**GROUP FOUR (CHAIR HENRI MARRES)**

**TRAINING REQUIREMENTS FOR TRAINERS**

**1. Process for recognition as trainer**

**a. Requested qualification and experience**

**Training Programme Director**

The Training Program Director must be a certified specialist for a minimum of 5 years. His/her substantial working contract must be within the training institution. The CV of the Training Program Director should provide evidence of his/her continuing professional development (CPD) in the field of ORL.

The Training Program Director must have full secretarial and administrative support and there must have sufficient protected time for him/her to carry out his/her responsibilities.

**Responsibilities of the Training Programme Director**

To establish a transparent and fair selection and appointment process for trainees.

To arrange a balanced training programme with established rotations ensuring that the trainee will have complete exposure to the aspects of ORL in order to be able to fulfil the criteria in the curriculum.

To ensure that there is dedicated time allocated for training and that the trainers are fulfilling their responsibilities to oversee, support and assess trainers.

To ensure that the individual trainees´ documentation and training portfolios are up to standard.

To advise trainees and ensure that they attend proper and approved courses.

To provide valid documentation as to the satisfactory completion of training.

To oversee the types of operative procedures and clinical activities performed in the department and participating units connected with the training programme.

To provide opportunity for research, audit and other educational valid activities such as attending courses and scientific meetings.

To provide a yearly and final report on each trainee.

**Core competencies for training Programme Director**

The Training Program Director must be a certified specialist for a minimum of 5 years. His/her substantial working contract must be within the training institution/network. The CV of the Trainer Program Director should provide evidence of his/her continuing professional development (CPD) in the field of ORL. Trainers must be certified ORL surgeons with adequate pedagogical competence. The Training Program Director and the trainers must be registered with the relevant national medical authority and possess the necessary administrative, pedagogical, scientific, clinical and surgical skills required to conduct the programme.

**Accreditation of trainers**

Trainers must be certified ORL surgeons with adequate teaching skills. The Training Program Director must be registered with the relevant national medical authority and possess the necessary administrative, pedagogical, scientific, clinical and surgical skills required to conduct the programme.

**Criteria for trainers**

Trainers should be certified ORL surgeons who can demonstrate pedagogical skills and that they are in compliance with the requirements of continuing professional development in their field

Trainers must be recognized by the responsible national authority. Preferably the trainer is a member of the national society.

Trainers should possess the necessary administrative, communicative, pedagogical, scientific and clinical skills as well as commitment to conduct the programme.

Trainers should have received instruction for training e.g. pedagogical course (assessment of needs and teaching objectives and evaluation of trainees, ‘training the trainers’). They should be able to assess needs and advise on teaching objectives.

Trainers should provide evidence of academic activities (clinical and/or basic research, publications in peer reviewed journals and participation in ORL scientific meetings).

Trainers will require secretarial and administrative support.

There should be sufficient number of trainers. The ratio between the number of qualified specialists (teaching faculty) and the number of trainees should enable a close monitoring and provide versatile exposure to different schools of thought.

**Role of trainers**

Trainers must be certified (ORL) surgeons with adequate teaching competence.

To advise trainees and ensure that they attend proper and approved courses.

To provide valid documentation as to the satisfactory completion of training.

To oversee the types of operative procedures and clinical activities performed in the department and participating units connected with the training programme.

To provide opportunity for research, audit and other educational valid activities such as attending courses and scientific meetings.

To provide a yearly and final report on each trainee.

**Responsibilities of trainers**

set realistic aims and objectives for a rotation or training period.

To supervise the day to day work of the trainee in the ward, clinic, the operating theatre and during on-call commitments.

To support and assess the trainees progress at the end of each rotation or training period.

To encourage the trainee to carry out research.

To ensure that there is appropriate balance between service commitment and training.

To ensure that the regular assessments and reports are completed and agreed upon by both the trainer and the trainee (under the supervision of the Training Program Director).

To keep the Training Program Director informed of any problems at an early stage.

To manage with the other trainers under the guidance of the Training Program Director any inadequacies/deficiencies demonstrated by a trainee. The institution/network and if necessary the relevant national authority should become involved if the local conflict between the Training Program Director and the trainee cannot be resolved.

**2. Quality management for trainers**

To assure the quality of the training programs, program directors and trainers will undergo regular controls during the site visit/ external auditing.

They will also on a regular basis ( as defined by the appropriate governing body of each country ) have to “re-apply” to their teaching position : CV update, practice evaluation ( clinical work, surgeries …) , scientific work ( publications …etc ) , work of their colleagues etc

Every five years would be an appropriate timing. Evaluation is also performed by the trainees per questionnaire or any other mean decided by the individual countries.

**TRAINING REQUIREMENTS FOR TRAINING INSTITUTIONS**

**Process for recognition as training centre**

**a. Staff Requirements and clinical activities**

The Programme Director shall assure that the trainee will receive appropriate exposure to the different pathologies (depth and breadth of the specialty).

Appropriate faculty covering the broad spectrum of ORL should be available in “full” at a “fully” accredited department:…As per curriculum.

Faculty can be missing in the “partially” accredited departments; nevertheless the programme of the trainee has to cover all aspects.

An appropriate ratio of trainee/trainer will be maintained in such a way that the trainee will have enough exposure to patient care in all its aspects but also time for scientific work and appropriate rest time.

This is part of the accreditation process and a minimum/maximum number of trainees will be assigned to each department/network.

**b. Requirement as regards instrumentation, equipment and laboratory facilities**

Classic library or computer with internet access to medical library online (journals etc …) will be made available to the trainee.

Appropriate accommodation for scientific work and on-call accommodation facilities will be available.

(From Chapter 6) Training institutions should receive official recognition by the National Boards responsible for the training in Otorhinolaryngology and Cervico-facial surgery. The

European Board will receive a list of training institutions issued by the National

Boards. If this meets the requirements set out by the European Board, they will be

conformed as a European Institution for the training in Otorhinolaryngology and

Cervico-facial surgery.

3.2 Training institutions should be placed within university hospitals or major

general district hospitals with adequate supporting services to provide an optimal

training climate. This includes the presence in the hospital of training programmes in

other specialties. Furthermore, there should be the possibility for direct interdisciplinary

consultation with other specialty services. The institution should possess

a library with bibliographic facilities and access to the international medical and

specialty journals. Occasionally periods of training may be taken in approved monospecialist

clinics.

The training department will have as a minimum the following facilities:

(a) A fully equipped out patient department for consultation with

ORL patients including emergencies. Equipment should be

available for microscopic and endoscopic examinations.

(b) Facilities for audiologic examination including audiometry,

speech audiometry and electro-physiology

(c) Facilities for vestibular examination including electronystagmography

(d) Facilities for phoniatrics, including stroboscopy and photography

and also swallowing assessment

(e) A clinical ward for in-patients and day-care facilities for diagnostic

and surgical procedures.

(f) At least one operating theatre at full time disposal with

specialised equipment for common procedures in ORL training

including an operating microscope, modern endoscopic equipment

and TV-VCR facilities.

(g) Facilities for anatomical dissection with microscopic and/or

endoscopic instrumentation

(h) A conference room for deliberation and tutorial sessions

For the special category of monospecialist institutions, requirements will be

formulated by the European Board. In general these will be recognised for limited

periods of training only.

**Accreditation**

The following decisions must be taken by the national authorities with regards to the accreditation status of the Training Institution and Programme.

I. Full accreditation may be granted if the programme has demonstrated full compliance. The Department/Network will receive a certificate indicating that the Department/Network and the Training Programme fulfills the standards and criteria. The accreditation should be reassessed regularly.

II. Partial accreditation may be granted if the programme has demonstrated compliance for only a partial scope or has training limitations. The Department/Network will receive a certificate indicating that the Department/Network and Training Programme fulfills the standards and criteria for a limited spectrum of accreditation or a limited period. The accreditation should be reassessed regularly. Missing criteria can be reassed and full accreditation granted if the missing criteria are fulfilled.

III. Accreditation may be withdrawn of the programme does not substantially comply with the requirements.

The training institution/network should possess an adequate infrastructure and offer qualitative and quantitative clinical exposure as defined in the scope of the curriculum.

The nationally accredited training programme fulfilling the criteria will obtain approval delivered by the board.

A training programme must be reviewed every 5 years.

The National Authority is responsible for setting up at national level a programme for quality assurance of training and of trainers and training institutions in accordance with national rules and EU legislation as well as considering UEMS recommendations.

**Clinical Governance - Manpower planning - Regular report**

The relevant medical chamber/National Authority is the responsible body for recognition/certification of medical specialities in each member state of the UEMS member states. The majority of these countries now have a Board Examination.

National bodies should be made aware of the existence of the EBEORL exam.

The standards for recognition of national training institutions and education networks are matters for national authorities, in accordance with national rules and EU legislation with the aim of harmonizing the different training programmes of ORL at national level.

Visitation and evaluation of training institutions is an important feedback mechanism for maintaining standards and of quality control.

A training institution/educational network must have national recognition/accreditation, in agreement with national/UEMS standards. In order to be accredited, an educational programme must substantially comply with the special national requirements for residency training. Programmes must demonstrate their compliance with these requirements at the time of the site visit.

**External auditing – site visit**

The site visit will be performed by the national authority and/or medical society or medical chamber in accordance with the national regulations. The site visiting committee may be assisted by representatives from the UEMS. The site visit aims to explore in detail the training programme, the educational and scientific environment by holding discussions with the Training Program Director, the trainers, the trainees and the administration of the institution/network. A report will be prepared by the site visitors and will be part of the final decision regarding the accreditation status of the programme. All information obtained during the interviews with trainers and trainees will remain confidential. The accreditation status as decided by the relevant authority/national society will be reported to the Training Program Director by a formal letter of notification. Together with the site visit report, additional advice and recommendations – if necessary – will be given for the benefit of the Training Programme.

**Transparency of training programmes-Structure for coordination of training**

To establish a transparent and fair selection and appointment process for trainees is the responsibility of the Training Programme Director

To arrange a balanced training programme with established rotations ensuring that the trainee will have complete exposure to the aspects of ORL in order to be able to fulfil the criteria in the curriculum is also the responsibility of the Training Programme Director

**Framework of approval – how are they approved – Process for recognition as a Training Institution/Network**

Training institutions for the speciality ORL are recognised by the National Authority and/or National Board and/or medical chamber/medical society of the member country. Each member country will keep a register of approved institutions.

In order to obtain recognition, the training institution must comply with the national requirements for Residency Training in ORL. The training institution/network must be able to demonstrate its compliance with these requirements.

The Training Program Director must submit a Programme Application form to the National authorities/medical chamber/medical society describing the levels of staffing, space allocation, technical facilities, and in particular the Residency Training Programme