# RCSEd Course Accreditation Application Form

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| Organisation Type |  | Accreditation Type |  |
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| Not for profit |  | Dual with Faculty of Surgical Trainers (FST) |  |
| For profit |  |

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| Convenor Details | | | |
| Name |  | Telephone number |  |
| Address |  | Email address |  |
| Organisation |  |
| Job title |  |
| General Medical Council (GMC) number: |  |
| Previous RCSEd courses |  | | |

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| Course Details | | | |
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| Course title |  | | |
| Upcoming dates |  | | |
| No. of hours (CPD) |  | | |
| Max. no. of participants |  | Faculty/participant ratio |  |

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| Purpose and Outcomes | | | | | | | | | | | |
| What is the course need? |  | | | | | | | | | | |
| What are the course aims? |  | | | | | | | | | | |
| What are the course learning outcomes? |  | | | | | | | | | | |
| Who is the target audience? |  | Med Student |  | | FY1 | |  | | FY2 |  | CT1 |
|  | CT2 |  | | ST3 | |  | | ST4 |  | ST5 |
|  | ST6 |  | | ST7 | |  | | ST8 |  | SpR |
|  | Consultant |  | | Other | | | | | | |
| If other, please specify: | |  | | | | | | | | |
|  | General | | | |  | | Paediatric | | | |
|  | Cardiothoracic | | | |  | | Plastic | | | |
|  | Neuro | | | |  | | Trauma/Ortho | | | |
|  | ENT | | | |  | | Urology | | | |
|  | Oral & Max | | | |  | | Vascular | | | |
|  | Dental | | | |  | | Other | | | |
| If other, please specify: | | |  | | | | | | | |
| What are the pre-requisites? |  | | | | | | | | | | |

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| Structure and Organisation | |
| What teaching and learning methods are used in the course? |  |

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| Assessment |  |
| How are participants assessed against the intended learning outcomes? |  |

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| Participants/Trainees |  |
| What is the participant recruitment process and procedure? |  |

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| Faculty |  |
| What are the names and qualifications of the faculty/tutors for the course? |  |
| How is relevant evaluation data from the course shared with faculty? |  |
| What process is in place for faculty to declare personal or conflict of interest? |  |

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| Learning Environments | |
| What is the course venue and its location? |  |
| What are the venue requirements? |  |
| What resources/ materials and facilities are used at the venue to deliver the requirements of the course? |  |

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| Governance and Administration | |
| How are issues of complaint or concern raised in relation to the course recorded and addressed? |  |
| Who are the sponsors/affiliates of the course? |  |
| What influence does this sponsorship/ affiliation have on course content? |  |
| What are the legal considerations for the course and how these have been managed? |  |
| What is the booking process for course participants? |  |

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| Evaluation | |
| What is the course evaluation process? |  |
| Does the post-course evaluation allow participants to self-assess against the learning outcomes? |  |
| Does the post-course evaluation ask participants if and how the course has affected their future practice? |  |
| How is learner and faculty feedback used for continuous quality improvement of the course? |  |
| What quality assurance and management process are in place for the course? |  |
| What changes, if any, have been made to the course as a result of previous evaluations? |  |

**PLEASE NOTE:** By submitting this application you understand that RCSEd will process your personal data in accordance with the terms of the General Data Protection Regulation (GDPR). We will not share your data with any third party unless there is a statutory requirement for us to do so or unless we require to do so to deliver our services. Such sharing will only be undertaken where the appropriate Data Processing Agreements are in place and for tightly controlled purposes. The College will retain your data for the periods of time described in our privacy statement. Further details may be found on our website at <https://www.rcsed.ac.uk/privacy>

Please tick here to confirm you accept:

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| Please also include the following documentation: |
| * **All assessment forms from previous run of the course (collated or individual)**   This must include:   * + Any relevant assessment criteria and strategy documentation * **Blank assessment form** * **All evaluation forms from previous run of the course (collated or individual)**   This must include:   * + Pre and post course evaluation forms for course participants and faculty involved in the delivery of the course, where applicable * **Blank evaluation form**   This must include:   * + Relevant form for course participants and faculty, where applicable * **Full course programme**   This must include:   * + Details of session times * **Certification used for completion of the course** * **Commercial support approval, terms, conditions and purpose (where applicable)** |