NETWORK OF ACCREDITED CLINICAL SKILLS CENTRES IN EUROPE (NASCE)

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UEMS programme for the Accreditation of Clinical Skills Centre

(UEMS section of Surgery)

Criteria for Accreditation of a NASCE centre

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Introduction:
Centres will be accredited to 2 levels upon meeting standards set under 6 headers. The 2 levels described below identify different types of units which may provide different roles in the clinical community.
For the moment, although desirable, accreditation is not offered for smaller, often regional skill centres, that offer highly focused training to a select group of learners. It is, however envisaged, that this type of accreditation will be offered in the future, and that the accreditation will be overseen by national NASCE centres.

1. Multispecialty format centre
2. Single speciality centre

Standards:

Criteria for standards are developed under 6 headers which provides the framework for assessment.

Header 1: Governance
Header 2: Administration
Header 3: Teachers
Header 4: Learners
Header 5: Competencies
Header 6: Research and Development

Ground Rules:

It is envisaged that all accredited centres will share data with the NASCE on a yearly basis. This is to encourage positive innovation throughout the network.

Accreditation documentation is written in English.

NASCE accepts no responsibility for accrediting specific skills courses or content per se. NASCE accredits the administering unit.

Accreditation is an ongoing process of development and yearly membership of NASCE is required if accredited status is used in any documents related to the centre.

Accredited units must be in good standing in order to use the resources of NASCE.

	Multispecialty format	Single speciality format
Header 1: Governance	The Centre Director should have: • An appointment for at least 2 years, with dedicated funding for at least a further 2 years • Have a contractually dedicated 0.25 WTE time identifiable to the centre if has other roles • Have fellowship of regional college or equivalent • Have higher qualification or established research portfolio in skills education • Have direct responsibility for the administration of budget/ appointed financial officer • Chair the steering board • Be responsible for ensuring quality in courses offered by the centre The Steering board should have: • Made of a least 3 persons, the majority of whom having clinical qualifications commensurate with their post. • Meet at least 4 times per academic year (minuted) • A robust affiliation/ direct governance relationship with the associated clinical/ academic institution (itself accredited by the relevant national body. At least 1 of the steering board is a direct representative of the associated clinical/ academic institution • Be involved in strategic decision making involving all areas of the centres operation The centre will: • Have an agreed organogram representing the governance structure • Have a clearly defined mission statement/ objectives • Have statutes clearly defining adherence to local and national ethical and relevant legal frameworks including the Helsinki Declaration • Have clearly defined written SOPs for governance related matters	The Centre Director should have: • An appointment for at least 2 years, with dedicated funding for at least one further year • Have a contractually dedicated time of 0.2 WTE identifiable to the centre if has other roles • Have fellowship of regional college or equivalent • Have higher qualification or established research portfolio in skills education • Have direct responsibility for the administration of budget/ appointed financial officer • Chair the steering board • Be responsible for ensuring quality in courses offered by the centre The Steering board should have: • Made of a least 3 persons, the majority of whom having clinical qualifications commensurate with their post • Meet at least twice per academic year • A robust affiliation/ direct governance relationship with the associated clinical/ academic institution (itself accredited by the relevant national body) • Be involved in strategic decision making involving all areas of the centres operation The centre will: • Have an agreed organogram representing the governance structure • Have a clearly defined mission statement/ objectives • Have statutes clearly defining adherence to local and national ethical and relevant legal frameworks including the Helsinki Declaration • Have clearly defined written SOPs for governance related matters

Header 2: Administration	- Have dedicated administrative staff of at least 1 WTE involved solely in pure administrative - The (lead) administrator should be in attendance at the steering committee meetings - Centrally held inventory including high fidelity models updated yearly - Annual accounts with budget predictions for the following fiscal year - Robust audit mechanisms in place - The location of the centre should be fit for purpose and accessible to learners - The centre should have a website that is updated at least monthly detailing courses, structure and objectives - Access to Information technology and technical support on site	- Have dedicated administrative staff of at least 0.5 WTE involved solely in pure administrative - The (lead) administrator should sit on the steering committee - Centrally held inventory including high fidelity models updated biyearly - Annual accounts with budget predictions for the following fiscal year - Robust audit mechanisms in place - The location of the centre should be fit for purpose and accessible to learners at least 75% of the working week - The centre should have a website that is updated at least bimonthly detailing courses, structure and objectives
Header 3: Teachers	- All teachers should have specific relevant skills training and have clinical and scientific legitimacy - At least 3 WTE should be dedicated in a teaching role with specific relevant training in teaching according the standards of the country - At least 1.5 WTE of this is made up of no more than 2 individual posts - At least 2 teachers should have higher qualifications in their speciality, with formal attachment to the unit - The wide experience of the teachers should reflect the curriculum based on stated aims and objectives of the unit	- All teachers should have specific relevant training and have clinical and scientific legitimacy - At least 2 WTE should be dedicated in a teaching role with specific relevant training in teaching according the standards of the country - At least 1 WTE should have higher qualifications in their speciality - The wide experience of the teachers should reflect the curriculum based on stated aims and objectives of the unit

Header 4: Learners	• Training to undergraduate and postgraduate learners or equivalents, as well as at least 2 other medical (interdisciplinary) or paramedical (interprofessional) groups • Single and group training modules should be available, • The unit should offer learners a range of modern techniques including(but not limited to) specific task trainers, High Fidelity simulation, e-learning, simulated and standardised patient scenarios • Documentation regarding the number of training opportunities a year • Access to facilities for technical skills training of at least 20 or more learners at any one time • Availability on site of lecture hall, seminar room(s), remote monitoring (recording/ one way glass/ video) • Access to internet	• Training to undergraduate and/or postgraduate learners or equivalents of one speciality • Single and group training modules should be available • The unit should offer learners a range of modern techniques including(but not limited to) specific task trainers, High Fidelity simulation, e-learning, simulated and standardised patient scenarios • Documentation regarding the number of training opportunities a year • Access to seminar rooms as well as technical skills areas • Access to internet
Header 5: Competencies	• Training for technical and relevant non technical skills is offered • Training for a variety of roles should be available/ potentially be available (for example: Communication/ Decision Making/ Management/ Professionalism/ Scholar/ Crisis resource management) • Training the trainer courses should be available	• Training for technical and relevant non technical skills is offered • Training for a variety of roles should be available/ potentially be available (for example: Communication/ Decision Making/ Management/ Professionalism/ Scholar/ Crisis resource management)
Header 6: Research and development	• Demonstrated scientific (original research) publications in the area of clinical skills delivery/ acquisition/ performance • Formalised documented feedback structures for both course and content and teacher ability should be routinely used for each module. Feedback outcomes are evaluated and available for teachers / trainers to review and form part of a formal audit process • These data must be retained for at least 4 years. • Demonstrated ability to provide curricular development/ novel and innovative • Complete a SWOT analysis of operations • Have a 4 year mission plan • Comprehensive yearly submissions to the NASCE • Participate in NASCE sponsored meetings yearly	• Demonstrated scientific (original research) publications in the area of clinical skills delivery/ acquisition/ performance • Formalised documented feedback structures for both course and content and teacher ability should be routinely used for each module. Feedback outcomes are evaluated and available for teachers / trainers to review and form part of a formal audit process • These data must be retained for at least 4 years. • Demonstrated ability to provide curricular development/ novel and innovative • Complete a SWOT analysis of operations • Have a 4 year mission plan • Comprehensive yearly submissions to the NASCE • Participate in NASCE sponsored meetings yearly

Definitions/ Abreviations:

EU: European Union
UEMS: European Union of Medical Specialists http://www.uems.net/
WG: Working group
NASCE: Network of Accredited Clinical Skills Centres in Europe, Division of UEMS
WTE: Whole time equivalent (i.e. full time worker)
SOP: Standard operating procedures
SWOT: Strengths, Weaknesses, Opportunities, Threats analysis