



## Multidisciplinary Training Unit (MPU) data sheet - For use by multidisciplinary units seeking accreditation for training in pain medicine

*The accreditation process is governed by by-law 19 and the FPM Accreditation Handbook. Please read these documents prior to completing this form. Queries can be answered at [painmed@anzca.edu.au](mailto:painmed@anzca.edu.au)*

### Section 1 – General & administrative

Name of hospital / training unit:

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Address:

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Unit Phone No.

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Unit Fax No.

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Satellite sites involved in training:

(Name and address of satellite sites)

1.

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2.

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3.

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MPU Unit Director:

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Email address of MPU Unit Director:

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Mobile phone number for MPU Unit Director:

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Supervisor of training:

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Director of Medical Services:

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Chief Executive Officer

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Email address of Chief Executive Officer:

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1. 1 Does your unit meet all the standards for accreditation for training for a Level 1 Multidisciplinary Pain Unit (MPU)? Yes / No  
(Please refer to bylaw 19 and the FPM Accreditation Handbook)

1.2 If not, please specify whether your unit able to provide comprehensive pain medicine training in:

- chronic non-cancer pain Yes/No
- acute pain Yes/No
- cancer pain Yes/No
  - Is the Unit accredited for training by the RACP (Ch PM)? Yes/No

### Declaration

I certify that the information given in this document is correct and may be considered by the Board of the Faculty of Pain Medicine, Australian and New Zealand College of Anaesthetists in respect of this unit's application for accreditation for training in pain medicine.

Unit Director: \_\_\_\_\_ Date: \_\_\_\_\_

Chief Executive Officer: \_\_\_\_\_ Date: \_\_\_\_\_

Please submit the following documents with your completed datasheet

Attachments to be submitted with the datasheet:

- Staff rosters including daily schedules and on-call rosters.
- Formal teaching and tutorial programs.
- Unit continuing medical education programs.
- Unit quality assurance programs.
- Any other information that demonstrate compliance with the FPM accreditation standards.

An electronic trainee experience survey will be distributed to trainees at your unit following submission of the datasheet and prior to the accreditation visit. Survey results are confidential to the Faculty staff, inspection team and Chair (or his/her nominee) TUAC.

**Section 2 –Faculty of Pain Medicine Training**

**2.1** How many FPM trainees do you have in your unit? \_\_\_\_\_

**2.2** Please provide an overview of your trainees?

Trainee name	Training stage (Core training, Practice Development, other)	Supervisor	FTE	Reviewer use Interviewed? (yes/no)

**2.4** Please provide an overview of your staffing (excluding FPM trainees)

**FFPMANZCAs**

Name	site	FTE	Reviewer use Interviewed? (yes/no)

**Other senior medical staffing**

Name	Discipline	site	FTE	Reviewer use <i>Interviewed? (yes/no)</i>

**Nursing and Allied Health Staff**

Name	Discipline	site	FTE	Reviewer use <i>Interviewed? (yes/no)</i>

Section 3– Accreditation Criteria

**Standard 1 – Quality Patient Care**

Accreditation criteria	Requirements	Comment from unit	Reviewer assessment/comment
All staff, with an appointment to the Unit, must be credentialed by their institution for the duties and procedures they undertake.	Required		<ul style="list-style-type: none"> <li>• Substantially complies</li> <li>• Partially complies</li> <li>• Does not comply</li> </ul>
There must be a minimum of eight scheduled clinical medical specialist sessions provided in the Unit(s) and available to the trainee each week. Four sessions per week must be conducted by a Fellow of the FPM.	Required		<ul style="list-style-type: none"> <li>• Substantially complies</li> <li>• Partially complies</li> <li>• Does not comply</li> </ul>
Trainees must have access to a range of medical specialist sessions in related areas. These sessions can be provided external to the pain management unit (e.g. satellite sites) but must be in disciplines relevant to the management of patients with pain.	<p>Regularly scheduled sessions must be demonstrable.</p> <p>The unit must demonstrate how they integrate multiple areas of medical expertise into the trainee’s suite of training.</p>		<ul style="list-style-type: none"> <li>• Substantially complies</li> <li>• Partially complies</li> <li>• Does not comply</li> </ul>
There is a minimum of 2.0 FTE senior medical staff to provide supervision to the trainee. Where there are more than 2 trainees in a unit an appropriate increase of 0.5 FTE specialist medical staff must be available to provide supervision.			<ul style="list-style-type: none"> <li>• Substantially complies</li> <li>• Partially complies</li> <li>• Does not comply</li> </ul>
<p>Nursing and allied health input to the multidisciplinary pain management unit must consist of a minimum of 3 FTE and is limited to:</p> <p>Nursing Clinical Psychology Physical Therapy Occupational Therapy Exercise physiology</p>	Names and qualifications of staff holding appointments with the MPU.		<ul style="list-style-type: none"> <li>• Substantially complies</li> <li>• Partially complies</li> <li>• Does not comply</li> </ul>
Other allied health professionals and health promotion areas.			<ul style="list-style-type: none"> <li>• Substantially complies</li> <li>• Partially complies</li> <li>• Does not comply</li> </ul>

Accreditation criteria	Requirements	Comment from unit	Reviewer assessment/comment
Quality improvement and audit. Trainees should be involved in audit and outcome data collection and presentation.	Does the unit participate in audit? Are outcome data collected and benchmarked against other similar units?		<ul style="list-style-type: none"> <li>• Substantially complies</li> <li>• Partially complies</li> <li>• Does not comply</li> </ul>
FPM Fellows engagement with Faculty activities (other than personal CPD)			<ul style="list-style-type: none"> <li>• Substantially complies</li> <li>• Partially complies</li> <li>• Does not comply</li> </ul>
A specialist pain medicine physician or specialist anaesthetist must be available for consultation for patients under the care of the APS 24 hours a day.	Discussion with Lead Clinician for APS		<ul style="list-style-type: none"> <li>• Substantially complies</li> <li>• Partially complies</li> <li>• Does not comply</li> </ul>
For the APS there must be at least one (1) registered nursing session allocated each weekday.	Discussion with Lead Clinician for APS (and Director of Anaesthesia, if relevant)		<ul style="list-style-type: none"> <li>• Substantially complies</li> <li>• Partially complies</li> <li>• Does not comply</li> </ul>

## Standard 2 – Clinical experience

3.1 What is the approximate number of beds available at your hospital? \_\_\_\_\_

Does the Multidisciplinary Pain Management Unit have access to inpatient beds? Yes / No

3.2 On average over the last three years, how many new patients were referred per year with;

Acute pain \_\_\_\_\_

Chronic non-cancer pain \_\_\_\_\_

Cancer-related pain \_\_\_\_\_

On average how many times are patients in each of these groups seen?

Acute pain \_\_\_\_\_

Chronic non-cancer pain \_\_\_\_\_

Cancer-related pain \_\_\_\_\_

Accreditation criteria	Requirements	Comment from unit	Reviewer assessment/comment
<p>There must be sufficient numbers of new patients per annum to provide the trainee with exposure to patients with:</p> <ul style="list-style-type: none"> <li>• Acute perioperative, medical and trauma-related pain</li> <li>• Chronic non-cancer pain</li> <li>• Cancer pain</li> </ul>	<p>Annual numbers of patients seen during the two preceding years for</p> <ul style="list-style-type: none"> <li>• APS,</li> <li>• chronic pain and</li> <li>• cancer pain. (Where appropriate this may also include satellite sites separately)</li> </ul>		<ul style="list-style-type: none"> <li>• Substantially complies</li> <li>• Partially complies</li> <li>• Does not comply</li> </ul>
<p>Units must be able to offer training and experience in the following areas of clinical pain medicine practice.</p>	<ul style="list-style-type: none"> <li>• Triage of referrals</li> <li>• Review of medical records</li> <li>• History-taking and physical examination relevant to pain medicine (including a general physical examination)</li> <li>• Psychological assessment and treatment</li> <li>• Functional assessment of the patient</li> <li>• Risk assessment</li> <li>• Collaboration with referring doctors and other medical specialists.</li> <li>• Diagnosis and formulation of a patient with pain</li> <li>• Development of a management plan</li> <li>• Implementation of medical and pharmacological management.</li> <li>• Referral for, and monitoring of physical therapy.</li> <li>• Participation in multidisciplinary case discussion meetings.</li> <li>• Communication with the patient's general practitioner / referring specialists.</li> <li>• Outcome assessment of individuals</li> </ul>		<ul style="list-style-type: none"> <li>• Substantially complies</li> <li>• Partially complies (please specify)</li> <li>• Does not comply</li> </ul>
<p>Psychiatry and psychology therapy sessions.</p>	<p>Trainees must gain adequate exposure to observe and perform assessment interviews under the supervision of a psychiatrist and/or psychologist. These interviews should include initial and subsequent consultations,</p>		<ul style="list-style-type: none"> <li>• Substantially complies</li> <li>• Partially complies</li> <li>• Does not comply</li> </ul>

Accreditation criteria	Requirements	Comment from unit	Reviewer assessment/comment
	<p>mental state examinations, brief simple interventions and motivational interviewing.</p>		
	<p>Psychiatry:</p> <ul style="list-style-type: none"> <li>• Trainees must gain adequate exposure to the Psychiatric assessment and treatment of Pain patients.</li> </ul> <p>The Psychiatrist must be integrated into the multidisciplinary unit.</p>		<ul style="list-style-type: none"> <li>• Substantially complies</li> <li>• Partially complies</li> <li>• Does not comply</li> </ul>
	<p>Psychology:</p> <ul style="list-style-type: none"> <li>• Trainees must gain adequate exposure to the assessment and psychological management of Pain patients.</li> <li>• The volume of exposure should enable the trainee to perform an adequate psychosocial assessment in the first six months of their CTS.</li> </ul> <p>The Psychologists must be integrated into the multidisciplinary unit.</p>		<ul style="list-style-type: none"> <li>• Substantially complies</li> <li>• Partially complies</li> <li>• Does not comply</li> </ul>
<p>Formal case conferences.</p>	<p>Must be held at least weekly and involve trainees.</p>		<ul style="list-style-type: none"> <li>• Substantially complies</li> <li>• Partially complies</li> <li>• Does not comply</li> </ul>
<p>Procedural sessions.</p>	<p>Procedural sessions are recommended to provide adequate exposure for trainees. Trainees should be involved in the assessment and management of patients undergoing procedures. Trainees are not required to undertake procedures.</p>		<ul style="list-style-type: none"> <li>• Substantially complies</li> <li>• Partially complies</li> <li>• Does not comply</li> </ul>



Accreditation criteria	Requirements	Comment from unit	Reviewer assessment/comment
In-patient rounds.	There must be regular, scheduled attendances to inpatients by the trainee with the consultant anaesthetist or specialist pain medicine physician as part of the acute pain service.		<ul style="list-style-type: none"> <li>• Substantially complies</li> <li>• Partially complies</li> <li>• Does not comply</li> </ul>
	Be able to demonstrate management of complex in-patients.		<ul style="list-style-type: none"> <li>• Substantially complies</li> <li>• Partially complies</li> <li>• Does not comply</li> </ul>
Radiology review.	Regular sessions are desirable.		<ul style="list-style-type: none"> <li>• Substantially complies</li> <li>• Partially complies</li> <li>• Does not comply</li> </ul>
Demonstrate compliance with all FPM by-laws, Professional Documents and ANZCA/Faculty corporate policies.	Compulsory.		<ul style="list-style-type: none"> <li>• Substantially complies</li> <li>• Partially complies</li> <li>• Does not comply</li> </ul>
There must be multidisciplinary patient treatment programs.	These programs must be coordinated by a minimum of 3 members of the multidisciplinary pain unit (MPU)		<ul style="list-style-type: none"> <li>• Substantially complies</li> <li>• Partially complies</li> <li>• Does not comply</li> </ul>

### Standard 3 – Supervision and staffing

Accreditation criteria	Requirements	Comment from unit	Reviewer assessment/comment
Appropriate supervision levels.	Is there consistency between in-hours and out-of-hours supervision? Are there patterns of supervision that allow trainee progression towards independent practice?		<ul style="list-style-type: none"> <li>Substantially complies</li> <li>Partially complies</li> <li>Does not comply</li> </ul>
	Is there a nominated supervisor at the satellite sites (if applicable)?		<ul style="list-style-type: none"> <li>Substantially complies</li> <li>Partially complies</li> <li>Does not comply</li> </ul>
Adequate clinical support time available for SoT to meet with trainees for ITAs and feedback.	Minimum of 1 session per fortnight for up to three trainees; 1 session per week for three or more trainees		<ul style="list-style-type: none"> <li>Substantially complies</li> <li>Partially complies</li> <li>Does not comply</li> </ul>
Sufficient FTE specialist pain medicine physicians available to provide supervision for all trainees.	What is the total FTE of specialist pain medicine physicians employed in the unit? What is the total FTE of other specialist medical staff employed by the unit?		<ul style="list-style-type: none"> <li>Substantially complies</li> <li>Partially complies</li> <li>Does not comply</li> </ul>

### Standard 4 – Supervisory roles and assessment

Accreditation criteria	Requirements	Comment from unit	Reviewer assessment/comment
Appointment of one or more supervisors of training	Has the SoT appointment been ratified by TAEC and, the SoT agreement signed? What was the last date of attendance at a SoT workshop?		<ul style="list-style-type: none"> <li>Substantially complies</li> <li>Partially complies</li> <li>Does not comply</li> </ul>
	Does the SoT believe he/she has adequate time to supervise the trainee?		<ul style="list-style-type: none"> <li>Substantially complies</li> <li>Partially complies</li> <li>Does not comply</li> </ul>
	How much time does the SoT have to complete WBA's? Are other FPM Fellows contributing to supervision and assessment?		<ul style="list-style-type: none"> <li>Substantially complies</li> <li>Partially complies</li> <li>Does not comply</li> </ul>

Accreditation criteria	Requirements	Comment from unit	Reviewer assessment/comment
	Is there access to private space for trainee interviews?		<ul style="list-style-type: none"> <li>Substantially complies</li> <li>Partially complies</li> <li>Does not comply</li> </ul>
	Are there facilities for secure document storage?		<ul style="list-style-type: none"> <li>Substantially complies</li> <li>Partially complies</li> <li>Does not comply</li> </ul>
Orientation	How is orientation to the training program including relevant by-laws provided to trainees?		<ul style="list-style-type: none"> <li>Substantially complies</li> <li>Partially complies</li> <li>Does not comply</li> </ul>
	Is the trainee orientated to the unit (and hospital, if applicable)? Does this orientation include an introductory interview?		<ul style="list-style-type: none"> <li>Substantially complies</li> <li>Partially complies</li> <li>Does not comply</li> </ul>
Performance of WBAs	Number performed per trainee in previous 12 months.		<ul style="list-style-type: none"> <li>Substantially complies</li> <li>Partially complies</li> <li>Does not comply</li> </ul>
Performance and submission of ITAs	Have these been submitted on time?		<ul style="list-style-type: none"> <li>Substantially complies</li> <li>Partially complies</li> <li>Does not comply</li> </ul>

## Standard 5 – Education

Accreditation criteria	Requirements	Comment from unit	Reviewer assessment/comment
There must be regularly scheduled educational sessions for all staff	There should be a minimum of one scheduled session per month involving all staff		<ul style="list-style-type: none"> <li>Substantially complies</li> <li>Partially complies</li> <li>Does not comply</li> </ul>

Accreditation criteria	Requirements	Comment from unit	Reviewer assessment/comment
	Involvement in the education of health professionals in the wider medical and allied health community in pain medicine		<ul style="list-style-type: none"> <li>Substantially complies</li> <li>Partially complies</li> <li>Does not comply</li> </ul>
Provision of education to junior medical staff including registrars, residents, interns and medical students.	Trainees should be involved in the education of their peers and junior medical, nursing and allied health staff		<ul style="list-style-type: none"> <li>Substantially complies</li> <li>Partially complies</li> <li>Does not comply</li> </ul>
The trainee(s) in pain medicine must have access to a formal tutorial program.	It is expected that members of the MPU participate in the educational experiences of trainees		<ul style="list-style-type: none"> <li>Substantially complies</li> <li>Partially complies</li> <li>Does not comply</li> </ul>
Trainees should be provided with leave to attend FPM clinical skills courses.			<ul style="list-style-type: none"> <li>Substantially complies</li> <li>Partially complies</li> <li>Does not comply</li> </ul>
There should be an active research and audit program	Trainees must be encouraged to contribute to scholarly activities including research and audit		<ul style="list-style-type: none"> <li>Substantially complies</li> <li>Partially complies</li> <li>Does not comply</li> </ul>

## Standard 6 – Facilities

Accreditation criteria	Requirements	Comment from unit	Reviewer assessment/comment
The trainee must have access to appropriate office space and technology that interfaces with “ANZCA Networks” and the internet.			<ul style="list-style-type: none"> <li>Substantially complies</li> <li>Partially complies</li> <li>Does not comply</li> </ul>
Suitable office space and facilities for members of the unit.	Ideally this should be co-located		<ul style="list-style-type: none"> <li>Substantially complies</li> <li>Partially complies</li> <li>Does not comply</li> </ul>
A comprehensive (ideally electronic) patient record system.	Documentation of treatment protocols and procedures for patients		<ul style="list-style-type: none"> <li>Substantially complies</li> <li>Partially complies</li> <li>Does not comply</li> </ul>
Appropriate consulting and examination rooms are essential.	These may be part of a communal outpatient department		<ul style="list-style-type: none"> <li>Substantially complies</li> <li>Partially complies</li> </ul>

Accreditation criteria	Requirements	Comment from unit	Reviewer assessment/comment
			<ul style="list-style-type: none"> <li>Does not comply</li> </ul>
Appropriate procedure rooms with adequate equipment and staffed by appropriately qualified nurses, technicians and radiographers as required.	<p>Anaesthesia and resuscitation equipment must comply with ANZCA College Professional Document PS55 <i>Recommendations on Minimum Facilities for Safe Administration of Anaesthesia in Operating Suites and Other Anaesthetising Locations.</i></p> <p>Recovery facilities and procedures must comply with ANZCA College Professional Document PS04 <i>Recommendations for the Post-Anaesthesia Recovery Room.</i></p>		<ul style="list-style-type: none"> <li>Substantially complies</li> <li>Partially complies</li> <li>Does not comply</li> </ul>
Hospital, unit or satellite site accredited by ChPM(RACP) for training in Palliative Care Medicine For how long?			<ul style="list-style-type: none"> <li>Substantially complies</li> <li>Partially complies</li> <li>Does not comply</li> </ul>
Access to private office space that allows for confidential conversations with trainees.			<ul style="list-style-type: none"> <li>Substantially complies</li> <li>Partially complies</li> <li>Does not comply</li> </ul>
Adequate time for the Unit Director to attend to administrative duties.	Specialist medical staff require adequate clinical support time and assistance in order to meet the administrative tasks commensurate with their roles.		<ul style="list-style-type: none"> <li>Substantially complies</li> <li>Partially complies</li> <li>Does not comply</li> </ul>
Adequate administrative assistance to the unit.			<ul style="list-style-type: none"> <li>Substantially complies</li> <li>Partially complies</li> <li>Does not comply</li> </ul>

## Standard 7 – Clinical Governance

Accreditation criteria	Requirements	Comment from unit	Reviewer assessment/comment
There is an organisational statement of patient rights and responsibilities	Required		<ul style="list-style-type: none"> <li>Substantially complies</li> <li>Partially complies</li> <li>Does not comply</li> </ul>
The organisation supports the health and well-being of its staff.	Required		<ul style="list-style-type: none"> <li>Substantially complies</li> <li>Partially complies</li> <li>Does not comply</li> </ul>
The organisation provides for confidential avenues for dispute resolution where conflict exists between the trainee and their supervisor.	Required		<ul style="list-style-type: none"> <li>Substantially complies</li> <li>Partially complies</li> <li>Does not comply</li> </ul>
Compliance with safe work hours is part of trainee's contract.	What are the average, daily rostered hours for the trainee? What are the average, weekly on-call rostered hours for the trainee?		<ul style="list-style-type: none"> <li>Substantially complies</li> <li>Partially complies</li> <li>Does not comply</li> </ul>
Trainees are appointed to training positions on the basis of merit, without evidence of discrimination in accordance with ANZCA/FPM policy.	Required		<ul style="list-style-type: none"> <li>Substantially complies</li> <li>Partially complies</li> <li>Does not comply</li> </ul>
There is a work-place organisational policy on bullying, discrimination and harassment	Required		<ul style="list-style-type: none"> <li>Substantially complies</li> <li>Partially complies</li> <li>Does not comply</li> </ul>
There is compliance with the FPM and College corporate policies relative to training.	Corporate policies include but are not limited to: Academic integrity policy Conflict of interest policy Policy on bullying, discrimination and harassment for Fellows and trainees acting on behalf of the College or undertaking College functions Privacy policy		<ul style="list-style-type: none"> <li>Substantially complies</li> <li>Partially complies</li> <li>Does not comply</li> </ul>
The MPU has a statement demonstrating cultural awareness specifically related to indigenous populations.			<ul style="list-style-type: none"> <li>Substantially complies</li> <li>Partially complies</li> <li>Does not comply</li> </ul>

**Issues Raised at Previous Accreditation Visit (if applicable)**

Please comment briefly in response to each of the recommendations.

Requirements and recommendation (as identified in the last accreditation letter) (if applicable)	Unit's Comments regarding progress towards compliance

**Notes of Interviews by Accreditation Team** (FPM Reviewer Use Only)

<b>Interview with:</b>	<b>Notes:</b>
<b>Unit Director</b>	
<b>Hospital Administration</b> Names and roles:	
<b>Supervisor of Training</b>	
<b>Trainees:</b>	
<b>Senior medical staff:</b>	
<b>Tour of facilities:</b>	
<b>Heads of relevant units:</b> Names and roles:	



**Summary of the final discussion with the unit director.**

*(Document to be signed by TUAC reviewers and Unit Director at the conclusion of the meeting)*

**Date:** \_\_\_\_\_

\_\_\_\_\_  
Unit Director

\_\_\_\_\_  
Reviewer

\_\_\_\_\_  
Reviewer

## Visitors' narrative (FPM use)

*Please include a global statement relating to how the unit performs against each of the accreditation criteria:*

Standard 1 – Quality patient care

Standard 2 – Clinical experience

Standard 3 – Supervision

Standard 4 – Supervisory roles and assessment

Standard 5 – Education and teaching

Standard 6 – Facilities

Standard 7 – Clinical governance

### Visitors' proposed recommendations (FPM use)

Recommendations and requirements need to be written using the *SMART* criteria (specific, measurable, achievable, realistic and time bound)

A requirement relates to an area(s) where the unit isn't substantially comparable with the handbook and by-law.

Requirement / Recommendation	Description of recommendation/requirement
<ul style="list-style-type: none"><li>• Requirement</li><li>• Recommendation</li></ul>	
<ul style="list-style-type: none"><li>• Requirement</li><li>• Recommendation</li></ul>	
<ul style="list-style-type: none"><li>• Requirement</li><li>• Recommendation</li></ul>	
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<ul style="list-style-type: none"><li>• Requirement</li><li>• Recommendation</li></ul>	
<ul style="list-style-type: none"><li>• Requirement</li><li>• Recommendation</li></ul>	

**Recommended accreditation duration (not for discussion with Unit)**

**For a multidisciplinary pain management unit seeking accreditation for the first time:**

- That the unit be provisionally accredited as a level 1/level 2 MPU to provide FPM training for 12 months followed by a further review.
  - *Please circle MPU level: Level 1 / Level 2*
- The unit is not accredited for FPM training

**For a multidisciplinary pain management unit seeking reaccreditation (please check the appropriate box):**

- That the unit be reaccredited as a level 1/level 2 MPU to provide FPM training for a period of up to 3 years followed by a further review.  
(This is likely to be applicable when a number of requirements that need to be addressed are identified)
  - *Please circle MPU level: Level 1 / Level 2*
- That the unit be reaccredited as a level 1/level 2 unit for FPM training for a period of up to 5 years followed by a further review.  
(This is likely to be applicable when there is compliance with all / most areas in the FPM Accreditation Handbook and By-law 19)
  - *Please circle MPU unit level: Level 1 / Level 2*
- That the Board of Faculty withdraw/suspend accreditation for training from the unit.
  - *Please circle recommendation: withdraw/suspend*

*Please provide a written report to justify this recommendation. (The lead reviewer must discuss with the Chair, TUAC, at his / her earliest convenience).*

**If Level 2 is selected, please provide comments re the strengths of this unit for training.**

Faculty Office Use:

Date of site visit:

Reviewers:

Date of TUAC meeting at which reviewer's report was considered:

Duration of accreditation for training recommended by TUAC:

Summary of recommendations to be implemented and time-frame for implementation:

Date of next TUAC review: