

RECONSIDERATION DECISION

WITH RESPECT TO AN ACCREDITATION DECISION PERTAINING TO CENTRAL COAST LOCAL HEALTH DISTRICT – CENTRAL COAST CANCER CENTRE (GOSFORD HOSPITAL)

- 1 The Central Coast Local Health District (**CCLHD**), on behalf of the Central Coast Cancer Centre (**CCCC**), has sought reconsideration in relation to an accreditation decision of the Radiation Oncology Education and Training Committee (**ROETC**) on 16 June 2023 to remove accreditation from the CCCC effective from 25 August 2023 (**Accreditation Decision**).
- 2 The CCLHD sought reconsideration on the following grounds:
 - (a) an error in due process has occurred in the formulation of the original decision;
 - (b) the relevant approved regulation or policy was not correctly applied;
 - (c) relevant and significant information, existing at the time of the original decision and which was known to the original decision maker, was not considered in making the decision; and
 - (d) irrelevant information was considered by the original decision maker in the making of the original decision.

Summary of events leading to the Accreditation Decision

- 3 On 9 May 2022 a site accreditation visit of the CCCC was undertaken by the College's assessors.
- 4 On 26 August 2022 the ROETC reviewed and considered the assessors' findings and documentation (**Site Accreditation Report**).
- 5 On 30 September 2022, by letter, CCCC was advised that the ROETC had determined to downgrade the CCCC to a Level D accreditation status until 26 September 2023.
- 6 On 7 February 2023 the College received a Progress Report from CCCC and its enclosures which raised significant concern for the College.
- 7 On 15 February 2023 the College advised CCCC by letter that the Progress Report submitted on 7 February 2023 did not provide sufficient information on the actions that had been undertaken and the outcomes achieved at the CCCC.
- 8 On 27 March 2023 CCLHD provided the College with a six-monthly Progress Report.
- 9 On 6 April 2023 the College requested the CCCC to show cause, by written submission within 21 days from the request, as to why the accreditation of the CCCC ought not be withdrawn.
- 10 On 27 April 2023 the CCLHD responded to the show cause notice.
- 11 On 16 June 2023 ROETC made the Accreditation Decision having regard to the:

- (a) Site Accreditation Report;
- (b) 7 February 2023 Progress Report with enclosures;
- (c) 27 March 2023 Progress Report with enclosures;
- (d) various associated correspondences between the College and the CCCC with respect to the timeliness of submission, and sufficiency of, the Progress Reports; and
- (e) response to the show cause notice.

(Material)

- 12 A request for reconsideration with respect to the Accreditation Decision was received on 21 July 2023.

30 September 2022 letter to CCCC

- 13 As noted at paragraph 5, the College wrote to the CCCC on 30 September 2022 setting out recommendations against seven Criteria. The letter stipulated that “*non-compliance to submit the progress reports on their due dates and failure to meet the conditions required of the Criteria set in the Standards would result in further adverse findings against the accreditation status of the training site*” [emphasis added].
- 14 Pursuant to Criterion 2.2.5, 2.2.6 and 2.24, it was recommended that CCCC:
- 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;
 - 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;
 - 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; and
 - 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.
- 15 Pursuant to Criterion 2.4.2, it was recommended that CCCC’s RO’s should return to conducting their work on- site, as per the February 2022 directive from the hospital Executive.
- 16 Pursuant to Criterion 2.2.1, it was recommended that CCCC provide the College with the outcome of the recent External Culture Review as soon as is practicable.

- 17 Pursuant to Criterion 2.2.3, it was recommended that CCCC:
- 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; and
 - 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.
- 18 Pursuant to Criterion 2.2.6, it was recommended that CCCC:
- 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.
 - respect absolute maximum of 5-6 clinics per week per trainee (irrespective of leave absence and cover).
- 19 In total there were ten recommendations.

Achievement with respect to identified improvements against Criterion

- 20 As at the Accreditation Decision, the College was of the view that the following recommendations had been satisfied:
- (a) Criterion 2.2.5, 2.2.6 and 2.4.2 third dot point;
 - (b) Criterion 2.2.3 (both dot points); and
 - (c) Criterion 2.2.6 (both dot points).
- 21 As at the Accreditation Decision, the College formed the view, on the available evidence that the remaining Criterion had **not been satisfied**. The College notes as follows with respect to:
- (a) **Criterion 2.2.5, 2.2.6 and 2.4.2 first and second dot points**, only 5 weeks of data was supplied and the attendance logs and audits were not performed by the Quality Manager. In response to an inquiry, the College were informed by CCCC that this recommendation was “not viable with current resources”;
 - (b) **Criterion 2.2.5, 2.2.6 and 2.4.2 fourth dot point**, no clear evidence had been provided. For example, no individual timetables were provided for each consultant, and the training schedule that was provided was unable to be interpreted;
 - (c) **Criterion 2.4.2**, whilst by way of purported evidence an email was provided stating all ROs should return to work on site, no evidence, such as individual consultant timetables, was provided to evidence that the ROs had returned to site; and
 - (d) **Criterion 2.2.1** the External Cultural Review Report was provided which gave rise to serious concerns about the cultural and operation of the CCCC.

Application for Reconsideration

- 22 The CCLHD has made a number of submissions in support of the application for reconsideration (**Application for Reconsideration**). By way of general response to the submissions, it is worth noting the following:
- (a) In its Application for Reconsideration CCLHD asserts that *‘the College did not at any time after the provision of the Site Assessment Report set out the College’s position regarding the Centre’s progress as against the Accreditation Standards’*.
 - (b) This assertion is factually incorrect. The College wrote to Dr Nardone on 15 February 2023 advising that CCCC’s 7 February 2023 correspondence did not provide sufficient information on the actions that had been undertaken and the outcomes achieved at the CCCC. The letter provided guidance as to what was required and demanded that a full copy of the External Culture Review Report, including detailed follow up actions, be provided to ROETC within fourteen days of the letter. The letter further set out that CCCC was to provide a comprehensive progress report including further evidence.
 - (c) We also note that in response to CCLHD’s letter of 17 November 2022, the College wrote to CCCC on 12 December 2022 restating the requirements from 30 September 2022.
 - (d) The Application for Reconsideration states that the Accreditation Decision was taken on the basis of concerns about culture, including those raised in the External Culture Review, however it alleges that those issues were not particularised.
 - (e) The ROETC, having reviewed the Material, does not agree that the issues were not particularised or known to the CCCC, noting that the hospital was very aware of the cultural issues at the site. The External Culture Review had already been commissioned when the original site assessment occurred. Indeed, the Application for Reconsideration identifies at paragraph 37 that *‘The College’s request for an External Culture review originated in correspondence arising out its 2019 site visit to the Centre’*. CCCC cannot now allege that it was not aware of the cultural issues when it had already specifically commissioned the External Culture Review to explore the identified issues.
 - (f) The Application for Reconsideration further suggests that the College fell into error because the original site Assessment Report did not feature culture in the review against the accreditation standards. The Application for Reconsideration seems to imply that the College did not consider issues of workplace bullying and harassment as important until the External Culture Review document was available.
 - (g) This assertion is incorrect and inconsistent with the explicit provisions in the inspection report where issues of culture were clearly referenced against Standard 2.2.1 and elsewhere which required ethical conduct.
 - (h) The Summary of the 2019 Progress Report outlined that following investigation, the RANCR Accreditation team identified three main issues for improvement which included Workplace Culture (Trainee Welfare). It was

identified then that longstanding cultural issues between the staff specialists and VMO's were evident to all stakeholders including Trainees.

- (i) Based on the 2019 assessment, while the cultural issues did not appear to directly impact Trainee wellbeing, there was strong concern of the harmful effect that the workplace environment would create for both current and future Trainees and that this warranted further monitoring. The fact that a copy of the External Culture Review was requested by the assessors evidences that culture was of a strong concern at the time of the inspection.
- (j) We note that College's members are expected to adhere to the standards of ethical conduct as per the RANZCR Code of Ethics. The Code is to be used by RANZCR's members to inform decision-making and critical reflection to provide a framework to preserve the high standards required in our members' professional practice. Principle 8 of the Code stipulates that our members have a duty to attend to the health and wellbeing of their colleagues, including trainees. Where bullying, discrimination or other unacceptable behaviour is witnessed or learnt of, members have a duty to report and prevent it from reoccurring.
- (k) The Application for Reconsideration states that "*Standard 2.2.7.... was marked as fully met in the Site Assessment Report*". This statement fails to have regard to the accompanying comments which were "*the lack of harmony within the consultant group is evidence, and obvious to trainees. The College awaits the result of the External Culture Review regarding this issue.*" The statement also fails to have regard to the positive obligation to report and prevent bullying, discrimination or other unacceptable behaviour as set out at Principle 8 of the RANZCR Code of Ethics. <<https://www.ranzcr.com/college/document-library/ethic>>
- (l) The Application for Reconsideration states that "*The College's acknowledgement that the Centre had made progress on supervision and training was not taken into account in the Accreditation Decision or was given little weight when, in fact, that progress was the most important factor going to accreditation.*"
- (m) ROETC considers that progress was given appropriate regard in its determination.
- (n) The Application for Reconsideration states that "*ROETC did not have a discretion to make an accreditation decision before receiving the 6 month report from the Centre*".
- (o) ROETC disagrees. It was open to ROETC to make an earlier decision if it believed that sufficient progress was not being made.
- (p) The Application for Reconsideration states that the ROETC based their decision on advice provided from independent confidential sources without reference to when or where this information was gathered.
- (q) This is incorrect. RANZCR's accreditation processes stress the importance of anonymised feedback in order to protect Trainees and to ensure ongoing disclosure of feedback. This practice is also in line with the RANZCR Privacy

Policy. ROETC did not base its decision solely on advice provided from independent confidential sources.

- (r) Concerning feedback was received by multiple sources from the time of the initial assessment in December 2019 up to as recently as the Accreditation Decision. The ROETC took into consideration such information from previous and current Trainees via feedback and TATS reports, the External Cultural Review and the correspondence and evidence submitted by CCCC as part of their decision making.
- 23 Having considered the Application for Reconsideration, ROETC has formed the same decision as the original decision, after giving appropriate significant weight to the cultural issues. ROETC considers that the grounds set out in the Application for Reconsideration have not been made out. Issues of culture, and particularly bullying, discrimination and harassment formed part of the assessment criteria, were clearly identified in the inspection report and were to be further considered once the External Culture Review Report had been received, and continue to be of concern.
- 24 ROETC consider that the College has, through various correspondences, including the 'show cause' letter, put the CCCC on notice that issues of culture were of concern to the College and would impact on accreditation if not remediated.

Reconsideration Decision

- 25 Having considered the submissions made by CCLHD, and the reasons set out above, ROETC affirms the original Accreditation Decision.