



Royal College
of Surgeons
ADVANCING SURGICAL CARE



Centre Accreditation

Centre accreditation

The Royal College of Surgeons of England (RCS) is a leading national and international centre for surgical education, training, assessment, examination and research. As a registered charity, the RCS is committed to promoting and advancing the highest standards of surgical care for patients, and enabling surgeons to achieve those standards. To achieve these aims, the RCS, through its accreditation activities, is dedicated to:

- » providing strong leadership and support for surgeons in all matters relating to their surgical practice, throughout their surgical careers;
- » working in partnership with the providers of surgical education to ensure the highest standards of education in surgery are met;
- » providing assurance that surgical education is developed and delivered to the standards expected by the Royal College of Surgeons of England;
- » ensuring that the content of any educational provision is evidence-based, up-to-date and is relevant to its target audience and the development of competent surgeons;
- » ensuring that any educational provision is well constructed, free from bias, and has appropriate evaluation to ensure constructive improvement;
- » ensuring that the infrastructure and supporting frameworks around any educational provision are of the highest quality.

Centre accreditation is an award of excellence from the Royal College of Surgeons in recognition of outstanding surgery-related educational provision by a surgical education centre. The RCS centre accreditation process is a review of the entire surgical education centre, its facilities, resources and faculty, its education portfolio, and the infrastructure and quality management processes which underpin the delivery of its educational products. Centre accreditation is only awarded where there is a clear demonstration of, and a broad confidence in, each of these components. As part of an application, evidence must be provided which demonstrates that the delivery of all provision meets the quality and standards as defined by the College. Where centre accreditation is awarded, the centre receives a time limited institutional accreditation.

Benefits of centre accreditation

Receiving centre accreditation from the Royal College of Surgeons of England will enable you to join a very select group of centres that have demonstrated excellence in surgical education provision. The accreditation is recognition of the administrative and academic infrastructure, as well as the quality of the academic provision and delivery.

Centre accreditation paves the way for a unique form of collaborative educational partnership between the Royal College of Surgeons of England and the centre. There are a number of professional benefits that accompany centre accreditation from the Royal College of Surgeons. These benefits include:

- » expert review of the centre and all surgery-related course provision;
- » use of the strap line 'Accredited by the Royal College of Surgeons of England' for a three year accreditation term (subject to satisfactory monitoring and review);
- » use of the RCS Logo on materials and websites related to the centre;
- » use of the RCS Logo on materials and websites for each surgical course run by the centre;
- » peer review of all surgical products from a panel of leading surgeons;
- » listing on RCS website;
- » listing on RCS Accreditation Portal;
- » listing in RCS *Bulletin*;
- » use of RCS online participant evaluation, SCOPE, for all surgical courses;
- » applicable courses will be awarded with Continuing Professional Development (CPD) points as part of course accreditation (where relevant).

Centre accreditation provides an opportunity to develop a wider collaborative educational partnership with the RCS. This could include surgical education, curriculum design expertise, as well as research and faculty exchange opportunities.

Criteria and standards for centre accreditation

Accreditation criteria and standards

An accreditation panel must satisfy itself that a surgical education centre fulfils the following:

1. The surgical education centre

- » 1.1 The institution seeking accreditation must be a provider of postgraduate education and training and have a portfolio of surgery-related educational provision in a range of specialties, which cover a range of grades.
- » 1.2 The institution must be committed to the development of competent surgeons, and must share the educational philosophy of the Royal College of Surgeons.
- » 1.3 The institution must be financially sound. Capital and revenue funding for the surgical portfolio must be maintained throughout the accreditation term.
- » 1.4 The institution's educational portfolio must be consistent with the College's strategic plan, educational framework, regulations, policies and practices.
- » 1.5 The institution must deliver the educational activity and grant any award. The Royal College of Surgeons of England will not accredit any activity that is delivered by any body other than that accredited by The Royal College of Surgeons of England. Any sub-contracting, serial validation or serial franchising of any activity must be subject to a separate accreditation process.
- » 1.6 Where the institution operates activities in partnership with a validating university, they are advised to seek guidance from the Quality Assurance team at The Royal College of Surgeons of England prior to the submission of any application for centre accreditation.
- » 1.7 The institution must have in place equal opportunities and anti-discriminatory policies and mechanisms for monitoring and implementation of these policies.

2. Effective organisational structure

- » 2.1 The institution must have a defined strategy for the delivery of its educational portfolio.
- » 2.2 The institution must have an appropriate organisational structure with delineated lines of responsibility, and must provide details of how the educational portfolio is managed within this structure.
- » 2.3 Each educational activity or portfolio of activities must have an appropriate medical director or lead faculty member assigned with authority and accountability for the portfolio or activity.
- » 2.4 Each educational activity must have an identified faculty that will assume educational and supervisory responsibilities throughout the delivery of the activity.
- » 2.5 The institution must have appropriate administrative and technical support to facilitate the successful delivery of its educational provision.

3. Appropriate learning environment

- » 3.1 The educational portfolio must operate within an environment where appropriate standards are both evident and promoted.
- » 3.2 The institution must have appropriate infrastructure and facilities to enable it to deliver its portfolio of educational activities. Details of the facilities, resources and access to any virtual learning environment should be articulated within the submission.
- » 3.3 The institution must have appropriate admission processes to ensure that only individuals of an appropriate grade or who have received appropriate training are admitted to attend each activity.
- » 3.4 The institution should demonstrate a cohesive learning and teaching strategy for the portfolio. An appropriate range of learning and teaching methods should be employed, whilst individual learning and teaching methods should be designed to allow students to demonstrate the achievement of learning outcomes. Learning and teaching in practice must allow for the development of skills concurrently with theoretical knowledge.
- » 3.5 Evidence must be provided that staff are appropriately qualified and experienced. The range of expertise within the delivery team must encompass all areas of the curriculum to be delivered.
- » 3.6 The institution must have appropriate mechanisms in place for faculty induction, training (where applicable) and peer review as part of a faculty monitoring process.
- » 3.7 The institution must have appropriate mechanisms to support the professional and academic development of its faculty, to ensure that the faculty's knowledge and skill base remains commensurate with current practice.
- » 3.8 The institution must have appropriate mechanisms in place to ensure that any professional qualifications or training remain up-to-date.
- » 3.9 Appropriate technical support staff must be available to facilitate the smooth running of each activity.
- » 3.10 Learning and teaching in practice must be facilitated within an ethical and professional environment whereby the rights and responsibilities of staff and students are fully respected.
- » 3.11 The institution must have appropriate mechanisms to ensure a safe environment for students.
- » 3.12 The institution must have appropriate mechanisms to ensure safe, ethical and professional practice by students.

4. Educational portfolio

- » 4.1 The submission must detail a comprehensive overview of all educational provision undertaken by the institution.
- » 4.2 All activities within the educational portfolio must exhibit the appropriate level of academic challenge. This must be evidenced through the design of the activity and evidence of benchmarking the activity against national or international published standards.
- » 4.3 Each activity must require students to demonstrate knowledge, skills and practice at an appropriate level. Skills development is an essential element of many programmes and (where applicable) the submission must demonstrate clearly how this is to be achieved.
- » 4.4 For activities where formal assessment takes place, the provider must present the cohesive assessment strategy, including assessment criteria and marking schemes to demonstrate how consistency of assessment standards is achieved.
- » 4.5 Awards that are granted following any educational activity must be clearly articulated within the submission.
- » 4.6 The provider should demonstrate that each educational product within its surgical portfolio meets the criteria below.
 - » Each activity must have a scientific and/or educational purpose only. Any commercial sponsorship of the portfolio or activity is clearly stated and has no inappropriate influence on the educational programme content and structure.
 - » The content of each activity is underpinned by evidence-based research and practice, and aims to promote the development of competent surgeons and/or allied professions.
 - » The target audience of each activity falls within the remit of the Royal College of Surgeons, and is in line with the title and content.
 - » The learning aims are: clearly defined, appropriate for the target audience, and are properly referenced in the content.
 - » The learning outcomes are achievable and properly reflected in the content, structure and assessment (if applicable), are specifically defined and appropriate for the target audience.
 - » The structure, as well as the teaching and learning methods used are relevant and appropriate to deliver the defined learning outcomes.
 - » Assessment methods (if applicable) are relevant and appropriate, and in accordance with the learning outcomes.
 - » Appropriate resources and learning materials are available to support the learning by the delegates.
 - » The presenters/teachers/facilitators for each activity have proven relevant expertise, skills and knowledge to deliver the education programme within the specific subject(s) identified.

- » Any award granted is commensurate with the activity undertaken and granted following appropriate assessment.
- » Each activity has been received positively in delivery.
- » Each activity is in line with the strategic portfolio of the Royal College of Surgeons.

5. Quality Assurance

- » 5.1 The institution must demonstrate an established and successful record of medical education provision.
- » 5.2 The institution must demonstrate robust quality assurance and quality management processes including the periodic review of the academic content, faculty, assessment (where applicable) and quality management of its educational portfolio. A defined quality assurance process must underpin each educational activity and should include an effective assessment process that evaluates the intended learning (eg evaluation or feedback form).
- » 5.3 The institution must supply details of how the educational products within its portfolio are monitored and reviewed and its procedures for the maintenance and enhancement of quality and standards. This should include the processes for implementing recommended actions, for dealing with negative feedback or areas of concern that are raised by participants or faculty, and for improving its provision where materials or aspects of the activity have become outdated.
- » 5.4 The institution must supply details of the faculty selection, monitoring and review processes, and the processes to ensure that the faculty knowledge, skills and any qualification enabling them to provide training, (such as *Training the Trainers*) remain up-to-date.
- » 5.5 The institution must provide a summary of the outcomes of any recent external or internal review of the centre, or of any of its educational provision. This should include details of the most recent institutional and portfolio review.
- » 5.6 The institution is required to ask faculty to declare any interest they may have relating to the centre.

Accreditation visit

As part of centre accreditation, and following an initial review of the documentation submission, the Royal College of Surgeons will arrange a panel visit to the applying centre to ensure compliance with the College criteria and standards for surgical education provision. The visit will only be arranged following the submission of all documentation, and would usually take place no sooner than eight weeks from the document submission. The panel would usually consist of three senior surgeons and one staff member from the Royal College of Surgeons.

The accreditation visit would usually take two full days and a programme for the day will be agreed prior to the visit. The programme will include; meeting the faculty and support staff; reviewing the facilities at the centre; reviewing course provision in delivery (where appropriate); and a detailed and comprehensive discussion around the application.

The applying centre will be expected to meet all costs of the accreditation panel visit including any travel and accommodation costs that are required.

Following an accreditation visit, a report will be compiled and discussed at the RCS Quality Assurance and Accreditation Committee. If the committee supports the accreditation, it will be tabled at College Council.

Monitoring

It is a requirement that any accredited centre complies with the College's monitoring processes. The College's processes are three-fold:

1) Participant feedback

It is a requirement that participants on educational events evaluate their educational experiences shortly after the conclusion of the event via the College's online evaluation platform SCOPE. The College will provide detailed guidance and a link to the online participant evaluation form following centre accreditation.

2) Faculty feedback

The organiser or tutor of each educational event will be required to provide a report to the Royal College of Surgeons' Quality Assurance & Accreditation Department at the end of each year of the accreditation term. The report should detail how the activity has run over the previous 12 months and should critique the learning outcomes; learning materials; teaching and learning methods; facilities and resources; and assessment methods. For events that run on a cyclical basis, the report should also detail any planned changes to the event including changes to the programme, content, learning outcomes, faculty, or duration.

3) Annual report

A responsible officer from the centre will be required to provide an annual report to the RCS. This should include a summary of any internal monitoring or review that took place during the period such as a review of the academic content and quality management of the educational activities. The report should include summaries of any one-off educational events such as conferences that were run during the period, and details of any planned changes to the educational portfolio, faculty or general provision of the centre over the upcoming year.

The above information will be reviewed by the College's Quality Assurance and Accreditation Committee on an annual basis. It will also feed into any re-accreditation application at the conclusion of the accreditation term.

The College will charge a monitoring fee at the end of each year of the accreditation. Details of the fee can be found on the Accreditation Portal at <http://accreditation.rcseng.ac.uk/Home/Fees>.



Frequently asked questions

How do I apply for centre accreditation?

In order to apply, a responsible member of the surgical education centre must register an account with the RCS Accreditation Portal at <http://accreditation.rcseng.ac.uk/> and complete an application under 'centre accreditation'. An overview of the centre and its provision must be completed. The RCS Quality Assurance Team will then be able to guide you through what specific information will be required.

Who can apply for centre accreditation?

Any institution which provides a wide range of postgraduate education and training for clinicians from junior doctors through to consultants, and the wider surgical team, in a range of different surgical specialties would be eligible to apply for centre accreditation.

What educational provision would the RCS accredit as part of the centre accreditation?

The RCS would expect any surgical centre to deliver at least two surgery-related courses. However, the College would expect that information on the entire surgery-related educational portfolio to be supplied as part of the application, including information on masterclasses, workshops, skills days, study days, symposia and e-resources (where applicable).

How long does the accreditation process take?

The process takes several months. Full document submission must be received well in advance of the planned accreditation visit. The RCS panel will need a minimum of eight weeks notice prior to the accreditation visit, and the full accreditation report from the accreditation visit will need to be reviewed by the RCS Quality Assurance and Accreditation Committee, and approved by College Council.

How long does accreditation last for?

Accreditation is awarded for three years subject to satisfactory annual monitoring and review. This can be further extended by mutual agreement.

When do I have to pay the fees?

The initial review and processing fee is payable upon submission of the application and further documentation. Payment of the visitation fees will be required prior to the accreditation visit. Payment of the accreditation fee will only be required following confirmation of the accreditation from the RCS.

When will the accreditation visit be scheduled?

The accreditation visit will only be scheduled once all documentation has been submitted and any queries about the documentation have been addressed.

Will the centre be listed upon the RCS website?

Yes, details of each centre will be listed on the 'Centre Accreditation' section of the RCS website.

Will the accreditation cover all surgical provision at the centre?

Yes, the application will need to provide extensive information about all surgery-related educational activities delivered by the centre.

If the centre is accredited, will educational products developed during the accreditation term be accredited?

If an accredited centre plans to introduce a new educational product during the accreditation term, the centre will need to provide full information to the College at least two months prior to the launch of the product in order that it can first be reviewed by the College.

Where can I find further information?

If you have any queries about the accreditation processes then please contact the Quality Assurance Department at qa@rcseng.ac.uk or on 020 7869 6221/6236.