



THE AUSTRALASIAN COLLEGE  
OF DERMATOLOGISTS

# MOHS MICROGRAPHIC SURGERY TRAINING POSITION ACCREDITATION GUIDELINES

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## Contents

1	INTRODUCTION .....	4
	Aim of Accreditation.....	4
	Definition of Terms and Acronyms.....	4
	Related Documents .....	5
2	MOHS ACCREDITATION PROCESS .....	6
	PLEASE NOTE:.....	7
3	ACCREDITATION OUTCOMES.....	8
4	APPEALS PROCESS.....	12
5	MOHS ACCREDITATION STANDARDS.....	13

# 1 INTRODUCTION

This document outlines the standards required for ACD accredited Mohs Surgery Training positions and the process by which they are accredited. These standards, and the ACD Mohs training program curriculum, have been deemed to be equivalent to those of the American College of Mohs Surgery (ACMS).

## Aim of Accreditation

The aim of accreditation of Mohs Surgery Training positions is to:

- ensure that all Mohs candidates are provided with learning experiences which enable them to acquire the competencies outlined in *ACD Mohs Surgery Training Program Curriculum*
- maintain a consistent level of education and training in every accredited training position, and
- gather feedback from key stakeholders to continually improve all aspects of the Mohs Surgery Training Program.

## Definition of Terms and Acronyms

### ACD

The Australasian College of Dermatologists

### ACMS

American College of Mohs Surgery

### Accredited Training Position

A placement, which has been approved by the College, where a candidate is employed to undertake specialised training in Mohs micrographic surgery

### Accreditation Team

A group appointed to undertake a site visit during the accreditation of a training position. The accreditation team consists of a senior FACD who is a member of the National Accreditation Committee, an ACD accredited Mohs surgeon who is a member of the National Accreditation Committee and a member of ACD education staff. Fellows on the team must be from a state other than the one in which the position is being accredited.

### Accreditation Site Visit

During a site visit, the accreditation team assess the training position (or positions) against accreditation standards. An Accreditation Team is appointed and will meet, where applicable, the Supervisor of Training, Clinical Supervisors, the candidate who currently occupies the position, and the candidate who most recently occupied the training position, if applicable.

### Accreditation Review

An evaluation of a training position(s), against accreditation standards and criteria, conducted by document review, site visit and/or teleconference

### Board of Directors

A committee with responsibilities for the governance, business and affairs of the College

### MMS

Mohs Micrographic Surgery

Candidate

A FACD (or equivalent) who has been appointed to an accredited position in the Mohs Surgery Training Program

Clinical Supervisor (CS)

A Mohs surgeon, other than the Supervisor of Training, who is involved in training and supervision of the candidate

College

The Australasian College of Dermatologists

Facility Review

A review of a facility which is not a registered day surgery (Note: Any unlicensed facility must have an independent [NSQHS assessment](#) performed at their expense, and this assessment will be considered by the NAcC)

National Accreditation Committee (NAcC)

A committee comprised of representatives of ACD who are responsible for overseeing and conducting training position accreditations for the ACD Dermatology Training Program and the ACD Mohs Surgery Training Program

National Education Committee

A committee comprised of representatives of ACD who are responsible for the development and operation of programs that are recognised internationally as best practice in dermatology education

Provisos

A condition or stipulation resulting from an accreditation review that the training position must meet, within a specified time frame

Supervisor of Training (SoT)

The principal Mohs surgeon overseeing the Mohs Training Program in a facility (previously known as Program Director)

Training facility

The location in which the Mohs surgery training position resides (Note: A training facility may include more than one physical location, eg a base site and one or more satellite sites)

## Related Documents

- *Application for Accreditation of a Mohs Surgery Training Position*
- *ACD Mohs Micrographic Surgery (MMS) Training Program Curriculum*
- *Mohs Candidate Feedback Questionnaire*
- *Training Program Handbook Mohs Surgery*
- *Mohs Surgery Committee Terms of Reference*
- *Accreditation Reviews and Outcomes Guidelines September 2012*
- *National Accreditation Committee Terms of Reference*

## 2 MOHS ACCREDITATION PROCESS

All Mohs surgery training positions must be accredited by ACD.

Applications for accreditation of a Mohs Surgery Training Position must be made on the prescribed form and then submitted to College with all required supporting documentation.

The Mohs accreditation process is outlined below:



Once a position has been accredited, any changes in the position that may significantly alter the educational experience of the candidate must have the prior approval of the National Accreditation Committee, National Education Committee and Board of Directors (where necessary).

**PLEASE NOTE:**

Each training facility will be accredited for only one candidate per year. Applications for a second training position in a training facility will only be considered if the second position has an entirely independent program with a separate Supervisor of Training, Clinical Supervisors and case load available to the second candidate.

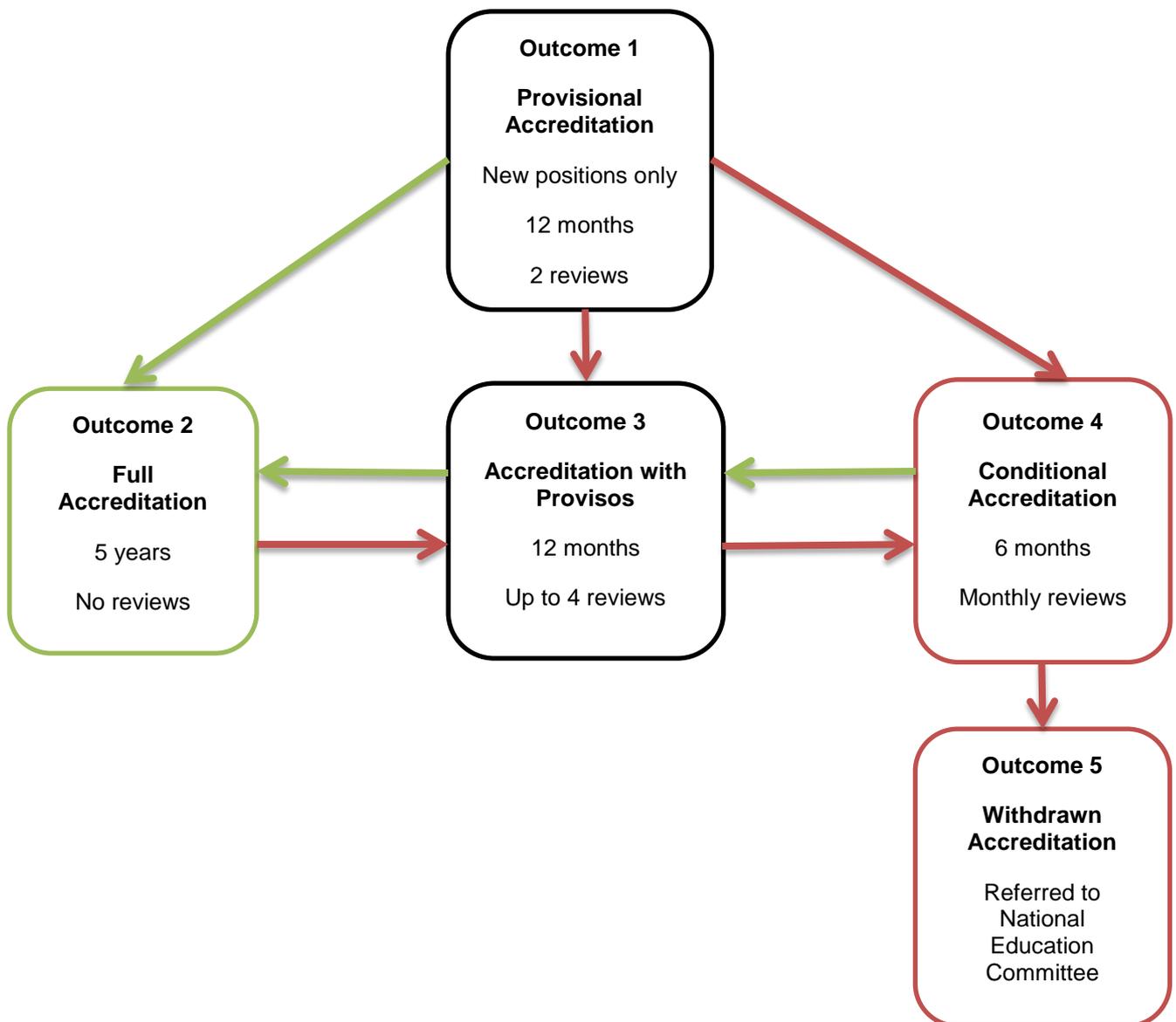
The training facility may include more than one physical location, eg base site with one or more satellite sites. The training facility (including each satellite site), the Supervisor of Training and the other Clinical Supervisors, must all be accredited by ACD if the candidate undertaking the program wishes to be added to the ACD Approved Mohs Surgeons Register at the completion of their training.

### 3 ACCREDITATION OUTCOMES

There are 5 outcomes of the ACD Mohs accreditation process:

1. Provisional Accreditation
2. Full Accreditation
3. Accreditation with Provisos
4. Conditional Accreditation
5. Withdrawn Accreditation

These outcomes of accreditation are the same for all ACD training positions and are described in more detail in *Accreditation Reviews and Outcomes Guidelines*.



## 1. Full Accreditation

### ***What is full accreditation?***

When a position(s) gains the outcome of full accreditation, the position is not subject to any reviews, and is entered into the schedule for the next State based re-accreditation of the State in which the position resides.

### ***When can a position be granted full accreditation?***

- At the satisfactory completion of accreditation with provisos period
- At the satisfactory completion of a provisional accreditation period
- At the satisfactory completion of a State based accreditation

### ***How long is full accreditation granted for?***

For up to a period of 5 years, or the next scheduled State based reaccreditation of the State in which the position resides, whichever comes first

### ***Are there any reviews during a period of full Accreditation?***

No, during a period of full accreditation a position is not subject to any reviews. However, if it is brought to the attention of the National Accreditation Committee (NAcC) that there are deficiencies in/concerns for a position or the structure of a training position has changed, the NAcC can commence an accreditation review at any time at their discretion.

## 2. Accreditation with Provisos

### ***What is accreditation with provisos?***

Accredited with provisos means a position has been accredited (or reaccredited); subject to set provisos being complied with, within a specific timeframe. Position(s) accredited with provisos will be subject to proviso review checks by an accreditation inspection team.

### ***When can a position be granted accreditation with provisos?***

- At the satisfactory completion of a conditional accreditation period
- At the unsatisfactory completion of a full accreditation period
- At the unsatisfactory completion of provisional accreditation period

### ***How long is accreditation with provisos granted for?***

Accreditation with provisos lasts for a set period of time, usually 12 months.

### ***Are there any reviews during a period of accreditation with provisos?***

Yes, a position that gains accreditation with provisos will be subject to at least two of the following proviso review checks, as determined by the NAcC:

- |                          |          |  |
|--------------------------|----------|--|
| ○ Proviso Review Check 1 | 2 months | Proviso reporting template                   |
| ○ Proviso Review Check 2 | 4 months | Teleconference                               |
| ○ Proviso Review Check 3 | 6 months | Teleconference or site visit                 |
| ○ Proviso Review Check 4 | 8 months | Teleconference or proviso reporting template |

### ***What happens at the end of a period of accreditation with provisos?***

If, after proviso review checks 2, 3 or 4 the training facility **satisfies** the NAcC that the provisos listed in the relevant accreditation report have been complied with, the NAcC have the discretion to reassess the position and change the accreditation outcome of the position to **full accreditation**.

If, after all proviso review checks have been completed, the training facility still has **not satisfied** the provisos listed in the relevant accreditation report, the NAcC have the discretion to reassess the position and change the accreditation outcome of the position to **conditional accreditation**.

### 3. Provisional Accreditation (New positions only)

#### ***What is provisional accreditation and when can it be granted?***

Provisional Accreditation is granted **only** upon the creation of a new training position. It is granted for a set period of time, during which time the position will be subject to position review checks by an accreditation team.

#### ***How long is provisional accreditation granted for?***

For a set period of time, usually 12 months

#### ***Are there any reviews during a period of provisional accreditation?***

Yes, a position that gains provisional accreditation will be subject to the following position review checks:

Position Review Check 1	3 months	Teleconference
Position Review Check 2	6 months	Site inspection

#### ***What happens at the end of a period of provisional accreditation?***

If, at the completion of both position review checks, the training facility **satisfies** the NAcC that the minimum requirements for accreditation are continuing to be met, and the position has satisfactorily completed a period of provisional accreditation, the NAcC have the discretion to reassess the position and change the accreditation outcome of the position to **full accreditation**.

If, at the completion of both position review checks, the training facility **does not satisfy** the NAcC that the minimum requirements for accreditation are continuing to be met, and the position did not satisfactorily complete a period of provisional accreditation, the NAcC have the discretion to reassess the position and change the accreditation outcome of the position to **accreditation with provisos, or conditional accreditation**.

### 4. Conditional Accreditation

#### ***What is conditional accreditation and when can it be granted?***

Conditional accreditation is granted upon failure of compliance with provisos, minimum requirements for accreditation, or failure of provisional accreditation site inspection. To gain conditional accreditation the position has had consistent deficiencies, and failed to improve.

#### ***How long does conditional accreditation last for?***

Conditional accreditation is granted for a period of up to 6 months.

#### ***Are there any reviews during a period of conditional accreditation?***

Yes, monthly reviews with the training facility, inspection team and the Chair of the NAcC will be conducted, in a manner decided by the Chair of the NAcC on a case by case basis.

If any one position at a training facility gains conditional accreditation, **all other** (if any) training positions at that facility will be subject to an immediate re-accreditation review.

The National Education Committee will be advised when a position has been granted conditional accreditation.

#### ***What happens at the end of a period of conditional accreditation?***

If, at the completion of a period of conditional accreditation, the training facility **satisfies** the NAcC that the minimum requirements for accreditation are met, the NAcC have the discretion to reassess the position and change the accreditation outcome of the position to **accreditation with provisos**.

If, at the completion of a period of conditional accreditation, the training facility **fails to satisfy** the NAcC that the minimum requirements for accreditation are met, the NAcC have the discretion to reassess the position and change the accreditation outcome of the position to **withdrawn accreditation**.

## 5. Withdrawn accreditation

### ***What is withdrawn accreditation and when can it be granted?***

When a position that has previously been accredited, fails to meet the minimum requirements for accreditation, and has consistently failed to improve, the accreditation of the position will be withdrawn and the matter will be referred to the National Education Committee for investigation.

### ***How long does withdrawn accreditation last for?***

Once a position has had accreditation withdrawn, the position is no longer accreditable. If the training facility wishes to apply for a further training position, they will need to re-commence the accreditation process by submitting a new application for accreditation of a Mohs training position to the NAcC.

## **4 APPEALS PROCESS**

The College recognises the importance of natural justice and of avoiding bias and conflict of interest in its dealings with all people. The College aims to ensure that all its official processes are conducted in a fair and transparent manner. Nevertheless it is recognised that there is always the potential for grievances to arise and it is for this reason that the Appeals Process has been established.

The Appeals Process provides a means by which any person who believes they are, or have been, adversely affected by a decision of any Board or Committee of the College can have their grievances addressed in a properly constructed and formal manner. Any person with a grievance will be encouraged to first seek to have the decision that has caused the grievance reviewed and reconsidered by the Committee or Board that made the decision.

The Appeals Process can be downloaded from the College website.

## 5 MOHS ACCREDITATION STANDARDS

<b>Standard One</b>		<b>Education and Training</b>
<p><b>Mohs Surgery Training Positions provide a 12 month program of organised and progressive educational and clinical training opportunities that enable candidates to attain the competencies of the Mohs Surgery Training Program curriculum</b></p>		
<b>1.1</b>	<p><b>Mohs Surgery Training Positions must have a coordinated schedule of learning experiences</b></p>	
<p>The position must:</p> <ul style="list-style-type: none"> <li>• provide education in all elements of the ACD MMS Training Program curriculum</li> <li>• provide direct experience and progressively increasing levels of responsibility for patient management</li> <li>• be structured so that candidates are involved in Mohs surgery throughout the year</li> <li>• include lectures, tutorials, seminars, peer review conferences which are developed with reference to the curriculum. Such activities must be provided at least quarterly</li> <li>• provide at least one session per month (or equivalent) of protected study/research time</li> <li>• provide access to files of previous cases and other study materials so that candidates may gain the maximum possible learning experience during their training.</li> </ul>		
<p><b>EVIDENCE</b></p> <p>Candidate Timetable            Schedule of learning experiences delivered and those planned to be provided            Candidate Feedback Questionnaire</p>		
<b>1.2</b>	<p><b>Mohs candidates must be exposed to an appropriate number of patients to obtain the breadth and depth of experience as defined by the Mohs Surgery Training Program curriculum</b></p>	
<p>Mohs candidates must:</p> <ul style="list-style-type: none"> <li>• participate in at least 500 supervised Mohs surgery cases each year, and must be the primary surgeon (does all of the first cuts, most of the other cuts and the entire repair) in at least 200 of these cases. At least 90% of cases should be on the head, neck, lower leg (including feet), hands, digits or anogenital</li> <li>• participate in at least 50 Mohs cases each year which are referrals from other medical and surgical specialists, as these tend to be the more challenging and instructive cases</li> </ul> <p>Note the definition of what constitutes a challenging referral or complex case could include:</p> <ul style="list-style-type: none"> <li>• Histologically aggressive tumours</li> <li>• Large tumours, covering at least an entire cosmetic unit, or scalp tumours of greater than 5cm in diameter</li> <li>• Tumours arising at a difficult anatomic site, eg external auditory canal, perianal, intranasal, nailbed, medial canthus</li> <li>• Complex histopathologic interpretation (include cases other than BCC and SCC)</li> <li>• Tumours involving bone</li> <li>• Multiple recurrent tumours or tumour recurrence after prior radiation therapy</li> <li>• Surgeries requiring expertise/involvement of surgical colleague in another discipline</li> <li>• Patient with extremely complex medical problems requiring special intraoperative management.</li> </ul> <p><i>[Reference ACMS Policies, Procedures and Guidelines]</i></p>		
<p><b>EVIDENCE</b></p> <p>Review of logbooks for previous candidates at the training facility            Data table regarding number of referred patients over previous year</p>		

<b>Standard One</b>		<b>Education and Training</b>
<b>Mohs Surgery Training Positions provide a 12 month program of organised and progressive educational and clinical training opportunities that enable candidates to attain the competencies of the Mohs Surgery Training Program curriculum</b>		
<b>1.3</b>	<b>Each Mohs Surgery Training Position must provide opportunity for Mohs candidates to participate in research or other scholarly activities</b>	
Training facilities should provide: <ul style="list-style-type: none"> <li>• access to clinical material suitable for a research project/review</li> <li>• advice and support in conducting research and writing a paper for publication.</li> </ul>		
<b>EVIDENCE</b>		
Training Facility Statement Candidate Feedback Questionnaire		

<b>Standard Two</b>		<b>Supervision and Coordination</b>
<b>Mohs Surgery Training Positions provide effective supervision to support candidates in acquiring the necessary skills, behaviours and knowledge to become competent Mohs surgeons</b>		
<b>2.1</b>	<b>Mohs Surgery Training Positions must have a single, designated Supervisor of Training</b>	
<p>The Supervisor of Training:</p> <ul style="list-style-type: none"> <li>• must be a Fellow of the Australasian College of Dermatologists</li> <li>• must be of be in good standing with the Australian Health Practitioner Regulation Agency (AHPRA) with unrestricted registration</li> <li>• must be approved for inclusion on the ACD Approved Mohs Surgeons Register</li> <li>• must have at least five years' experience of patient care as a Mohs surgeon. The date of eligibility to provide a position will be taken as 5 years after completion of an ACD approved Mohs training program</li> <li>• should have previous experience as a teacher in dermatology and dermatological surgery (Examples of this would include: Hospital or SCF appointments, Supervisor of Training, Director of Training, College Censor or other roles involving teaching of consultants, registrars, GPs or students)</li> <li>• must complete at least 200 Mohs surgery cases in the approved facility per year, including each of the two years prior to the application, to become a Supervisor of Training</li> <li>• should have undertaken ACD Supervisor Training within the last 5 years</li> <li>• must provide evidence of enrolment in pending or current RCPA QAP frozen section technical module (<a href="http://www.rcpaqap.com.au">www.rcpaqap.com.au</a>)</li> <li>• must fulfil their role as described in the <i>Training Program Handbook Mohs Surgery</i>.</li> </ul> <p>Program directors should be academically oriented in that he/she should actively contribute to the body of knowledge in Mohs surgery, cutaneous oncology and related fields with publication or original research in peer reviewed journals, presentation of case reports or clinical series at local, regional or national professional society meetings.</p>		
<b>EVIDENCE</b>		
<p>Confirmation of good standing with AHPRA  Outline of post Mohs training program experience  Outline of teaching experience  Logbook of Mohs surgery cases in the previous year/two years including evidence that 90% of Mohs cases are carried out in difficult sites including the head and neck, lower leg, hands, digits or anogenital area  Confirmation of enrolment in RCPA QAP module  Candidate Feedback Questionnaire</p>		

<b>Standard Two</b>		<b>Supervision and Coordination</b>
<b>Mohs Surgery Training Positions provide effective supervision to support candidates in acquiring the necessary skills, behaviours and knowledge to become competent Mohs surgeons</b>		
<b>2.2</b>	<b>Mohs candidates should be supervised by a sufficient number of appropriately qualified Clinical Supervisors</b>	
<p>Each Mohs Surgery Training Position should have at least two Clinical Supervisors (inclusive of the Supervisor of Training) who are actively involved in the clinical practice of Mohs surgery and have significant responsibility for the instruction and supervision of the Mohs candidate.</p> <p>Each Clinical Supervisor:</p> <ul style="list-style-type: none"> <li>• must be a Fellow of the Australasian College of Dermatologists</li> <li>• must be in good standing with the Australian Health Practitioner Regulation Agency (AHPRA) and have unrestricted registration</li> <li>• must be approved for inclusion on the ACD Approved Mohs Surgeons Register</li> <li>• must have at least five years' experience of patient care as a Mohs surgeon. The date of eligibility to provide a position will be taken as 5 years after completion of an ACD approved Mohs training program</li> <li>• must fulfil their role as described in the <i>Training Program Handbook Mohs Surgery</i></li> <li>• must complete at least 100 Mohs cases each year including each of the two years preceding the application, and should have undertaken ACD supervisor training (link) within the last 5 years.</li> </ul>		
<b>EVIDENCE</b>		
<p>Evidence of good standing with AHPRA</p> <p>Logbook of Mohs surgery cases in the previous year/two years including evidence that 90% of Mohs cases are carried out in difficult sites including the head and neck, lower leg, hands, digits or anogenital area</p> <p>Candidate Feedback Questionnaire</p>		
<b>2.3</b>	<b>The Mohs candidate must be adequately supervised at all times</b>	
<ul style="list-style-type: none"> <li>• All patient care must be supervised by a qualified Clinical Supervisor</li> <li>• Candidates must be provided with rapid and reliable systems for communicating with their Clinical Supervisor.</li> </ul>		
<b>EVIDENCE</b>		
<p>Candidate timetable showing supervisor availability for each session</p> <p>Candidate Feedback Questionnaire</p>		
<b>2.4</b>	<b>Mohs candidates must receive regular formative assessment</b>	
<ul style="list-style-type: none"> <li>• Regular constructive feedback on performance, both formal and informal, is provided by supervisors</li> <li>• A formative In-Training Assessment (ITA) must be conducted at 4 and 8 month intervals during the 12 month training period</li> <li>• Case-based Discussions (CbDs) are completed four times in the 12 month training period.</li> </ul>		
<b>EVIDENCE</b>		
<p>Review of Candidate's portfolio</p> <p>Candidate Feedback Questionnaire</p>		

<b>Standard Two</b>		<b>Supervision and Coordination</b>
<b>Mohs Surgery Training Positions provide effective supervision to support candidates in acquiring the necessary skills, behaviours and knowledge to become competent Mohs surgeons</b>		
<b>2.5</b>	<b>Mohs candidates undertake a program of in-training summative assessments</b>	
<p>Workplace-based summative assessments are undertaken at evenly spaced intervals as outlined in the <i>ACD Mohs Surgery Training Program Handbook</i>:</p> <ul style="list-style-type: none"> <li>• Five Mohs Procedural Dermatology Assessments (ProDAs) as specified</li> </ul> <p>[1. Mohs ProDA Surgical Technique: Mohs Micrographic Surgery &amp; Perioperative Management in Mohs Micrographic Surgery; 2. Mohs ProDA Laboratory and Pathology; 3-5 Mohs ProDA Surgical Technique: Reconstruction]</p> <ul style="list-style-type: none"> <li>• One Mohs Clinical Evaluation Exercises (CEXs) as specified</li> </ul>		
<b>EVIDENCE</b>		
Review of Candidate's Portfolio		
Candidate Feedback Questionnaire		

<b>Standard Three</b>		<b>Equipment, Facilities and Clinical Support</b>
<b>Mohs Surgery Training Positions provide access to the equipment, facilities and clinical support that contribute to enabling candidates to achieve the competencies specified in the curriculum</b>		
<b>3.1</b>	<b>Equipment must be provided to enable Mohs candidates to attain all competencies of the curriculum</b>	
<p>Each training position must have access to the following within their training facility (including satellite sites):</p> <ul style="list-style-type: none"> <li>• Resuscitation equipment</li> <li>• Microscope</li> <li>• Cryostat</li> <li>• Electrosurgical devices.</li> </ul>		
<b>EVIDENCE</b>		
Checklist of equipment available		

<b>Standard Four</b>		<b>Learning and Working Environment</b>
<b>The training facility provides an environment that fosters a commitment to learning and a structure that delivers and monitors safe practices</b>		
<b>4.1</b>	<b>The training facility must demonstrate sufficient case load to enable the Mohs candidate to obtain the breadth and depth of experience defined by the Mohs Surgery Training Program curriculum</b>	
The training facility must demonstrate that in the two years preceding the application, there were at least two Clinical Supervisors (inclusive of Supervisor of Training) with a total Mohs case load of at least 700 at the primary teaching site (including any satellite facilities). A minimum of 90% of these Mohs cases should have occurred on the head, neck, lower leg (including feet), hands, digits or anogenital.		
<b>EVIDENCE</b>		
Practice data and logbooks		
<b>4.2</b>	<b>The training facility must ensure the safety and quality standards of the surgical facilities</b>	
A training facility must be a licensed Day Surgery. These facilities should be accredited to NSQHS Standards: <a href="http://www.safetyandquality.gov.au/our-work/accreditation/nsqhss/safety-and-quality-improvement-guides-and-accreditation-workbooks/">http://www.safetyandquality.gov.au/our-work/accreditation/nsqhss/safety-and-quality-improvement-guides-and-accreditation-workbooks/</a>		
OR		
If the training facility is not a licensed day surgery then the facility must have an independent NSQHS assessment performed at their expense, and this assessment will be considered by the NAcC		
<b>EVIDENCE</b>		
Documentation confirming day surgery licence		
OR		
Report of Gap Analysis team		
<b>4.3</b>	<b>Orientation for new candidates must be provided</b>	
<ul style="list-style-type: none"> <li>• Mohs candidates must undertake orientation to the facility and department practices. It is the responsibility of the facility to provide the candidate with a written orientation pack and to timetable an on-site orientation session prior to the commencement of any clinical activity. Areas to be covered include review of health and safety practices at the facility, IT packages used, meeting with administrative and nursing managers, meeting with Supervisor of Training</li> <li>• Candidates must undertake orientation to the Mohs Surgery Training Program</li> <li>• A copy of the curriculum must be reviewed and signed by the Candidate and the Supervisor of Training prior to the commencement of training.</li> <li>• Educational services and facilities that support the delivery of the training program must be provided. Candidates should have access to: <ul style="list-style-type: none"> <li>○ A medical library with major dermatological texts and journals as listed on the College's reading list, the ability to download journals and view College learning materials online.</li> <li>○ Designated private study area that is isolated from busy clinical areas.</li> <li>○ Tutorial rooms (when required).</li> </ul> </li> </ul>		
<b>EVIDENCE</b>		
Provision of orientation detailed by training facility		
Candidate Feedback Questionnaire		

<b>Standard Four</b>	<b>Learning and Working Environment</b>
<b>The training facility provides an environment that fosters a commitment to learning and a structure that delivers and monitors safe practices</b>	
4.4	<b>An audit and peer review program should be regularly conducted</b>
<p>Each training facility should have a case review system conducted within the department/practice  Candidates should have the opportunity to be involved in this review.</p>	
<p><b>EVIDENCE</b>  Description of audit and peer review program provided</p>	