

Accreditation of Training in Anaesthesiology and Intensive Care (ATAIC) Procedures

1. Hospital Visit

11 Application

The Accreditation of Training in Anaesthesiology and Intensive Care (ATAIC) is offered on a voluntary basis to the academic departments of anaesthesia and/or intensive care which apply for teaching accreditation in accordance with European training guidelines. An application is sent by the Head of a Department or Institute to the ESAIC Secretariat. The ATAIC Joint Committee will decide whether the visit is warranted and appropriate. The eligibility criteria include a prior accreditation from a nationally recognised body and the demonstration of a continuous, ongoing and successful operation of the institution in the delivery of education and/or training programmes within the area of Anaesthesiology and Intensive Care Medicine. A questionnaire outlining the structure of the hospital, the composition of the staff and the organisation of teaching and training is then filled in by the applicant and submitted to the ESAIC Secretariat. A separate questionnaire is filled in by trainees and confidentially submitted to the ESAIC Secretariat.

12 Visiting Team

- This comprises three individuals who are appointed by the ATAIC Joint Committee: one from the ESAIC pool of visitors, one from the EBA pool of visitors and one from the country in which the hospital visit will take place. The latter national visitor is appointed by the National Anaesthesia Society of the respective country, who should be approached by the applying hospital. The two ATAIC visitors shall be members of either the ESAIC or the EBA.
- The ESAIC Secretariat will arrange the date of the visit and coordinate all communications. The two ATAIC visitors are responsible for writing the report. The national visitor also serves to promote the ATAIC in their own country and to actively support the process. This includes explanation of the national rules and educational programmes that represent frame and constraints for the institution, and also translation of the interviews during the visit and in the contacts with staff members. If required for the interviews, a professional interpreter will be provided by the Host or the National Society. The national visitor may also need to explain to the local authorities the expectations of the visitors and may help them in organising the agenda of the visit. The national visitor is supposed to participate in the final debriefing meeting in order to avoid any misunderstanding. The two ATAIC visitors are expected to discuss the report with the national visitor in order to avoid errors and to make sure that local specificities are correctly interpreted. It should be noted that the national visitor will receive a copy of the application documents.

13 Site Visit

The visit consists of a detailed presentation of the staff and organisation of the hospital, the department (or the institute) and the structure of training. This forms the basis for a discussion and evaluation of all aspects of the teaching and training process with the staff members involved, to complement and build upon the strengths and to encourage development and change to address areas of weakness. This is followed by a personal and confidential interview with trainees at different levels of training and in the absence of supervising staff. Information obtained is not ascribed to individuals.

1.4 Debriefing

At the end of the visit there should be a debriefing session with a representative group of anaesthetists and other key personnel including managers if possible. All key points to be highlighted in the report must be discussed at this meeting. The visitors should provide constructive feedback; this is a good opportunity to praise any positive findings.

1.5 Report

The two ATAIC visitors should formulate their conclusions, conditions and recommendations in a fully agreed and dated report. There should be two aspects to this recommendation: duration of accreditation and recommendations for reaccreditation. The draft report from the two ATAIC visitors is discussed within the ATAIC Joint Committee and then sent to the visited centre to correct any factual errors. The final report is sent to the ESAIC and EBA Boards and archived in the ESAIC Secretariat. The final report is sent to the visited centre and the national visitor, and it must be available to all parties within six months of the visit.

16 Certificate of Accreditation

- Any department that has submitted an application for certification and has subsequently been visited and approved will receive a certificate of accreditation. The accreditation certificate will state the names and titles of the visitors
- the date, extent and period of validity of the accreditation.

Accreditation may be valid for up to five years depending on the visitors' recommendations and the decision of the ATAIC Joint Committee.

1.7 Costs

Costs incurred by the visit within the country are normally met by the visited institution. International travel and all other costs outside the country will be covered by the fee paid by the centre. Visitors' travel expenses will only be reimbursed at economy class rates. The Host or the National Society will cover the cost of an independent translator should the visitor(s) request it.

Information concerning the fee for accreditation can be found on the ESAIC website.

2. Re-Accreditation of Training

The ATAIC Joint Committee is authorised to reaccredit visited departments as follows. In order to apply for reaccreditation, applying hospitals have to re-submit the documents required for a first accreditation as well as the following two documents:

1. a copy of the final report of the last accreditation visit
2. the Continuous Improvement Form which must include a "point by point" response to the critical issues addressed within the final report of the previous visit.

2.1. Commitment of Centres to the other ESAIC Educational Activities

All hospitals accredited by the ATAIC Joint Committee will automatically be invited to consider hosting the Trainee Exchange Programme, CEEA courses and On-Line Assessment. Additionally, such hospitals will be exempted from the formal application letter should they wish to host the EDAIC Part I examination



**European
Board of
Anaesthesiology**

(approval of the ESAIC Examinations Committee required and based on geographical and other criteria).