## Draft guidelines for new subspecialty training centre applications

## **Provisional accreditation**

For centres which have not been established, or will be relocated, provisional accreditation should be sought so that trainees working at the newly established centre can still receive recognised subspecialty training during the provisionally accredited period. Application should be made to the Subspecialty Board and

Submission of application documents [draft Application Form enclosed]:

- Estimated workload of new centre
  - Patients statistics
  - > Number of cases per year (highly complex, complex, intermediate, simple)
- Number of teams
- Number of trainers
- Number of trainees (subspecialty, higher)
- Service provision (draft service roster, e.g., draft call list, draft OPD roster, trainer/trainee timetables)
- Supporting services
- Training activities, availability of various activities (teaching, administration, research/publication)
- Designated subspecialty beds (if any)
- Subspecialty services, e.g., bronchoscopy for PRM, EEG for PN

Site visit to be arranged before establishment of the centre if possible and definitely before the end of the provisional accreditation period, nominated by the CSB (Assessment Committee) and endorsed by the Council [draft Centre Visit/Review Form enclosed]

Provisional accreditation of up to one year may be made, with formal approval of accreditation status to be made before the provisional accreditation period elapses. Review of workload statistics should be made at regular interviews within the provisional accreditation period.

Remarks: Subspecialty Board should follow the following procedures for relocation of training centre:

- To inform the Committee for Subspecialty Boards (CSB) 6 months before the re-location with above relevant documents briefing scope of services and highlighting the changes for the provisional accreditation
- To inform the CSB 6 months after settlement in the new location with data relevant to the accreditation of the newly relocated training centre.
- CSB, with the help of the Subspecialty Board will conduct a site visit to the subspecialty training centre for accredited centre recognition

## First accreditation

For centres that are already providing subspecialty service, but was not part of the original subspecialty accreditation exercise involving the external assessor, a new application for centre accreditation should be made.

Submission of application documents [draft Application Form enclosed]:

- Workload of new centre
  - Patients statistics
  - Number of cases per year (highly complex, complex, intermediate, simple)
- Number of teams
- Number of trainers
- Number of trainees (subspecialty, higher)

- Service provision (service roster, e.g., call list, OPD roster, trainer/trainee timetables)
- Programme\module statistics
- Supporting services
- Training activities, availability of various activities (teaching, administration, research/publication)
- Designated subspecialty beds (if any)
- Subspecialty services, e.g., bronchoscopy for PRM, EEG for PN

Site visit by visiting team nominated by the CSB (Assessment Committee) and endorsed by the Council [draft Centre Visit/Review Form enclosed]

Consider sending accreditation report to external assessor for review. For

Centre may be accredited for full five years if standards that are kept by other equivalent subspecialty training centres have been met.