



Accredited Training Site		Central Coast Cancer Centre (Gosford Hospital)			Progress Report Due: 9/01/2023	
Criterion	Recommendation	Accountable Officer	Responsible Officer	Progress Update	Supporting Evidence	RAZCR Accreditation Review (INTERNAL COLLEGE USE)
3 Month Actions						
2.2.5, 2.2.6 and 2.4.2	All clinics always have on-site consultants in attendance, Provide RO attendance logs and audits. Ensure all patients are reviewed by a consultant RO in person prior to simulation; provide RO attendance logs/audits	Quality Manager	Chief RT	Completed; see attached documents	Attendance log for clinic. Audit of patients at CT	
2.2.5, 2.2.6 and 2.4.2	Develop an agreed policy for on-site cover arrangements for all consultants, for all leave Provide an estimation of hours per week sessional ROs are able to commit to direct on-site supervision and training of registrars, as well as evidence of offsite training conducted.	HOD	HOD	In progress		
2.4.2	ROs should return to conducting their work on-site	Director of Cancer Services		Completed 30/05/2022	Email attached	
2.2.1	CCCC to provide outcome of the recent External Culture Review	Cancer services operations manager	Operations manager	Completed January 2023	Attached	
2.2.3	Provide prospective schedule of internal tutorials for end of 2022/first half of 2023. Ensure attendance logs kept. Consider encouraging all clinical supervisors to attend a DOT workshop over the next 12 months	DOT DOT/HOD	DOT DOT/HOD	Completed – January 2023 In progress	Internal teaching schedule provided	
2.2.6	Rescind the responsibility for trainees to oversee the cover of clinics in the setting of planned leave. Should be performed by either DOT or HOD. CCCC to respect maximum of 5-6 clinics per week	DOT	DOT	Commenced May 2022	Clinic rosters Clinic rosters	



6 Month Actions					



The Royal Australian and New Zealand
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				Accreditation Progress Report		

Overall Site Comments