

**POSTGRADUATE INSTITUTE OF INDIGENOUS MEDICINE
UNIVERSITY OF COLOMBO
ACCREDITATION OF NEW TRAINING CENTRES**

The PGIIM requires that new training centres should be accredited by a standard process in order to ensure quality of training. The steps to be followed in this accreditation process and the required documentation are laid out in this document.

1. Applications should be made on the relevant Form (Annex 2) which will be available from the SAR of the PGIIM.
2. The application form should be completed with Annex 1 by the specialist in charge of the proposed training centre and submitted to Director/ PGIIM.
3. The same procedure should be followed in the event that the relevant Board of Study/Specialty Board initiates the request for accreditation.
4. The application should be supported by relevant documents indicated in the application form.
5. The Director/ PGIIM will forward the application to the relevant Speciality Board and BOS with observations.
6. The Board of Study/ Speciality Board will check the application and supporting documents and nominate a team of 2-3 members to carry out a site inspection and submit a report to the Speciality Board /Board of Study.
7. The Speciality Board / Board of Study should make its recommendations based on the
 - a. CV of trainer/s (particularly period from the effective date as a specialist).
 - b. Audit of work load in training centre during the preceding year and facilities for trainees.
 - c. Hospital/ institutional profile.
 - d. Job descriptions for Registrars and Senior Registrars.
 - e. Support form Hospital/ Institutional Director.
 - f. Report on site inspection.
8. The recommendation of the Speciality Board / Board of Study should be submitted to the Director/ PGIIM, who will then submitted it to the Board of Management.
9. The Board of Management may approve accreditation pending Senate approval in order to minimize delays.

ANNEX 1. MINIMUM DATA REQUIRED

- 1.** Names of trainer/s and qualifications (should qualify as per Ordinance):
- 2.** Number of female beds:
- Number of patients per week:
- Average bed occupancy rate per month:
- Number of new patients admitted for a day:
- 3.** Number of male beds:
- Number of patients per week:
- Average bed occupancy rate per month:
- Number of new patients admitted for a day:
- 4.** Number of general clinics per week:
- Number of total clinic attendance per clinic:
- 5.** Number and names of special clinics per weeks:
- Number of total clinic attendance per clinic:
- 6.** Average daily attendance of patients in Out-Patient Department:
- 7.** The minimum procedures or surgeries done in the theatre:
- 8.** Diagnostic facilities for investigations, X-Ray – Yes/No
- 9.** A discussion room for clinical discussions in each training centre: Yes/No
- 10.** A mini “Reference Library” in the Training Centre: Yes/No
- 11.** On call/Resident rooms: Yes/No
- 12.** Facility to conduct research in the unit and hospital: Yes/No
- 13.** The number of House officers/Senior House Officers per ward per shift:

14. The number of nurses per ward per shift:

15. The number of Registrars requested from each year:

16. The number of Senior Registrars requested from each year:

Name of the Trainer:

Signature of the Trainer:

Date:

Name of the Hospital / Centre Director:

Signature of the Hospital / Centre Director:

Date:

Please note:

1. *All the Specialists to complete the Annex 1, Minimum Data Required*
2. *Attach relevant annexes if any*
3. *Application to be forwarded through the Director of Officer in charge of the hospital*

ANNEX 2. APPLICATION FOR ACCREDITATION AS A PGIIM TRAINING CENTRE

PART 1

1. Relevant PGIIM Board of Study/ Specialty Board :
2. Name of trainer (applicant) :
3. Name of training centre :
4. Name of hospital/ other health care institution :
5. Address of institution :
6. Contact telephone number :
7. Fax number of institution :
8. Contact e-mail address :

PART 2

Please find attached the following documents that support this application (tick relevant boxes).

1.	CV of trainer/s (including specialty and the period from the effective date as a specialist and consent letters	
2.	Audit of training unit/ centre indicating workload during preceding year, and facilities for trainees (ANNEX 1)	
3.	Hospital profile including bed strength, type of wards, specialty services, and any other facilities for trainees (ANNEX 1)	
4.	Job description for trainees (Registrars and Senior Registrars), including on-call roster, clinics, ward rounds etc.	
5.	Letter from Director of Hospital/ Institution, supporting application for accreditation (ANNEX 1)	

PART 3

I am aware that the PGIIM's accreditation mechanism involves inspection of the site and relevant records by a team from the Board of Study and that their recommendations will need the approval of the PGIIM's Board of Management and the Senate of the University of Colombo.

I undertake to sign an agreement with the PGIIM once approval is obtained to abide by the rules and regulations of the PGIIM with respect to training, examinations, confidentiality and good conduct.

Signature of applicant (trainer) and date

PART 4 (for use by PGIIM)

	Date of approval	Signature of Chairperson
Specialty Board		
Board of Study		
Board of Management		
Senate		