2.4**

The training site provides training experiences necessary to fulfil the curriculum requirements.

**Criterion 2.2.4.1 Trainees are provided the opportunity to complete the practical requirements of the curriculum**

- Trainees are given protected time to complete Phase 1 Practical Oncology Experiences (POEs)
- Trainees are supported to undertake practical elements of training and assessments in Phase 2

**Met**  **Not Met**

**Site Self-Assessment Comments received (if applicable):**

Trainees are provided protected teaching time to complete the Phase 1 POEs. For the RT component, this is comprised of 3 full days spent with the RTs in planning and on the treatment machines. For both Phase 1 and 2, trainees have protected time to complete their Practical Oncology Experience requirements.

**RANZCR Comments:**

Central Coast Cancer Centre (Gosford Hospital) meets Criterion 2.2.4.1

Trainees are given protected time and supported to ensure that the practical requirements of their training are achieved.

**RANZCR (Administrative Use Only)**

Standard 2.2.4:	Met	Not Met
	<input checked="" type="checkbox"/>	<input type="checkbox"/>



**Assessor Comments:**

Central Coast Cancer Centre (Gosford Hospital) meets Standard 2.2.4

**Standard 2.2.5**

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

**Criterion 2.2.5.1 The training site provides the mandatory hours required for trainees to spend in supervision, training and teaching onsite**

- Supervisors spend quality time with the trainee, discussing cases, clinical issues and management plans
- Trainee is allocated four hours of protected time and 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

Met

Not Met

**Site Self-Assessment Comments received (if applicable):**

As outlined in the trainee timetable, quality time is dedicated to trainees discussing clinical cases and management plans with supervisors. These sessions also include trainees spending time in planning and discussing plans with their clinical supervisors. Four hours of protected teaching time is also allocated on a Friday morning/afternoon. Some of this time is rostered didactic teaching from various disciplines including radiation oncology, medical oncology, palliative care, pathology, medical physics, radiation therapists and allied health.

There are 4 staff specialists with the following FTE:

Dr Hester Lieng 1.0

Dr Apsara Windsor 1.0

Dr Louise Nardone 0.9

Dr Simon Tang 0.8

There are 4 VMOs with the following FTE:

Dr Roland Alvandi 0.2

A/Prof Michael Back 0.2

A/Prof Andrew Kneebone 0.1

Prof Thomas Eade 0.1

**RANZCR Comments:**

Central Coast Cancer Centre (Gosford Hospital) does not meet Criterion 2.2.5.1

The assessors have significant concerns with the lack of adequate on-site clinical supervision of trainees.

- Despite reassurance from some clinical supervisors during the assessment visit that on site supervision is appropriate, this is not corroborated by other information and confidential feedback from more than one source. Due to unplanned consultant absences, some clinics are being run by registrars without on-site consultant supervision, and at a frequency felt to be un-acceptable.
- There is significant dependence on availability of consultants by phone and this has been accepted as the norm for trainee supervision by the HoD and the health service. Majority of consultants have fractional appointments (4 VMOs and 2 SMOs) with 4 VMOs with 0.1-0.2 FTE each and 2 SMOs with 0.8-0.9 FTE each. The assessors also note that this issue is compounded by most of the department continuing to work from home for COVID reasons for a proportion of their time, despite this not being a requirement by the LHD at this time.
- During such time when consultants are not on site (for whatever reason), there is no, or poorly planned on-site consultant cover and the clinical cover/handover policy does not address this.

<p>While the assessors note that unplanned absences are a reality, they did not feel that the departments contingency plan to manage these are clear, robust, transparent or adequate.</p> <ul style="list-style-type: none"> <li>- More than one confidential source has expressed concern that some patients being planned for treatment are being assessed primarily by trainees onsite, with consultant input via phone/telehealth. In some instances, there have been reports that patients are attending for simulation (and possibly starting treatment) without having been seen by an on-site consultant prior. The assessors note the potential medicolegal risk to trainees.</li> </ul> <p>The assessors noted that some stakeholders interviewed felt that the current level of remote supervision is adequate. While this may be considered appropriate by other colleges, RANZCR believes that supervision for the purposes of training future radiation oncologists requires a significant onsite 1:1 engagement between clinical supervisors and trainees. This is to ensure both safety for trainees and patients, and to provide learning opportunities and skills training through observation, practice and coaching.</p>		
<p><b>Criterion 2.2.5.2 Each site within the Network allocates dedicated time for clinical supervisors for formal and informal teaching and training of radiation oncology trainees</b></p>		
<p>➤ Includes dedicated tutorial time as well as time spent in clinical practice</p>		
<input type="checkbox"/> <b>Met</b>		<input checked="" type="checkbox"/> <b>Not Met</b>
<p><b>Site Self-Assessment Comments received (if applicable):</b></p> <p>Dedicated time is allocated for clinical supervisors to provide formal teaching to the trainees (see CCCC-RO Teaching program). Other formal teaching is incorporated into the trainees' timetable with half-day sessions also allocated to planning time with clinical supervisors. Together with informal teaching conducted during clinics, ward rounds and in planning, trainees are provided with learning opportunities in keeping with RANZCR guidelines.</p>		
<p><b>RANZCR Comments:</b></p> <p>Central Coast Cancer Centre (Gosford Hospital) does not meet Criterion 2.2.5.2.</p> <p>Due to the fractional appointments of some clinical supervisors, and the work from home practices of others, the assessors felt that quality one: one on site teaching opportunities were limited. The actual time commitment for supervision and training by the sessional RO's was not well defined and difficult to establish. There was a high reliance on remote supervision, and while it may be feasible for some informal teaching to occur by phone/video call, this is still reliant on the availability of the consultants and is not felt adequate to replace on site coaching and mentoring of trainees (see Criterion 2.2.5.1).</p>		
<p><b>RANZCR (Administrative Use Only)</b></p>		
	<b>Met</b>	<b>Not Met</b>
<b>Standard 2.2.5:</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<p><b>Assessor Comments:</b></p> <p>Central Coast Cancer Centre (Gosford Hospital) does not meet Standard 2.2.5</p>		
<p><b>Recommendations:</b></p> <ul style="list-style-type: none"> <li>• Central Coast Cancer Centre (Gosford Hospital) to ensure all clinics always have on-site consultants in attendance and demonstrate this through provision of RO attendance logs and audits, for the next 3 months, to be prepared by the quality manager. It is preferable that this be the usual RO, but an alternative onsite RO is acceptable.</li> <li>• Central Coast Cancer Centre (Gosford Hospital) to ensure that all patients are reviewed by a consultant radiation oncologist (RO) in person prior to simulation and demonstrate this through provision of RO attendance logs and audits, for the next 3 months, to be prepared by the quality manager. It is preferable that this be the treating RO, but an alternative onsite RO is acceptable.</li> <li>• Central Coast Cancer Centre (Gosford Hospital) to develop an agreed policy for on-site cover arrangements for all consultants, for all leave (the current policy addresses only planned leave). The policy should include clear documentation of which RO will provide the on-site support on behalf of any RO that is off-site, for any reason e.g., annual leave, sick leave, COVID-related isolation</li> </ul>		



needs, etc.

- Central Coast Cancer Centre (Gosford Hospital) to provide an estimation of hours per week sessional RO's are able to commit to direct on-site supervision and training of accredited registrars, as well as evidence of off-site training conducted.

### Standard 2.2.6

The training site provides time, resources and support to ensure trainees are able to meet all curriculum requirements.

#### Criterion 2.2.6.1 Trainees attend a tutorial program that covers the content of the curriculum

- Tutorials and learning activities are aligned with curriculum content

**Met**

**Not Met**

#### Site Self-Assessment Comments received (if applicable):

As part of the NSW Training Network, trainees attend a monthly tutorial program covering the content of the curriculum. In addition to this, Gosford Hospital's Radiation Oncology Department has a separate teaching program comprising weekly education activities aligned with the curriculum (see CCCC-RO Teaching program).

Other learning activities include interdisciplinary education sessions are also run by the Radiation Oncology Department on a fortnightly basis, as well as monthly Radiation Oncology-specific education sessions

#### RANZCR Comments:

Central Coast Cancer Centre (Gosford Hospital) meets Criterion 2.2.6.1  
Trainees participate in the tutorial program.

#### Criterion 2.2.6.2 The clinical service required of trainees matches the service necessary to meet curriculum outcomes

- Service requirements(including after hours) do not detract from a trainee's ability to meet curriculum requirements
- Trainees are not expected to undertake clinical care that is outside their scope of training and/or does not contribute to attaining curriculum outcomes
- Patients are not exposed to any risk of inferior outcomes as a result of trainees being asked to provide care outside their perceived competency

**Met**

**Not Met**

#### Site Self-Assessment Comments received (if applicable):

Currently trainees provide a clinical service Monday to Friday, forty hours per week. This time also includes education and training opportunities. Trainees are also encouraged to attend Multidisciplinary Tumour Board Meetings (MDTs) relevant to their rotation. Trainees are not expected to undertake clinical care that is outside their scope of training.

#### RANZCR Comments:

Central Coast Cancer Centre (Gosford Hospital) does not meet Criterion 2.2.6.2

- Refer to recommendations in Standard 2.2.5
- There is significant potential medico-legal risk to trainees when patients proceed to radiation treatment without on-site consultant review, and to run clinics without on-site consultant supervision.
- While RANZCR's recommendation to limit clinic sessions for trainees to 5 to 6/week was made with an intent to provide time for trainees to meet curriculum requirements, this has resulted in the trainees spending significant amount of time developing registrar allocations to adequately cover clinics across all 8 consultants. Given that most are sessional, this becomes especially



challenging, and it is not appropriate to delegate this responsibility to trainees, who may feel vulnerable with this process.

### Criterion 2.2.6.3 Prior to the Phase 1 and 2 examination, trainees complete the required practice experiences and assessments

- All trainees are given allocated time to complete the practical experience as outlined in the curriculum
- Support is arranged for trainees undertaking the statistics assignment with the assistance from departments within the Network
- Recommended texts and journals are available to trainees, including e-journals
- Each site, in conjunction with the network, provides the opportunity, support and supervision to enable each trainee to undertake a research project

**Met**

**Not Met**

#### Site Self-Assessment Comments received (if applicable):

Phase 1 and 2 trainees are allocated protected teaching time to complete the relevant practical experience. Trainees are also allocated time to assist in completing research projects. A list of available text books and electronic resources is attached (Supplementary attachments).

#### RANZCR Comments:

Central Coast Cancer Centre (Gosford Hospital) meets Criterion 2.2.6.3

The assessors noted that the DoT, HoD and some of the consultants were aware that research was a weakness for this site with many trainees gaining this experience while on other rotations. They had identified this as an area for improvement

### Criterion 2.2.6.4 DoT completes the range of trainee assessments as determined by curriculum requirements

- As above

**Met**

**Not Met**

#### Site Self-Assessment Comments received (if applicable):

The DoT regularly meets with the trainees to ensure the trainees complete assessments, as determined by the curriculum.

#### RANZCR Comments:

Central Coast Cancer Centre (Gosford Hospital) meets Criterion 2.2.6.4

The DoT has access and complete the necessary documents and assessments in eportfolio.

The assessors note that the current trainees felt well supported by their DoT who is approachable, interested, responsive and committed to improving their experience and training.

### Criterion 2.2.6.5 Trainees attend and actively participate in both new patient and follow-up clinics

- Trainees gain experience in the management of inpatients and outpatients with a range of clinical problems, including toxicities from radiation treatment, complications of malignancy, and palliative and terminal care
- Trainees have an active involvement in assessment and decision-making processes
- Trainees have the opportunity to present clinical cases to ROs as a component of clinics

**Met**

**Not Met**

#### Site Self-Assessment Comments received (if applicable):

Trainees are exposed to a range of clinical problems in various tumour streams, including review of new patients, patients on treatment and follow-up for both curative and palliative cases.

Trainees are supervised in the management of both inpatients and outpatients and encouraged to take part in the decision-making process following clinical assessment and discussion of cases with clinical supervisors. In some circumstances, trainee supervision is conducted over the phone when supervisors are not present on a daily basis. See attached Trainee Clinic timetable/roster

**RANZCR Comments:**

Central Coast Cancer Centre (Gosford Hospital) does not meet Criterion 2.2.6.5

While trainees have exposure to a wide range of clinical problems and their management, there is inadequate in-patients and out-patient supervision, with trainees conducting reviews in the absence of consultants or by mere phone consultation. This does not allow sufficient learning as trainees often do not have an opportunity to present clinical cases to ROs as a component of clinics (see also 2.2.5).

**Criterion 2.2.6.6 Trainees attend and actively participate in Multi-disciplinary clinics**

- Trainees attend and contribute to multi-disciplinary management clinics and/or meetings in a range of subspecialties including but not limited to:
  - Head and Neck
  - Lung
  - GIT
  - Urology
  - Breast

**Met**

**Not Met**

**Site Self-Assessment Comments received (if applicable):**

Trainees are encouraged to attend and contribute to multidisciplinary management clinics (MDTs), with tumour streams Lung, Haematology, Head & Neck (H&N), Upper GI/Colorectal, Breast and Urology MDTs conducted on-site. Gynaecology MDTs are video-linked with Royal North Shore Hospital.

**RANZCR Comments:**

Central Coast Cancer Centre (Gosford Hospital) meets Criterion 2.2.6.6

The trainees attend and actively participate in regular Multi-disciplinary clinics.

**Criterion 2.2.6.7 Trainees have dedicated time for supervised planning activities including contouring and plan review**

- As above

**Met**

**Not Met**

**Site Self-Assessment Comments received (if applicable):**

Trainees are allocated dedicated session for contouring and plan review, under the supervision of, and together, with their clinical supervisors.

**RANZCR Comments:**

Central Coast Cancer Centre (Gosford Hospital) meets Criterion 2.2.6.7

**Criterion 2.2.6.8 Trainees have access to direct management of inpatients admitted under Radiation Oncology teams**

- If departments do not have direct RO admission bed cards, alternatives should be identified, and approval should be sought from the ROETC to proceed
- Departments should liaise with the TND to ensure that individual trainees will have access to direct RO oncology inpatient care opportunities for a minimum of 20% of their total training time, as part of their overall rotation schedule

**Met**

**Not Met**

**Site Self-Assessment Comments received (if applicable):**

All consultants have admitting rights and trainees are often managing a small number of inpatients at any given time with the assistance of a dedicated Radiation Oncology RMO.



**RANZCR Comments:**

Central Coast Cancer Centre (Gosford Hospital) meets Criterion 2.2.6.8

The department meets the criteria for direct management of inpatients. However, as noted earlier there are concerns regarding the consistency, transparency and effectiveness of onsite clinical cover for inpatients being managed by sessional RO's. See earlier standards for details.

**RANZCR (Administrative Use Only)**

	Met	Not Met
<b>Standard 2.2.6:</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

**Assessor Comments:**

Central Coast Cancer Centre (Gosford Hospital) does not meet Standard 2.2.6.

**Recommendations:**

- Refer to Standard 2.2.5
- Central Coast Cancer Centre (Gosford Hospital) to rescind the responsibility for trainees to oversee the cover of clinics in the setting of trainee and consultant planned leave. This duty should be performed by those with appropriate authority i.e., DoT or HoD.
- Central Coast Cancer Centre (Gosford Hospital) to respect absolute maximum of 5-6 clinics per week per trainee (irrespective of leave absence and cover).

**Standard 2.2.7**

The training site provides a safe working environment free from any bullying, harassment, or discrimination.

**Criterion 2.2.7.1 The training site offers trainee/s, regular opportunities to discuss with Directors of Training (DoTs) or clinical supervisors any issues of bullying, harassment, or discrimination confidentially**

➤ As above

**Met**

**Not Met**

**Site Self-Assessment Comments received (if applicable):**

Trainees are encouraged to report any concerns, including those of bullying, harassment, or discrimination to clinical supervisors/DoTs. Trainees are aware that their concerns can be raised in confidence.

**RANZCR Comments:**

Central Coast Cancer Centre (Gosford Hospital) meets Criterion 2.2.7.1

The lack of harmony within the consultant group is evident, and obvious to trainees. The College awaits the result of the External Cultural Review regarding this issue. While this has the potential to distress trainees who are aware of the interactions, the current trainees feel supported by the HoD, DoT, and other consultants and find them approachable.

**Criterion 2.2.7.2 The DoT understands the RANZCR Grievance Policy and protocol to follow should an incident occur**

➤ As above

**Met**

**Not Met**



**Site Self-Assessment Comments received (if applicable):**

The DoT has read and understands the RANZCR Grievance Policy.

**RANZCR Comments:**

Central Coast Cancer Centre (Gosford Hospital) meets Criterion 2.2.7.2  
The DoT understands the RANZCR Grievance Policy.

**Criterion 2.2.7.3 The training site liaises with site Human Resources (HR) to access professional services, if required by the trainee**

➤ As above

**Met**

**Not Met**

**Site Self-Assessment Comments received (if applicable):**

services to assist in managing concerns, the Employee Assistance Program is available, as is the Human Resources Department. EAP provides a counselling and support service and is contactable on 4320 2474

**RANZCR Comments:**

Central Coast Cancer Centre (Gosford Hospital) meets Criterion 2.2.7.3  
Requirements regarding EAP access for all employees were demonstrated, trainees are aware of the services provided.

**RANZCR (Administrative Use Only)**

	Met	Not Met
<b>Standard 2.2.7:</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

**Assessor Comments:**

Central Coast Cancer Centre (Gosford Hospital) meets Standard 2.2.7

## 2.3 Physical Environment

To be accredited for training, the training site must ensure the following physical environment requirements are met.

Standard 2.3.1	
The training site provides adequate resources for the training of network trainees.	
Criterion 2.3.1.1 The training site has the minimum standard requirements for training	
<ul style="list-style-type: none"> <li>➤ Special consideration will be given to single machine departments, on application to the CAO. Factors taken into account will include:               <ul style="list-style-type: none"> <li>➤ Relationships with other centres</li> <li>➤ Staff engagement in education</li> <li>➤ Plans for future growth</li> <li>➤ Opportunity for specific training experiences</li> </ul> </li> <li>➤ Two dual modality linear accelerators (DMLA)</li> <li>➤ Simulator with digital imaging capability and/or CT simulator</li> <li>➤ Dedicated information system</li> <li>➤ 3D planning system</li> <li>➤ Immobilisation system</li> <li>➤ Multi-leaf collimators (MLC)</li> <li>➤ In vivo dose monitoring system</li> <li>➤ Access to planning workstations for trainees</li> <li>➤ Departments without a physical linear accelerator are by definition NOT considered to be accredited sites. Special considerations will be given to situations in which trainees may be required to attend outreach outpatient clinics. Factors taken into account will include:               <ul style="list-style-type: none"> <li>➤ Supervision (trainees should never attend these clinics unsupervised)</li> <li>➤ Amount of time required to travel to outreach locations</li> <li>➤ Amount of time per week spent at outreach locations</li> <li>➤ Impacts on protected teaching time</li> <li>➤ Appropriate accreditation status by another aligned reputable training accreditation program as evaluated by the CAO</li> </ul> </li> </ul>	
<input checked="" type="checkbox"/> <b>Met</b>	<input type="checkbox"/> <b>Not Met</b>
<p><b>Site Self-Assessment Comments received (if applicable):</b>          CCCC has three DMLA (all with MLCs) plus one SXRT/orthovoltage unit.          There is one CT simulator.          The dedicated information system is ARIA. Trainees are also given access to the Medical Oncology information system (MOSAIQ).          The planning software used is Eclipse and Hyperarc for brain SRS/SRT.          Each trainee has their own workstation within the registrar office.</p>	
<p><b>RANZCR Comments:</b>          Central Coast Cancer Centre (Gosford Hospital) meets Criterion 2.3.1.1          Adequate resources and facilities are provided onsite.</p>	
Criterion 2.3.1.2 The training site has a resource library	
<ul style="list-style-type: none"> <li>➤ Major recognised texts and journals are available to trainees, including e-journals</li> <li>➤ Internet access to enable trainees to conduct their own literature searches</li> </ul>	



<input checked="" type="checkbox"/> <b>Met</b>		<input type="checkbox"/> <b>Not Met</b>
<b>Site Self-Assessment Comments received (if applicable):</b> E-journals can also be accessed through the NSW Health CIAP website, and the Gosford Hospital library staff can provide articles on request. The library is now located in the newly built University of Newcastle building. All trainees have internet access to enable them to conduct their own literature searches.		
<b>RANZCR Comments:</b> Central Coast Cancer Centre (Gosford Hospital) meets Criterion 2.3.1.2 Electronic resources are available for trainees to access online journals. The trainees raised no concerns on these aspects of their training environment.		
<b>RANZCR (Administrative Use Only)</b>		
	<b>Met</b>	<b>Not Met</b>
<b>Standard 2.3.1:</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Assessor Comments:</b>		
Central Coast Cancer Centre (Gosford Hospital) Meets Standard 2.3.1		

<b>Standard 2.3.2</b>		
The training site is linked to a university medical school		
<b>Criterion 2.3.2.1 The training site is:</b>		
<ul style="list-style-type: none"> <li>➤ The training site is: <ul style="list-style-type: none"> <li>➤ in a hospital with formal links to a university accredited teaching hospital OR</li> <li>➤ within a network that has university affiliation</li> </ul> </li> </ul>		
<input checked="" type="checkbox"/> <b>Met</b>		<input type="checkbox"/> <b>Not Met</b>
<b>Site Self-Assessment Comments received (if applicable):</b> The training site is located in Gosford Hospital which is affiliated with the University of Newcastle.		
<b>RANZCR Comments:</b> Central Coast Cancer Centre (Gosford Hospital) meets Criterion 2.3.2.1. The site is affiliated to the University of Newcastle		
<b>RANZCR (Administrative Use Only)</b>		
	<b>Met</b>	<b>Not Met</b>
<b>Standard 2.3.2:</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Assessor Comments:</b>		
Central Coast Cancer Centre (Gosford Hospital) meets Standard 2.3.2		

### Standard 2.3.3

The training site meets the service provision and radiation treatment facilities standards.

#### Criterion 2.3.3.1 The training site has access to an adequate number of hospital beds designated for its use and services by rotating resident medical officers / interns

- Inpatient care is managed by RMO/house officer, supervised by trainee
- Access to beds is available for inpatients to be admitted under direct care of radiation oncologists

**Met**

**Not Met**

#### Site Self-Assessment Comments received (if applicable):

As stated in 2.2.6.8, each consultant has admitting rights, and access to beds is supervised by the bed manager. We have a dedicated Radiation Oncology RMO/JMO.

#### RANZCR Comments:

Central Coast Cancer Centre (Gosford Hospital) meets Criterion 2.3.3.1

The training site has access to an adequate number of hospital beds for inpatients to be admitted under direct care of radiation oncologists.

#### Criterion 2.3.3.2 The training site consults a minimum of 750 new patients with cancer each year and provides a minimum of 650 courses of megavoltage radiation therapy per annum (520 new courses and 130 retreatments)

- *Special consideration will be given to small departments, on application to the CAO. Factors taken into account will include:*
  - *relationships with other centres*
  - *staff engagement in education*
  - *plans for future growth*
  - *opportunity for specific training experience*
- Site has a minimum of 2 FTE radiation oncologists

**Met**

**Not Met**

#### Site Self-Assessment Comments received (if applicable):

This criteria is easily met.

There are 4.3 FTE Staff Specialists and 8 VMOS visiting 1 day per week

#### RANZCR Comments:

Central Coast Cancer Centre (Gosford Hospital) meets Criterion 2.3.3.2

Central Coast Cancer Centre (Gosford Hospital) demonstrates the minimum of 750 new patients annually and the minimum of 650 courses of megavoltage radiation therapy per annum.

#### RANZCR (Administrative Use Only)

	Met	Not Met
<b>Standard 2.3.3:</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

#### Assessor Comments:

Central Coast Cancer Centre (Gosford Hospital) meets Standard 2.3.3



## Standard 2.3.4

The training site provides adequate administrative office support for trainees.

### Criterion 2.3.4.1 Trainees have access to a physical environment conducive to supporting training needs

- Quiet office space for trainees away from clinical areas
- Tutorial rooms available when required
- Ready access to computers with internet and current software packages
- Access to videoconferencing and/or web-based learning for educational activities

Met

Not Met

#### Site Self-Assessment Comments received (if applicable):

Trainees have a dedicated registrar office shared with the medical oncology trainees. Each trainee has their own desk space, computer with 2 monitors, internet access, and telephone. Tutorial rooms are also available for use, as well as video-conferencing and/or web-based learning, as required.

#### RANZCR Comments:

Central Coast Cancer Centre (Gosford Hospital) meets Criterion 2.3.4.1  
Access is provided to a physical environment conducive to supporting training needs.  
The trainees raised no concerns on these aspects of their training environment.

### Criterion 2.3.4.2 Oncology medical records are available for all patient management episodes

- 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

Met

Not Met

#### Site Self-Assessment Comments received (if applicable):

The radiation and medical oncology department have electronic medical records for patients that ensure good patient care. Report of patient numbers and case-mix are attached

#### RANZCR Comments:

Central Coast Cancer Centre (Gosford Hospital) meets Criterion 2.3.4.2  
The trainees raised no concerns on these aspects of their training environment.

### Criterion 2.3.4.3 Site has adequate staff to provide administrative support for trainees' clinical duties

- Trainees are not required to undertake duties more appropriately assigned to administrative staff

Met

Not Met

#### Site Self-Assessment Comments received (if applicable):

Radiation Oncology has 3 dedicated administrative staff members who provide administrative support to the Radiation Oncologists and Radiation Oncology trainees in the department.

#### RANZCR Comments:

Central Coast Cancer Centre (Gosford Hospital) meets Criterion 2.3.4.3  
Adequate support is demonstrated within the department which consists of departmental administrative staff and allied health professionals.

### RANZCR (Administrative Use Only)

Standard 2.3.4:	Met	Not Met
	<input checked="" type="checkbox"/>	<input type="checkbox"/>

**Assessor Comments:**

Central Coast Cancer Centre (Gosford Hospital) Meets Standard 2.3.4



## 2.4 Workforce Arrangements

The following standards outline the important principles surrounding recruitment, retention, supervision and support of the trainee workforce within training sites.

Standard 2.4.1	
The training site follows processes for selection and appointment of trainees according to the requirements of the Network Training Policy.	
Criterion 2.4.1.1 A clear and transparent procedure for selection and appointment of trainees is in place	
➤ As above	
<input checked="" type="checkbox"/> <b>Met</b>	<input type="checkbox"/> <b>Not Met</b>
<b>Site Self-Assessment Comments received (if applicable):</b> Recruitment process explanation included in the Network Governance Guideline	
<b>RANZCR Comments:</b> Central Coast Cancer Centre (Gosford Hospital) meets Criterion 2.4.1.1 This training site functions as part of the Northern Alliance Training Network, which is accredited through a separate process. All current trainees are on rotation to CCCC, and it appears most expect to be there for only 12 months as part of the Network-wide rotation program.	
Criterion 2.4.1.2 The training site participates in the network-wide process of recruitment, selection and appointment with rural and smaller sites expected to have more senior (year 3, 4, 5) trainees allocated to their sites as well as junior (year 1, 2) trainees	
➤ As above	
<input checked="" type="checkbox"/> <b>Met</b>	<input type="checkbox"/> <b>Not Met</b>
<b>Site Self-Assessment Comments received (if applicable):</b> Each Network site participates in the network-wide process of recruitment. Trainees are recruited as positions are available at each site and are only recruited to on an annual basis with selection made by the NGC	
<b>RANZCR Comments:</b> Central Coast Cancer Centre (Gosford Hospital) meets Criterion 2.4.1.2 The DoT actively participates in the Network selection and recruitment process.	
Criterion 2.4.1.3 The training site is represented on the selection panel for network appointments	
<ul style="list-style-type: none"> <li>➤ The current <b>Principles and Guidelines for Trainee Selection</b> advise that the selection committee should include one representative from each training site (preferably the Director of Training (DoT)). Any deviation from these guidelines need to be approved by the ROETC</li> <li>➤ Site communicates with NGC if unable to attend</li> </ul>	
<input checked="" type="checkbox"/> <b>Met</b>	<input type="checkbox"/> <b>Not Met</b>
<b>Site Self-Assessment Comments received (if applicable):</b> The training site is represented on the selection panel by the DoT of the site.	

**RANZCR Comments:**

Central Coast Cancer Centre (Gosford Hospital) meets Criterion 2.4.1.3  
The DoT represents the site on the selection panel for network appointments.

**Criterion 2.4.1.4 The NGC has a role in recruitment and selection for all training positions**

➤ All available positions are discussed with the NGC prior to recruitment process commencing

**Met**

**Not Met**

**Site Self-Assessment Comments received (if applicable):**

All available positions are discussed with the NGC prior to the process commencing. All accredited trainee recruitment takes place in line with the JMO annual recruitment campaign ~of NSW Health

**RANZCR Comments:**

Central Coast Cancer Centre (Gosford Hospital) meets Criterion 2.4.1.4

**RANZCR (Administrative Use Only)**

	Met	Not Met
<b>Standard 2.4.1:</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

**Assessor Comments:**

Central Coast Cancer Centre (Gosford Hospital) meet Standard 2.4.1

**Standard 2.4.2**

The regulated ratio of supervisor to trainee at the training site must be adhered to at all times.

**Criterion 2.4.2.1 The ratio of trainees to full time equivalent (FTE) consultant radiation oncologists is never greater than 1:1**

➤ As above

**Met**

**Not Met**

**Site Self-Assessment Comments received (if applicable):**

The training site has 4.3 FTE positions filled by 8 staff specialist radiation oncologists. Four VMOs also visit the department, one day per week, comprising total 0.6 FTE. The ratio of trainees to full-time equivalent is 1 : 1.2

**RANZCR Comments:**

Central Coast Cancer Centre (Gosford Hospital) does not meet Criterion 2.4.2.1

As has been noted in previous standards, the assessors have concerns regarding the effectiveness of on-site trainee supervision, with regard to both clinical supervision (i.e., clinics, patients planned for radiotherapy etc) and on-site face to face teaching opportunities. While the ratio of consultant 4.3FTE to trainee 3.0FTE meets the criteria on paper, it was not clear to the assessors what the effective on-site ratio of consultants to trainees is, in practical terms. The recommended ratio is based on the assumption that generally, the required clinical supervisors are on site, and while we acknowledge these ratios could not be maintained during COVID lockdowns, this issue is less critical currently. We note that the LHD has directed all staff to return to site as of February 2022.



The assessors requested individual consultant rosters to establish the effective clinical supervisor: trainee ratio but have not been provided with this level of detail.

Due to the impact of sessional attendees, ongoing work from home practices and a lack of process with regard to the management of unplanned leave, the assessors have not been satisfied that the trainees are currently being supervised to the level required or expected.

### RANZCR (Administrative Use Only)

	Met	Not Met
<b>Standard 2.4.2:</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

#### Assessor Comments:

Central Coast Cancer Centre (Gosford Hospital) does not meet Standard 2.4.2

#### Recommendations:

- Refer to recommendations in Standard 2.2.5
- Central Coast Cancer Centre (Gosford Hospital) ROs should return to conducting their work on-site, as per the February 2022 directive from the hospital Executive.

### Standard 2.4.3

Each training site within the network has a designated DoT

#### Criterion 2.4.3.1 The Director of Training (DoT) is a Fellow of the Royal Australian and New Zealand College of Radiologists (FRANZCR)

- The DoT must be a minimum of at least two-years post fellowship

**Met**  **Not Met**

#### Site Self-Assessment Comments received (if applicable):

The DoT, Dr Louise Nardone obtained her Fellowship from RANZCR on 29 January 2017

#### RANZCR Comments:

Central Coast Cancer Centre (Gosford Hospital) meets Criterion 2.4.3.1  
The DoT is a Fellow of RANZCR, and trainees are well supported.

#### Criterion 2.4.3.2 The DoT is nominated by the site

- The DoT nomination is ratified by the Radiation Oncology Education and Training Committee (ROETC)
- The DoT is not the Director of Department (DoD) (unless there are exceptional circumstances)

**Met**  **Not Met**

#### Site Self-Assessment Comments received (if applicable):

The DoT has been ratified by the ROETC and is not the Director of the Department.

**RANZCR Comments:**

Central Coast Cancer Centre (Gosford Hospital) meets Criterion 2.4.3.2  
The DoT is ratified by ROETC and currently not a HoD.

**Criterion 2.4.3.3 Site fully supports the DoT in their administrative and educational responsibilities**

- Administrative support, including Education Support Officer (ESO)
- Protected time as per the [Clinical Supervision and 'Protected' Time for Trainees and Directors of Training - Practical Guideline](#)
  - with less than five trainees: four hours/week
  - with five to ten trainees: eight hours/week
- Financial support and leave to attend required RANZCR activities, including DoT workshops
- There is a balanced distribution of educational activities among all radiation oncologists (clinical supervisors)

 **Met**
 **Not Met**
**Site Self-Assessment Comments received (if applicable):**

The DoT has been provided with administrative support by the NATN ESO. Two hours on a Wednesday and Thursday morning respectively (4 hours in total) is allocated per week for the DoT. Leave and financial support, when required, is also provided to the DoT to enable attendance of RANZCR activities. All radiation oncologists/clinical supervisors have been allocated educational activities – see attached CCCC-RO Teaching program.

**RANZCR Comments:**

Central Coast Cancer Centre (Gosford Hospital) meets Criterion 2.4.3.3

**Criterion 2.4.3.4 DoT fulfils the requirements as specified in the Network Training Program (NTP)**

- See Appendix 2 of the NTP

 **Met**
 **Not Met**
**Site Self-Assessment Comments received (if applicable):**

The DoT has fulfilled the requirements of the Network Training Program.

**RANZCR Comments:**

Central Coast Cancer Centre (Gosford Hospital) meets Criterion 2.4.3.4  
The DoT fulfils the requirements for the Network Training Program.

**Criterion 2.4.3.5 DoT role is reviewed annually**

- Complies with requirements of the DoT role description
- DoT satisfaction
- Satisfaction with DoT

 **Met**
 **Not Met**
**Site Self-Assessment Comments received (if applicable):**

The DoT role has been reviewed and complies with the requirements of the DoT role description.



**RANZCR Comments:**

Central Coast Cancer Centre (Gosford Hospital) meets Criterion 2.4.3.5  
 The DoT appears committed and seems to be settling into the role.  
 The DoT appears well supported by the HoD.

**RANZCR (Administrative Use Only)**

	Met	Not Met
<b>Standard 2.4.3:</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

**Assessor Comments:**

Central Coast Cancer Centre (Gosford Hospital) meets Standard 2.4.3.

**Standard 2.4.4**

Staffing within each training site must be adequate to support the training requirements of the curriculum.

**Criterion 2.4.4.1 There is a minimum of two full-time equivalent (FTE) consultant radiation oncologists with an active clinical workload**

- Special consideration will be given to departments who have less than 2 FTE, on application to the CAO. Factors taken into account will include:
  - Relationships with other centres
  - Staff engagement in education
  - Plans for future growth Opportunity for specific training experiences
- The active clinical workload allows for sufficient educational interaction

 **Met** **Not Met****Site Self-Assessment Comments received (if applicable):**

The training site has 8 FTE staff specialists (FTE 4.3) who each conduct 2 half-day sessions for new patients, and 2 half-day sessions for follow-up patients. There are also 4 VMO consultant radiation oncologists (0.6 FTE as 2 VMOs job share).

**RANZCR Comments:**

Central Coast Cancer Centre (Gosford Hospital) meets Criterion 2.4.4.1  
 The assessors note that the minimum FTE requirement is met, however the total FTE available for onsite supervision and training as outlined by the department above is inconsistent with other information provided and seems inadequate. See above sections on this issue.

**Criterion 2.4.4.2 Non-medical staff, including medical physicists, radiation therapists, nurses and allied health workers, are available to support the training experience**

- As above

 **Met** **Not Met****Site Self-Assessment Comments received (if applicable):**

At the training site, non-medical staff are available to support the training experience. This includes medical physicists, radiation therapists, nurses including clinical nurse coordinators, and allied health staff.

**RANZCR Comments:**

Central Coast Cancer Centre (Gosford Hospital) meets Criterion 2.4.4.2

Central Coast Cancer Centre (Gosford Hospital) has adequate non-medical staff, including medical physicists, radiation therapists, nurses, and allied health workers to support the training experience.

**Criterion 2.4.4.3 Trainees have the opportunity to communicate with other medical specialists as relevant to individual patient care**

- Access to Multi-Disciplinary Team (MDT) meetings
- Video conferencing facilities as required

 **Met**
 **Not Met**
**Site Self-Assessment Comments received (if applicable):**

Trainees have numerous opportunities to communicate with other medical specialists with on-site access to medical oncology, palliative care, and medical/surgical specialists. Trainees also interact with specialists during MDTs and can access videoconference facilities, as required.

**RANZCR Comments:**

Central Coast Cancer Centre (Gosford Hospital) meets Criterion 2.4.4.3

Trainees have the opportunity to communicate with other medical specialists and regular access to Multi-Disciplinary Team meetings.

**Criterion 2.4.4.4 Education Support Officer (ESO)**

- The ESO is involved with the site
- The ESO fulfils their responsibilities as detailed in
- Appendix 3 of the NTP

 **Met**
 **Not Met**
**Site Self-Assessment Comments received (if applicable):**

The ESO is actively involved with the training site and training network and fulfils the responsibilities detailed in the Network Training Program.

**RANZCR Comments:**

Central Coast Cancer Centre (Gosford Hospital) meets Criterion 2.4.4.4

The ESO fulfils their responsibilities and is actively involved with the site and trainees.

**RANZCR (Administrative Use Only)**

	Met	Not Met
<b>Standard 2.4.4:</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

**Assessor Comments:**

Central Coast Cancer Centre (Gosford Hospital) meets Standard 2.4.4



# Summary

## Overview

The assessment of accreditation for training at Central Coast Cancer Centre (CCCC) at Gosford Hospital has been determined from the documentation submitted to the College from the site, confidential feedback from multiple sources over a period of time, and the observations and discussions made by the College Assessors at the site visit.

The Network education is aligned to the curriculum and rotation within the Network is functioning to meet requirements. Central Coast Cancer Centre participates in the Network education program. There are currently 8 FRANZCR consultants. There are 4 staff specialists with an FTE of 3.7, and 4 VMOs who work sessionally, on average attending 1-2 sessions/week. The VMOs did not provide a more detailed Gosford Hospital FTE estimation. There are 3 accredited trainees and 2 unaccredited trainees.

There are several ways CCCC makes a positive contribution to the training of radiation oncologists.

- It treats a broad range of oncological conditions, giving trainees access to all but the most specialized of patients i.e., paediatric, etc.
- It has a broad range of highly skilled clinical supervisors with diverse interests and strengths
- It utilizes an extensive range of treatment techniques which provides good experience for trainees
- It provides trainees with a non-metropolitan environment in which to gain experience in treating patients with geographical challenges
- It has an engaged, enthusiastic DoT who is well supported by the HoD, Executive and current trainees.

However, the assessors have ongoing concerns regarding the **supervision of trainees**. As noted in the body of the report, despite a compliant consultant to trainee FTE ratio, the assessors have not been adequately satisfied regarding the true 'on-site' ratio and the effectiveness of this current level of supervision, regarding both clinical supervision (inpatients, outpatient clinics and patients planned for treatment) and face to face education of trainees.

- A proportion of RO's are working on a sessional basis, and in some cases, RO's may be only onsite for a few hours, just one day a week. It is unclear to the assessors how effectively these consultants can supervise or train CCCC based registrars when off site, presuming they have clinical and teaching commitments/responsibilities at other health services during that time. In addition, many of the more 'fulltime' appointed RO's are currently still 'working from home' for a proportion of the week, which results in a further reduction in the true on-site training ratio. The assessment team requested individual RO weekly timetables on multiple occasions to try to clarify this but have not received anything to date.
- While there maybe merit to some virtual training opportunities for registrars, the RANZCR recommendation for a 1:1 ratio of supervisors to trainees is in relation to 'on-site' supervision. This is to ensure a safe level of medical supervision for trainees learning a highly specialised skill, as well as appropriate training and mentoring through observation and direct interaction. The assessors acknowledge that during some phases of COVID-related restrictions this situation was unavoidable, and compromise was required, but now that these restrictions are no longer applied to the same degree, this ratio needs to be re-balanced to reflect a primarily 'on-site' supervision and training program.
- There is no well-defined internal department process or policy for ensuring maintenance of on-site clinical supervision and training in the setting of sessional work practices, planned or unplanned leave i.e., sickness, COVID isolation etc. The RANZCR accreditation team first asked for such a policy or process to be documented after concerns were raised following an Accreditation Assessment in 2019. The assessors are aware of examples currently in which trainees are on occasion attending clinics alone and managing/consenting patients pre radiotherapy who have not been assessed in person by a consultant, confirming the need for this policy. There is significant medico-legal risk to trainees when patients proceed to radiation treatment without an on-site

consultant review prior.

- There is a lack of insight into these issues by the stakeholders in the department. During the investigation, the assessors were struck by the inconsistency of information presented by different members of the department, which included directly conflicting information and opinions. The concept of 'clinical supervision' was interpreted differently by different individuals, and the hospital executive, and cancer services director were also unaware of the issues surrounding the requirement for a minimum level of 'on-site' clinical supervision to satisfy the RANZCR Accreditation Standards for training. While the trainees reported no definite examples in which they felt they were at undue serious risk from this lack on on-site supervision, the assessors note that that their understanding of what is expected of a clinical supervisor in an RO Accredited Training Site is limited. There is significant dependence on availability of consultants by phone and this has been accepted as the norm for trainee supervision by the HoD and the health service and even the trainees. Given the volume of patients receiving radiation treatments at CCCC and the use of high-precision techniques, trainees are at risk when taking on roles outside their scope. The assessors felt that overall, the importance of on-site availability of consultants to ensure quality and safety in radiation oncology was not understood, and there was a reluctance from some to acknowledge this was an issue to be addressed.
- Ongoing conflict within the department is again evident, as it was during the assessment in 2019 which at that time, prompted the recommendation for the department to conduct an independent external cultural review. The assessors are concerned that this ongoing conflict may affect trainees by its impact on consultant's ability to agree on solutions to manage the clinical supervision issues outlined above. The assessors look forward to the results of the recently commissioned cultural review

As a result of the current assessment, as well as the notable lack of progress since 2019, the RANZCR Accreditation team recommend the CCCC accreditation status will be downgraded from a B to a C. The site is required to provide a progress report at 3months then again at 6months, as outlined below.

## Areas of Improvement

### 3 Month Recommendation: (if applicable)

- Site to conduct a debrief session regarding the outcome of the report with all stakeholders including participating trainees

### **Standard 2.2.5; 2.2.6; and 2.4.2**

- Central Coast Cancer Centre (Gosford Hospital) to ensure all clinics always have on-site consultants in attendance and demonstrate this through provision of RO attendance logs and audits for the next 3months to be prepared by the quality manager. It is preferable that this be the usual RO, but an alternative onsite RO is acceptable.
- Central Coast Cancer Centre (Gosford Hospital) to ensure that all patients are reviewed by a consultant radiation oncologist (RO) in person prior to simulation and demonstrate this through provision of RO attendance logs and audits for the next 3 months to be prepared by the quality manager. It is preferable that this be the treating RO, but an alternative onsite RO is acceptable.
- Central Coast Cancer Centre (Gosford Hospital) to develop an agreed policy for on-site cover arrangements for all consultants, for all leave (the current policy addresses only planned leave). The policy should include clear documentation of which RO will provide the on-site support on behalf of any RO that is off-site, for any reason e.g., annual leave, sick leave, COVID-related isolation needs, etc.
- Central Coast Cancer Centre (Gosford Hospital) to provide an estimation of hours per week sessional RO's are able to commit to direct on-site supervision and training of accredited registrars, as well as evidence of offsite training conducted.

### **Standard 2.4.2**

- Central Coast Cancer Centre (Gosford Hospital) ROs should return to conducting their work on-site, as per the February 2022 directive from the hospital Executive.



**☒ 6 Month Recommendation: (if applicable)****Standard 2.2.1**

- Central Coast Cancer Care Centre (Gosford Hospital) to provide the College with the outcome of the recent External Culture Review as soon as is practicable

**Standard 2.2.3**

- Central Coast Cancer Centre (Gosford Hospital) provide a prospective schedule of internal tutorials for end of 2022/ first half of 2023 including speakers and topics. Department to ensure attendance records/logs are kept and available.
- Central Coast Cancer Centre (Gosford Hospital) to consider encouraging all clinical supervisors to attend a DoT workshop or webinar over the next 12 months to ensure all are aware of the educational changes associated with the new training program.

**Standard 2.2.6**

- Central Coast Cancer Centre (Gosford Hospital) to rescind the responsibility for trainees to oversee the cover of clinics in the setting of trainee and consultant planned leave. This duty should be performed by those with appropriate authority i.e., DoT or HoD
- Central Coast Cancer Centre (Gosford Hospital) to respect absolute maximum of 5-6 clinics per week per trainee (irrespective of leave absence and cover)

# RECOMMENDATIONS

(OUTCOME TABLE AVAILABLE IN APPENDIX 1)

REPORT DETAILS				
Site Visit Outcome:	<input type="checkbox"/> UPGRADE	<input type="checkbox"/> MAINTAIN	<input checked="" type="checkbox"/> DOWNGRADE	<input type="checkbox"/> WITHDRAW
Site Classification:	<input checked="" type="checkbox"/> FULL	<input type="checkbox"/> LINKED	<input type="checkbox"/> SPECIALTY	<input type="checkbox"/> NEW
Linked To :				
Level of Accreditation:	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input checked="" type="checkbox"/> D
Provisional:	<input checked="" type="checkbox"/> YES		<input type="checkbox"/> NO	
Accreditation valid until:	26 September 2023			

REASSESSMENT DUE.		
<input type="checkbox"/> 5 YEAR SITE ASSESSMENT	<input type="checkbox"/> 3 YEAR INTERIM ASSESSMENT	<input checked="" type="checkbox"/> OTHER

PROGRESS REPORTS (to be completed on Progress Report Template)		
<input checked="" type="checkbox"/> 3 MONTH Due : 9 January 2023	<input checked="" type="checkbox"/> 6 MONTH Due : 27 March 2023	<input type="checkbox"/> 12 MONTH



# SITE EVIDENCE PROVIDED

SITE EVIDENCE PROVIDED:	
<b>Standard 2.1.1:</b> ➤ Copy of MOU	<input type="checkbox"/> YES <input type="checkbox"/> NO <b>Comment :</b>
<b>Standard 2.1.2:</b> ➤ Current assessments are complete on eportfolio	<input type="checkbox"/> YES <input type="checkbox"/> NO <b>Comment :</b>
<b>Standard 2.2.1:</b> ➤ Trainee interviews ➤ Consultant interviews ➤ Department policies ➤ Documentation on workshops	<input type="checkbox"/> YES <input type="checkbox"/> NO <b>Comment :</b>
<b>Standard 2.2.2:</b> ➤ Trainee interviews ➤ Site Self-Assessment Form: ➤ Explanation on what the Site provides for the Network Trainees ➤ Explanation of how access is provided and how conflicts between scheduling and clinical responsibilities are addressed	<input type="checkbox"/> YES <input type="checkbox"/> NO <b>Comment :</b>
<b>Standard 2.2.3:</b> ➤ Documentation of overall program structure showing correlation to the curriculum ➤ Progress reports with confirmatory evidence if requested by CAO and ROETC ➤ Site Self-Assessment Form: ➤ List of educational activities ➤ Sign-in/Attendance registers	<input type="checkbox"/> YES <input type="checkbox"/> NO <b>Comment :</b>
<b>Standard 2.2.4:</b> ➤ Trainee and Director of Training (DoT) interviews	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <b>Comment :</b>
<b>Standard 2.2.5:</b> ➤ Tutorial and teaching timetables in keeping with the recommendations of the Clinical Supervision and 'Protected' Time for Trainees and Directors of Training – A Practical Guideline ➤ Documentation of time per week allocated to formal teaching activities which are independent of clinical contact	<input type="checkbox"/> YES <input type="checkbox"/> NO <b>Comment :</b>
<b>Standard 2.2.6:</b> ➤ Roster of weekly educational activities in which the trainees must participate ➤ Listing of all formal educational sessions, (tutorials, seminars, journal clubs, lecture courses during the period relevant to the accreditation review ➤ Clinic timetable and rosters ➤ Case reports for Phase 2 via ePortfolio ➤ List of available Multi-Disciplinary Team (MDT) meeting ➤ Rostered timetable of planning activities ➤ De-identified individual trainee 5yr rotation schedules Standard	<input type="checkbox"/> YES <input type="checkbox"/> NO <b>Comment :</b>

<p><b>Standard 2.2.7:</b></p> <ul style="list-style-type: none"> <li>➤ Incident reports</li> <li>➤ Induction protocol</li> <li>➤ Services offered to a trainee if required.</li> </ul>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p><b>Comment :</b></p>
<p><b>Standard 2.3.1:</b></p> <ul style="list-style-type: none"> <li>➤ Site visit inspection of facilities to view available textbooks and electronic resources</li> <li>➤ Confirmation of subscription to journals</li> <li>➤ Site Self-Assessment Form: <ul style="list-style-type: none"> <li>➤ List of available books and journals</li> <li>➤ TATS Report</li> </ul> </li> </ul>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p><b>Comment :</b></p>
<p><b>Standard 2.3.2:</b></p> <ul style="list-style-type: none"> <li>➤ Director of Department (DoD) confirmation of link to University</li> <li>➤ Site Self-Assessment Form: <ul style="list-style-type: none"> <li>➤ Provide details on links to a university</li> </ul> </li> </ul>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p><b>Comment :</b></p>
<p><b>Standard 2.3.3:</b></p> <ul style="list-style-type: none"> <li>➤ Director of Department (DoD) confirmation of link to university</li> <li>➤ Site Self-Assessment Form: <ul style="list-style-type: none"> <li>➤ Provide details on links to a university</li> </ul> </li> </ul>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p><b>Comment :</b></p>
<p><b>Standard 2.3.4:</b></p> <ul style="list-style-type: none"> <li>➤ Twelve-month report of patient numbers and case mix</li> </ul>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p><b>Comment :</b></p>
<p><b>Standard 2.4.1:</b></p> <ul style="list-style-type: none"> <li>➤ Minutes of Network Governance Committee (NGC) meetings</li> <li>➤ Documented communication with NGC</li> <li>➤ NGC membership</li> <li>➤ Site Self-Assessment Form: <ul style="list-style-type: none"> <li>➤ Brief explanation of recruitment, selection and appointment processes</li> </ul> </li> </ul>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p><b>Comment :</b></p>
<p><b>Standard 2.4.2:</b></p> <ul style="list-style-type: none"> <li>➤ Documentation of filled radiation oncologist FTE positions and number of trainees</li> </ul>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p><b>Comment :</b></p>
<p><b>Standard 2.4.3:</b></p> <ul style="list-style-type: none"> <li>➤ Confirmation of DoT appointment (ratification letter)</li> <li>➤ Confirmation by RANZCR of attendance at RANZCR required activities</li> <li>➤ Timetabling to show protected time</li> <li>➤ Evidence of participation of other radiation oncologists in education program</li> <li>➤ Trainee Assessment of Training Site (TATS)</li> </ul>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p><b>Comment :</b></p>
<p><b>Standard 2.4.4:</b></p> <ul style="list-style-type: none"> <li>➤ Documentation of individuals' clinical workload</li> <li>➤ Site Self-Assessment Form: <ul style="list-style-type: none"> <li>➤ List of radiation oncologists staffing</li> <li>➤ List of MTD's</li> </ul> </li> <li>➤ NGC Minutes</li> </ul>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p><b>Comment :</b></p>



# Appendix 1 – Outcome Tables

## Established Sites

Level	Definition	Extension date	Follow-up
A	Completely satisfactory in all areas, no significant issues, suggestions for improvement only	Extend to 3yr/5yr date as per normal accreditation cycle	Note any suggested improvements for next review/site visit
B	Satisfactory in most areas, some issues noted which require correction but are not significant enough to prevent extension of accreditation		Site to submit report after agreed period of time confirming noted issues have been corrected. Failure to comply may result in downgrade to Level C
C	Significant issues noted which must be corrected before accreditation can continue long-term	Conditions applied to accreditation, extend short-term only, until issues satisfactorily addressed	Report/s to be submitted confirming compliance with conditions, follow-up site visit may be required. Failure to comply may result in downgrade to Level D
D	Multiple significant issues seriously impacting quality of training. Immediate action required, future accreditation in doubt		Report/s to be submitted confirming compliance with conditions, follow-up site visit. Failure to comply may result in loss of accreditation

Level	Definition	Outcome	Follow-up
A	Good potential training experience, no concerns with proposed training program	Accredited	As per regular 5yr accreditation cycle
B	Good potential training experience, some concerns with proposed training program which require monitoring	Accredited - <i>Provisional</i>	Progress report and/or follow-up site visit in 3-12 months
C	Significant concerns noted with proposed training program which must be addressed before a training program can commence	Not accredited	Site advised to reapply for accreditation at a later date once noted concerns have been addressed
D	Multiple significant concerns with proposed training program, site not considered appropriate for training.	Not accredited	Site requested to refer to accreditation standards