

Accreditation of Training in Anaesthesiology and Intensive Care (ATAIC) COMMITTEE POLICY

1. Introduction

Created in 1989 by the European Academy of Anaesthesiology (EAA), the Hospital Visiting and Accreditation Programme (HVAP) has been in place since January 1996, within the framework of a joint permanent committee of the EAA and the European Board of the UEMS Section of Anaesthesiology (EBA). In 2010, in order to reflect better its activities and aims, the name was changed to Hospital Visiting and Training Accreditation Programme (HVTAP); for the same purpose, the name was changed again in January 2020 into Accreditation of Training in Anaesthesiology and Intensive Care (ATAIC).

The main goal of the ATAIC is to ensure that an academic institution meets the prerequisites of training in anaesthesia and intensive care as set out in the EBA training guidelines. The information obtained from previous visits allows valuable conclusions on the standard of anaesthesia training in Europe to be drawn. Together with the European Diploma in Anaesthesiology and Intensive Care and the Trainee Exchange Programme, the ATAIC serves to improve and harmonise training throughout Europe.

The European visiting programme was instituted to evaluate training programme in terms of facilities, design of education, standard and involvement of faculty, balance between clinical training and didactic teaching and the possibility for research. These visits might thus be to a single hospital or to a group of hospitals, which are then regarded as a training unit with a complete teaching programme; likewise visits might take place in single specialised centres and lead to a partial accreditation of highly specialised training programmes. The accreditation process includes interviews, review of anaesthesia records, logbooks, audits, guidelines and local protocols. Training programmes, which do not meet the set standards, will receive recommendations for changes and an earlier scheduled reevaluation visit. Once accredited and certified these training units might serve as references centres for national visits.

The inspection focuses on structure as well as process. *Structure* addresses resources such as medical staff, facilities, library, technical equipment, access to medical service and opportunities for research and development. *Process* refers to the “educational climate” and to how existing educational resources are used; whether there is a director of studies, whether training programmes are formulated and guidelines applied, how professional guidance is organised, and whether senior doctors take an active interest in the training of their younger colleagues. Good educational resources may not be used to their full potential because of inadequate involvement, and conversely, a positive educational and academic climate may compensate for material deficiencies.

The visitors should be able to answer and comment if the following items or elements are sufficient to fulfil the goals:

- training unit's operation
- faculty's level of expertise
- quality of facilities and the available equipment
- structure of individual teaching plan
- educational climate and learning environment
- theoretical education
- academic climate and opportunities for research and development.

This Accreditation of Training in Anaesthesiology and Intensive Care (ATAIC) programme is ambitious, so it is unrealistic to expect that every academic hospital throughout Europe will be visited. However, those departments of anaesthetics or specialised centres that request to be visited provide an opportunity to demonstrate the value and benefits of having training evaluated and accredited. The aim is

to help training departments meet agreed standards. For countries in which national training programmes linked to hospital visiting and accreditation programmes already exist, the ATAIC would hope to be a complement for harmonising anaesthesia training throughout Europe.

2. Organisation

2.1 Committee

The Committee is a permanent Joint Committee of the European Board of Anaesthesiology (EBA) and the European Society of Anaesthesiology and Intensive Care (ESAIC). The Committee is called ATAIC Joint Committee.

2.2 Committee Composition

The composition of the Committee is jointly determined by the ESAIC and the EBA and reviewed annually. The Committee consists of seven (7) members, three (3) from the ESAIC and three (3) from the EBA. Additionally, and until further notice by the ATAIC Committee Chair, one Trainee representative selected by the ESAIC Trainees Committee will be accepted at the meetings of the ATAIC Committee, but this Trainee representative will have no voting rights. Within the 6 members with voting rights, the Committee chooses a Chairperson, and the choice must be approved by the EBA and ESAIC Boards. Ideally, there should be a rotation between ESAIC and EBA for the position of ATAIC Chair.

The members are appointed for three years, renewable twice for one year for a total of five years. Both yearly renewals are tacit. A member of the ATAIC Committee can become its Chair no later than at the end of their third year. The term of office of the Committee Chair is three years. For continuity of the activities, the Past Chair will remain a member of the Committee for one year after the end of his/her term as Chair. The total aggregated uninterrupted term of office must not exceed seven years (member+ Chair+ Past Chair). Nobody can serve for more than seven consecutive years in the ATAIC Committee.

All terms of office will start on 1 January. Any member of the Committee must resign from the Committee one year after retiring from active work. The term of office of a committee member can be terminated with the approval of the relevant Board (ESAIC or EBA) at any point in time if the contribution is deemed insufficient. The dismissal process is defined in the ESAIC Nominations Committee Policy.

Members of the committee shall be selected from the pool of visitors based on the following criteria (reflected in the ESAIC Nominations Committee policy):

- Previous or current involvement in UEMS/EBA or ESAIC activities
- Previous experience in accreditation and auditing
- Activity as ATAIC visitor
- Experience in teaching Anaesthesia
- Recommendation from National Authorities
- Fit for position.

2.3 Committee Meetings

The Committee shall meet two to three times per year or as required, with maximum one of these meetings taking place physically (which will be during Euroanaesthesia). Between physical meetings, communication will take place by e-mail, web conference, fax or telephone as necessary. The quorum for the Committee is three members, with at least one member from each of the ESAIC and the EBA, respectively.

2.4 Visitors

The EBA visitors are selected among volunteering national delegates. The ESAIC Visitor vacancies will be advertised on the ESAIC website following normal procedures with application and CV with covering letter. The ATAIC Committee will make the selection based on criteria such as national accreditation experience and activities related to quality assurance of training.

2.5 Purpose

The Committee will co-ordinate the Accreditation of Training in Anaesthesiology and Intensive Care programme with the following means and aims:

- select visitors (assessors) from the ESAIC and the EBA
- report the results of a visit to the ESAIC, the EBA and the visited centre
- propose criteria for visiting and assessment guidelines
- record the visits and send copies to the secretariats of the ESAIC and the EBA
- gather information on training quality for setting and maintaining standards of training
- suggest standards for the recognition of training institutions
- facilitate exchange of trainees between European states
- further harmonisation of the level of training within Europe.

It should be noted that each visit will be coordinated by a member of the ATAIC Committee approved by the Chairperson, and a rotation of members will be ensured between visits so as to distribute the work evenly and efficiently between all committee members.

2.6 Annual report

The Chairperson of the ATAIC Joint Committee will submit two annual reports of its activities to the ESAIC & UEMS/EBA Executive Committee/Board. These reports may be included in the general annual report of both organisations. In these reports it may not be possible to link data to individual training centres unless the training centre has given its approval for publication of the visitation report.

2.7 Budget

An appropriate budget must be set annually to support the visiting programme, over and above those costs met by the visiting institution. This should be shared between the organisations involved in the Accreditation of Training in Anaesthesiology and Intensive Care.