Programs Accreditation Standards

Survey Visit Type:	Choose an Item						
TRAINING PROGRAM	DETAILS						
Training Program Name	Diagnostic Radiology	Program Type	alty				
Training Program Duration	4 Year(s)	No. of Junior Years(s)	2 Year(s)	No. of Senior Year(s)	2 Year(s)		
Training Center Name		City		Date			
D. Dedicated Sessions per Full-Time Equivalent Trainer (Consultants and/or Senior Registrar/Senior Specialist) The One Session is defined as: 3-4 Hours Activity							
Reading Training Sessior	Minimum 1 Per Week						
Clinical Session Minimum 2 Per Week							
Number of Picture Archivi	Number of Picture Archiving and Communication System (PACS) Stations Minimum 1 Per Trainer						
	e <mark>ration of Part-Time Trainers as a</mark> ust be always on a Full-Time Contra	•	ner				
- One or More Part-Ti	ime Trainer(s) Should Fulfill the Wo	rkload Sessions of at Least (One Full-Time	e Equivalent Trainer ir	n Order to		
be calculated in the	Training Capacity Formula.						
- Part-Time Trainer Contract should be for Minimum of One-Year to be included in the Training Capacity Calculation, in order to							
maintain the sustain	nability of Training, and the Training	Center is Committed to Ren	new the Cont	ract Annually or Notif	y the		
SCFHS at Least 12 Months ahead of the Admission Gate and Submit a Request to modify the Training Capacity Accordingly.							

- The Part-Time Trainer Contract and Job Description must state the commitment of Part-Time Trainer towards active engagement in Training.

B. Conditions for Consideration Senior Registrar/Senior Specialist as a Full-Time Equivalent Trainer

- Senior Registrar/Senior Specialist must be granted the Credentials and Privileges of Acting Consultant by the Healthcare
 Institution 's Credentialing and Privileging Committee for the Specialty/Sub-Specialty that they are Qualified to act as a Full-Time
 Equivalent Trainer.
- Senior Registrar/Senior Specialist must have the Full Workload Sessions as defined above for the Full-Time Equivalent Trainer.
- Senior Registrar/Senior Specialist must have a separate Patients/Cases Workload from other Full-Time Equivalent Trainers.
- Senior Registrar/Senior Specialist on a Part-Time Contract must fulfill the above Conditions in section P and section B to be considered as a Full-Time Equivalent Trainer in the Training Capacity Calculation.

Training Capacity Ca	Iculation Formula									
Annual Acceptance:	Trainer to Trainee Ratio Number of Full-Time Equivalent Trainers X N / Number of Training Program Year									
	(1:2)	(1: 2) (No. of Trainers X 2/ 4)								
Total Training Capacity:	Annual Acceptance x 4									
Included Trainer in TCF	SCFHS certified all trainers									
	Junior Year(s)		Senior Year(s)							
Level 1 (J or S)	Level 2	(J or S)	Level 3 (J or S)	Level 4 (J or S)						
25%	25	5%	25%	25%						
Accredited Total Training Applicable)	Capacity (If	Trainees	Current Number of Trainees (If Ap	pplicable) Trainees						
Accredited	I Training Capacity in the	Program (Not Ap	plicable if it is a Newly Applying	Training Program)						
Level 1	Lev	vel 2	Level 3	Level 4						
Current Number of	Trainees as identified by	the Survey Team	(Not Applicable if it is a Newly A	Applying Training Program)						



Accreditation Stan	dards' Weighing Definitions:					
ETR0 If Not Fully Met, the New Program Will Not Be Accredited, Accredited Program Will Be Warned, Frozen, or Withdrawn						
ETR1	Mandatory for Full Accreditation					
ETR2 Highly Recommended						
Accreditation Standards' Compliance Scoring Definition:						
Fully Met	When the Compliance to the Accreditation Standard is > 90% (Comment <u>when</u> Required)					
Partially Met	When the Compliance to the Accreditation Standard is > 50-90% (Comment <u>is</u> Required)					
Not Met	When the Compliance to the Accreditation Standard is \leq 50% (Comment <u>is</u> Required)					
Not Applicable	When the Standard does not apply to the Training Center (Comment <u>is</u> Required)					
(N/A)						

I. INSTITUTION

The Institutionally-Accredited Training Center Assumes the ultimate responsibility for Supervision of the Training Program at the Affiliated Training Site(s); and Collaborates with other Training Centers (When Applicable) to share responsibility for Supervision of the Training Program at the Participating Training Site(s).

Standard	Fully	Partially	Not	N/A	Comment
	Met	Met	Met		
I.1. The Training Center is Responsible for Supervision of Trainees					
(Sponsored and Non-Sponsored Rotating Trainees) at All Affiliated					
Training Sites (i.e. Training Sites that are linked to the Governance of the					
same Training Center). (ETR1)					
I.2. The Training Center has a Valid Inter-Institutional Collaboration					
Agreement with other Training Center(s), when Collaborating to execute					
the Training Program at Participating Training Sites (i.e. Training Sites					
that are linked to the Governance of another Training Center). (ETR1)					
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A. ADMINISTRATIVE STRUCTURE

There Must be an Appropriate Administrative Structure for the Training Program.

Standard	Fully Met	Partially Met	Not Met	N/A	Comment
A.1. PROGRAM DIRECTOR					
A.1.1. Classified by the SCFHS (or Equivalent if the Training Center is Outside the KSA) as a Consultant in Diagnostic Radiology (ETRO)					
A.1.2. Program Director (PD) Appointment is Approved as per the SCFHS Regulations (or Meets the SCFHS PD Appointment Requirements for the newly applying Training Program). (ETR1)					
A.1.3. Does not Assume any other Leadership Position (i.e. Head of Section/Department, Medical Director, CEO, or any other Clinical/Administrative Leadership Position). (ETR1)					



			1		
A.1.4. Monitors and Ensures Adequate Supervision of Trainees at All Affiliated and/or Participating Training Sites, reports to the Training Program Committee (TPC: for the Full Training Program) or the Shared Training Program Committee (STPC: for the Shared Training Program), and Remediates through TPC Issues Related to Training. (ETR1)					
A.1.5. Coordinates with Institutional Training Committee (ITC), Training Program Committee (TPC) and the Training Sector's Shared Training Programs Committee (for the Shared Training Program). (ETR1)					
A.1.6. Communicates Effectively with the Designated Institutional Official (DIO). (ETR1)					
A.1.7. Communicates Effectively with the Head of Section/Department, Trainers and Trainees. (ETR1)					
A.1.8. The Training Center provides the Program Director with Adequate Protected Time, Administrative Secretarial Support Coordinator(s), Incentives and Access to a Private Office. (ETR1)					
A.1.9. Fulfills his/her Duties as defined by the SCFHS. (ETR1)					
A.1.10. Submits Documents required by the SCFHS. (ETR1)					
A.1.11. Has an Appointed Deputy. (ETR2)					
A.2. Training Program Committee Structure Must Be Formed at the Training Center's Primary Training Site, and can have Sub-TPCs at the Affiliated Training Sites.					
A.2.1. Chaired by the Program Director. (ETRO)					
A.2.2. Membership includes Trainers' Representation from All Affiliated Training Sites. (ETR1)					
A.2.3. Membership includes at Least One Elected Trainees' Representative with Full and Equal Voting Rights. (ETR1)					



A.2.4. Meets at least Quarterly, Meeting Minutes are made available. (ETR1)				
A.2.5. Communicates Effectively with the ITC, Head of Section/Department, Trainers & Trainees. (ETR1)				
A.3. Responsibilities of the Program Director & Training Program Committee.	·			
A.3.1. Selection of Candidates. (ETR1)				
A.3.2. Ensure the Trainees Receive Adequate General, Program-Specific and Rotation-Specific Orientation Prior to the Start of the Training Activities. (ETR1)				
A.3.3. Ensure and Monitor the Implementation of the Training Program as Stated at the SCFHS Curriculum. (ETR1)				
A.3.4. Discuss, Document Any Major Deviation off the Training Program Curriculum, present it to the ITC, communicate it to the SCFHS through the DIO, and Seek the Necessary Formal Approval Prior to the Implementation. (ETR1)				
A.3.5. Review Trainees' Evaluations, Develop Remediation Plans for Trainees Not Meeting the Required Level of Competence, Follow-up Remediation Plans Implementation, Results and Act accordingly. (ETR1)				
A.3.6. Monitor Progress of Training and Promotion of Trainees. (ETR1)				
A.3.7. Activate Appeal Mechanism When Appeals Are Received. (ETR1)				
A.3.8. Promotes Access of Trainees to Well-Being Program and Stress Counselling. (ETR1)				
A.3.9. Support Trainees through Career Planning & Counselling. (ETR2)				
A.3.10. Ensure Adequate and Regular Review of the Training Program Learning Environment and Educational Resources.				
A.3.10.1. Feedback of Trainees is Obtained and Utilized for Continuous Improvement of the Learning Environment. (ETR1)				

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A.3.10.2. Training Program Learning Environment is Evaluated by the Trainees. (ETR1)					
A.3.10.3. Trainees are Evaluated by the Trainers and TPC. (ETR1)					
A.3.10.4. Trainers Provide Trainees with Timely Feedback During and Prior to the End of each Training Rotation. (ETR1)					
A.3.10.5. Appropriate Trainers-to-Trainees Interaction that is Open, Collegial and Respectful of Trainees' Confidentiality. (ETR1)					
A.3.10.6. Trainers are Evaluated by the Trainees and TPC. (ETR1)					
A.3.10.7. Conduct Clinical Learning Environment Review of Each Major Component of the Training Program. (ETR1)					
A.3.10.8. Conduct Internal Review of the Training Program at least Once during the Program Accreditation Cycle, Determine/Execute Corrective Action Plan Accordingly, address it at the TPC and Present it to the ITC, Follow-up and Document the Progress of Corrective Action Plan until All Issues are Resolved (ETR1)					
A.3.10.9. Form the Internal Review Team to include One Trainer, One Trainee (Both from the same Training Program) and an External Reviewer (Trainer from a Different Specialty inside the Training Center or from the same Specialty of another Training Center). (ETR1)					
A.3.10.10. The Internal Review Team Utilizes the Latest SCFHS Training Program Accreditation Standards, as made Available at the SCFHS Website. (ETR1)					
A.3.10.11. Ensure Coherence and Monitor Compliance of Trainers and Trainees into the SCFHS Institutional Accreditation Standards, Training Program Accreditation Standards. (ETR1)					
A.3.10.12. Ensure Coherence and Monitor Compliance of Trainers and Trainees into the SCFHS Accreditation, Training and Assessment Bylaws, Policies and Procedures. (ETR1)					
A.3.10.13. Monitor the Trainees Participation in Clinical/ Translational/ Basic Sciences Research Activities, Patient Safety and Healthcare Quality Improvement Projects. (ETR2)					
A.3.11. There is a Process that Ensures Safety of Trainees and Patients. (ETR1)		1			



A.3.11.1. Includes Educational Activities and Mentorship related to Patient Safety. (ETR1)				
A.3.11.2. Includes Trainees' Safety Measures (ETR1)				
A.3.11.3. Trainees and Trainers Are Aware of the Process. (ETR1)				
A.4. Administrative Secretarial Support Coordinator(s).				
A.4.1. Adequately Assigned to the Training Program. (ETR1)				
A.4.2. Provided with Adequate Access to Office Space, Computer and Phone. (ETR1)				
A.4.3. Provide Adequate Support to the Program Director and Trainees. (ETR1)				
A.4.4. Adequately Coherent with the Training Program and SCFHS Regulations. (ETR1)				
A.5. Trainers (Training Faculty)	I			
A.5.1. Adequately Supported, Recognized and Valued. (ETR1)				
A.5.2. Certified as Trainers at areas of Clinical Teaching, Formative Assessment and Mentorship (SCFHS-TOT or Equivalent). (ETR2)				
A.5.3. Committed to Perform their Training, Education, Mentorship and Supervisory Responsibilities. (ETR1)				
A.5.4. Facilitate and Supervise Trainees, Research and Scholarly Work. (ETR1)				
A.5.5. Adequately Provided Opportunities for Faculty Development in Postgraduate Clinical Teaching, Formative Assessment and Mentorship. (ETR1)				



T. TRAINING CAPACITY

The Training Program Maintains a Balanced Distribution of Trainees Throughout the Training Years, Does Not Exceed the Allocated Training Capacity As per the SCFHS Training Program Latest Accreditation Decision; Immediately Notifies the SCFHS of Negative Changes at the Educational Resources or Launch of Parallel Non-SCFHS Accredited Training Program that shares the same Educational Resources, and Proactively Submits a Request to Reduce the Training Capacity in order to match the Training Program's Educational Resources with the Training Program's Accreditation Standards and Training Capacity Calculation Formula.

Standard	Fully	Partially	Not	N/A	Comment
Standard	Met	Met	Met	1.97.1	comment
T.1. The Training Program Does Not Exceed the Training Capacity as					
Accredited by the SCFHS. (ETRO)					
T.2. The Training Program's Educational Resources Are Adequate to					
Support the Number of Trainees Appointed to the Training Program at All					
Times (Sponsored by the Training Center, Rotating from other Training					
Centers or Off-Service Trainees from other Training Programs Specialties).					
(ETRO)					
T.3. The TPC Ensure that Trainees of various Training Levels Are Not					
Sequestrated at a certain Training Level or Training Rotation which may					
Negatively Affect the Training Exposure and Competencies Attainment.					
(ETRO)					

G. GOALS AND OBJECTIVES

The Training Center is Committed to Achieve the Goals and Objectives as defined by the SCFHS Training Program latest Curriculum and Accreditation Standards

Standard	Fully Met	Partially Met	Not Met	N/A	Comment
G.1. The Training Program Implements the Rotation-Specific Goals and					
Objectives (Knowledge, Skills and Attitudes) Utilizing the Competency					
Framework Defined the SCFHS Curriculum (CanMEDS or Others). (ETR0)					
G.2. Trainers and Trainees Are Fully Coherent about the SCFHS Training					
Program Curriculum including the Training Rotations' Goals & Objectives.					
(ETRO)					
G.3. Trainers and Trainees Review the Training Rotations' Goals &					
Objectives Prior to the Start of each Training Rotation, and Aim to Achieve					
Them During and Prior to the end of each Training Rotation. (ETR0)					
G.4. Goals and Objectives of each Training Rotation Are Utilized in Clinical					
Teaching, Learning, Formative Assessment and End-of-Rotation Evaluation					
Feedback. (ETRO)					



S. STRUCTURE AND ORGANIZATION OF THE TRAINING PROGRAM DELIVERY

The Training Program's Rotations Structure and Organization, Both Mandatory and Electives, are Designed to Provide the Trainee with the Opportunity to Fulfil the Educational Goals and Objectives in order to Attain the Required Competencies for Professional Practice at the Training Program Specialty/Sub-Specialty Field.

Standard	Fully Met	Partially Met	Not Met	N/A	Comment
S.1. Delivers All Components of the SCFHS Training Program Curriculum. (ETR1)					
S.2. Trainees are Adequately Supervised. (ETR1)					
S.3. Each Trainee is Provided the Opportunity to Assume Senior Role During his/her Training Program Duration. (ETR1)					
S.4. Service Demands Do Not Interfere with Academic Training Program Delivery. (ETR1)					
S.5. Trainees have Equal Opportunity to Meet the Educational Goals and Objectives. (ETR1)					
S.6. Trainees have Opportunity for Elective Rotations Inside and/or Outside the Training Center as approved by the TPC/STPC. (ETR1)					
S.7. Training Learning Environment is Free of Intimidation, Harassment, Abuse and Promotes Trainees' Safety. (ETR1)					
S.8. The Center Should Be Committed to What is Stated in the Duties and Rights of the Trainee's Documents That is Issued by SCFHS. (ETR1)					
S.9. Collaboration with Other Training Centers for Trainees of a Similar Training Program Specialty Who Need to Rotate in the Specialty of the Training Program at the Training Center to Bridge a Certain Gap or to Expand their Clinical Training Exposure. (ETR2)					
S.10. Collaboration with Other Training Programs' Specialties (Inside or Outside the Training Center) for Trainees Who Need to Rotate in the Specialty of the Training Program to Bridge a Certain Gap or Expand their Clinical Training Exposure. (ETR2)					



C. CLINICAL, ACADEMIC AND SCHOLARLY CONTENT OF THE TRAINING PROGRAM

The Clinical, Academic and Scholarly Content for Postgraduate Health Professions Education are Designed to Adequately Attain the Required Competencies for Professional Practice at the Training Program Specialty/Sub-Specialty Field. The Quality of Scholarly Content of the Training Program Will, in Part, be Demonstrated by the Spirit of Enquiry During Clinical Discussions, at the Procedure Room, Clinical Rounds, Bedside, Ambulatory Care, Clinics or Community, Journal Clubs, Seminars, and Conferences. Scholarly Content Implies an in-Depth Understanding of Basic Mechanisms of Normal and Abnormal States of Health and the Application of Up-to-Date Knowledge to Practice. The SCFHS Utilizes CanMEDS Competency Framework for the Most of its Training Programs.

Standard	Fully Met	Partially Met	Not Met	N/A	Comment
C.1. Medical/Health Expert Trainees are exposed to an Effective					
Teaching and Supervised Practice Pertaining to:					
C.1.1. Expertise in Decision-Making Skills. (ETR1)					
C.1.2. Expertise for Assessing the Need of Consultation to Other Health Professionals. (ETR1)					
C.1.3. Building Knowledge, Practice and Expertise through Supervised Clinical Exposure. (ETR1)					
C.1.4. Structured Teaching of Basic and Clinical Sciences Learning through Weekly Academic Half-Days. (ETR1)					
C1.5. Addressing Issues related to Age, Gender, Culture and Ethnicity. (ETR1)					
C.1.6. Active Engagement in Relevant Committees (Morbidity/Mortality, Patient Safety, Quality, Infection Control, Medications Safety, Research, etc.). (FTR2)					
C.2. Communicator Trainees are exposed to an Effective Teaching and Supervised Practice Pertaining to:		1	1	I	
C.2.1. Communication Skills. (ETR1)					
C.2.2. How to Report Adverse Events, Document at Patient Records & Utilize Electronic Medical Record. (ETR1)					
C.2.3. Appropriate Consultation Skills, Referrals, Hand-Over, and/or Transfer of Care. (ETR1)					
C.3. Collaborator Trainees are exposed to an Effective Teaching and Supervised Practice Pertaining to:					



				1	
C.3.1. Collaborative Skills for Inter-Professional and Multi- Disciplinary Healthcare Delivery. (ETR1)					
C.3.2. Skills for Conflicts' Management and Resolution. (ETR1)					
C.4. Leader Trainees are exposed to an Effective Teaching and Supervised Practice Pertaining to:	1	•	1		
C.4.1. Leadership Skills. (ETR1)					
C.4.2. Allocation of Healthcare Resources. (ETR1)					
C.4.3. Management of Health Professional Practice and Career. (ETR1)					
C.4.4. Serving in Administrative and Leadership Function. (ETR1)					
C.4.5. Principles and Practice of Healthcare Quality Assurance and Quality Improvement. (ETR1)					
C.5. Health Advocate Trainees are exposed to an Effective					
Teaching and Supervised Practice Pertaining to:	1				
C.5.1. Realization, Promotion and Response to the Health Needs of the Patient, Community and Population. (ETR1)					
C.6. Scholar Trainees are exposed to an Effective Teaching and Supervised Practice Pertaining to:					
C.6.1. Teaching Skills. (ETR1)					
C.6.2. Feedback to the more Junior Trainees. (ETR1)					
C.6.3. Critical Appraisal of Literature Using Knowledge of Research Methodology, Conduct and Biostatistics. (ETR1)					
C.6.4. Self-Assessment and Self-Directed Learning. (ETR1)				 	
C.6.5. Conduct of a Scholarly Project. (ETR1)					



	Saudi Co	ommissi	01 101	Health Specialties	
C.6.6. Conduct of Research Project. (ETR1)					
C.6.7. Participation in a Patient Safety Project. (ETR1)					
C.6.8. Participation in a Healthcare Quality Assurance or Improvement Project (ETR1)					
C.6.9. Presentation or Participation at National, Regional or International Conferences. (ETR1)					
C.7. Professional Trainees are exposed to an Effective Teaching and Supervised Practice Pertaining to:					
C.7.1. Professional Conduct & Ethical Behaviours.					
C.7.1.1. Deliver High Quality Care with Integrity, Honesty and Compassion. (ETR1)					
C.7.1.2. Intra-Professional, Inter-Professional and Interpersonal Behaviours. (ETR1)					
C.7.1.3. Practice in Ethically Responsible Manner. (ETR1)					
C.7.1.4. Analysis and Reflection to Adverse or Sentinel Events and Strategies to Prevent Re-Occurrence. (ETR1)					
C.7.2. Principles of Bioethics. (ETR1)					
C.7.3. Relevant Legal and Regulatory Framework. (ETR1)					
C.7.4. Personal Health and Well-Being. (ETR1)					



E. EVALUATION OF TRAINEES PERFORMANCE

Standard	Fully Met	Partially Met	Not Met	N/A	Comment
E.1. Clearly Defined Methodology of Evaluation. (ETR1)					
2.2. Evaluation Compatible with the Characteristic Being Assessed.					
E.2.1. Evaluation of Knowledge. (ETR1)					
E.2.2. Evaluation of Clinical Skills by Direct Observation. (ETR1)					
E.2.3. Evaluation of Attitudes and Professionalism. (ETR1)					
E.2.4. Evaluation of Communication Abilities with Patients, Care- Givers and Colleagues. (ETR1)					
E.2.5. Written and Verbal Communications. (ETR1)					
E.2.6. Evaluation of Collaborating Skills. (ETR1)					
E.2.7. Evaluation of Teaching Skills. (ETR1)					
E.2.8. Evaluation of Response to Issues Related to Age, Gender, Culture and Ethnicity. (ETR1)					
3. Evaluation is Provided in an Honest, Helpful, Timely Manner, Documented and Provided in a Feedback Session.		1	•		
E.3.1. Ongoing Informal Feedback During the Training Rotation. (ETR1)					
E.3.2. Face-to-Face Formal Feedback Meetings. (ETR1)					
E.4. Trainees are Informed of Serious Concerns. (ETR1)					
E.5. Evaluations are Reviewed Regularly by the TPC. (ETR1)					
E.6. Provides Final In-Training Evaluation Report (FITER). (ETR1)					

Mechanisms in Place is Required to Ensure the Systematic Collection and Interpretation of Evaluation Data for Each Trainee Enrolled in the Training Program

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R. RESOURCES:					
There must be Adequate Educational Resources including Train Technical Resources, Supporting Facilities and Services Neces Program to Attain the Educational Objectives, as Defined by the	sary to P	rovide the	э Орро	rtunity	for All Trainees in the Training
Standard	Fully Met	Partially Met	Not Met	N/A	Comment
R.1. Sufficient Number of Qualified Full-Time Equivalent				•	
(FTE) Trainers.		1			Γ
R.1.1 ≥ 2 SCFHS Classified Body Imaging Trainer to cover (Body Computed Tomography, Ultrasound, Body Magnetic Resonance Imaging) ETR0					
R.1.2 ≥1 SCFHS certified General Radiology Trainer for (Fluoroscopy (FL) and Plain Films, Emergency Radiology and Plain Films) ETR1					
 R.2. Appropriate Number, Age, Gender, Variety of Patients (or Lab Specimens or Radiology Images, List as Applicable). R.2.1 Picture Archiving and Communication System (PACS) Stations, adequately assigned to trainees 		I	[[I
R.2.1.1 \geq 2 Stations ETR0					
R.2.1.2. Stations: Trainees 1:2 ETR1					
R.2.2 Body Computer Tomography (CT) ETR0		1	1	1	
R.2.2.1 ≥ 2 CT Machines					
R.2.2.2 ≥ 40 body-cases per week					
R.2.3 Body Magnetic Resonance Imaging (MRI) ETR0					
R.2.3.1 ≥ 1 MRI Machines					
R.2.3.2 ≥ 20 body-cases per week					
R.2.4 Ultrasound (US) ETR0		1	1	1	
R.2.4.1 ≥ 2 US Machines					
R.2.4.2 ≥ 125 cases per week					
R.2.5 Neuroradiology ETR1		1	I	1	1
R.2.5.1 ≥1 SCFHS Classified Neuroradiology Trainer					
$R.2.5.2 \ge 25 \text{ MRI}$ neuro-cases per week (reported inhouse)					
R.2.5.3 ≥ 50 CT neuro-cases per week (reported in- house)					



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R.2.6 Musculoskeletal Imaging (MSK) ETR1					
R.2.6.1 ≥1 SCFHS Classified Musculoskeletal Trainer					
$R.2.6.2 \ge 25$ MRI and CT MSK-cases per week					
(reported in-house)					
R.2.6.3 ≥ 150 XRAYS cases per week (reported in-					
house)					
R.2.7 Chest Imaging ETR1	 				
R.2.7.1 ≥1 SCFHS Classified thoracic or cardiothoracic Trainer					
Talle					
R.2.7.2 \geq 30 Computed Tomography chest per week					
(reported in-house)					
R.2.7.3 ≥ 150 XRAYS chest cases per week (reported					
in-house)					
R.2.8 Pediatric Imaging ETR1					
R.2.8.1 ≥1 SCFHS Classified Pediatric Radiology Trainer					
R.2.8.2 ≥ 100 Pediatric X-rays and Fluoroscopy cases for					
pediatric per week (Reported in-house)					
R.2.8.3 ≥ 30 Pediatric US cases for pediatric per week					
(reported in-house)					
R.2.8.4 ≥20 Pediatric CT scan and MRI cases for pediatric					
per week (reported in-house)					
R.2.9 Nuclear Medicine (NM) ETR1					
R.2.9.1 ≥1 SCFHS Classified nuclear medicine					
Trainer					
R.2.9.2 ≥ 30 NM-cases per week (reported in-house)					
R.2.10 Interventional Radiology ETR1					
R.2.10.1 ≥1 SCFHS Classified Interventional Radiology					
Trainer					
R.2.10.2 ≥ 25 Procedure per week (reported in-					
house)					
R.2.10.3 ≥ 1 Interventional Radiology machine					
R.2.11 Breast & Women Imaging ETR1	 				
R.2.11.1 ≥1 SCFHS Classified Breast or Women					
Imaging Trainer					
			1		



	Duuui Cu			i iicaitti ope	
R.2.11.2 \ge 20 cases mammogram per week (reported in-house)					
R.2.11.3 ≥ 20 breast Ultrasound cases per week (reported in-house)					
R.2.11.4 ≥ 1 Mammogram Machine					
R.2.12 Cardiac Imaging ETR1		1			
R.2.12.1 ≥1 SCFHS Classified Cardiac Imaging Trainer					
R.2.12.2 ≥ 15 Cardiac CT and MRI cases per week (reported in-house)					
R.2.13 Obstetric Ultrasound ETR1					
R.2.13.1 ≥1 SCFHS Classified Radiology trainer					
OR Certified obstetrician to report Obstetric US					
R.2.14 Vascular Imaging ETR1		1 T	1		
R.2.14.1 ≥1 SCFHS Classified Intervention radiology or Body Imaging Trainer					
R.2.14.2 ≥ 25 cases CT/MRI angiogram and Doppler vascular US per week					
(Reported in-house)					
R.2.14.3 ≥ 1 Angiogram Machine					
R.2.15 Head and Neck Imaging ETR1			[
R.2.15.1 ≥1 SCFHS Classified Neuroradiology Trainer					
R.2.15.2 ≥ 30 CT and MRI Head & neck cases per week (reported in-house)					
R.2.16 Emergency Radiology and Plain Films ETR1		r T	I		
R.2.16.1 \ge 150 x-rays cases per week (reported inhouse)					
R.2.17 Fluoroscopy (FL) and Plain Films ETR1	I	 	I	I	
R.2.17.1 ≥ 1 Fluoroscopy Machine					
R.2.17.2 ≥ 15 Fluoroscopy cases per week (reported in- house)					
R.2.17.3 ≥ 45 XRAY cases per week					
R.2.18 Positron Emission Tomography (PET) ETR2		1	1	I	





R.2.18.1 ≥1 SCFHS Classified PET Imaging or Molecular Imaging Trainer				
R.2.18.2 \geq 10 case per week (reported in-house)				
R.2.18.3 ≥ 1 Nuclear Medicine equipment				
R.2.18.4 ≥ 1 Positron Emission Tomography / Computed Tomography Scan				
R.2.18.5 ≥ 1 Gamma Camera				
R.2.19. Academic Activities				
R.2.19.1. Journal Club once per month ETR1				
R.2.19.2. Grand round OR Mortality and Morbidity round once per month ETR1				
R.2.19.3. Half-day Activity a week ETR1				
R.2.19.4. daily teaching session 3per week ETR1				
R.3. Clinical Services and Resources Organized to Promote Training and Education		1		
R.3.1. Trainers Excel in Teaching, Training, Formative Assessment and Mentorship Skills. ETR1				
R.3.2. Multi-Disciplinary Based Healthcare Service Promoting for Educational Learning Environment. ETR1				
R.3.3. Integration of Emergency, Acute Care, Ambulatory and Community Experiences (When Applicable). ETR1				
R.3.4. Knowledge, Skills & Attitudes Relating to Age, Gender, Culture, and Ethnicity are considered for Effective Training Program Delivery. ETR1				
R.3.5. Expertise and Facility Required to Identify, Prevent and Handle Patients Adverse Events Are Available. ETR1				
R.4. Adequate Access to Computers/E-Library/On-Line References/ Health Information Management System Are Available 24/7 within Close Proximity. ETR1				
R.5. Physical & Technical Educational and Clinical Resources meet the SCFHS Standards of Accreditation.		1	ı	1
R.5.1. Adequate Space for Daily Work. ETR1				



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R.5.2. Adequate Access to Appropriately Furnished and Equipped on Call Rooms (Males/ Females, Junior/ Senior) for In-Hospital and/or Out-of- Hospital On-Calls. ETR1	
R.5.3. Adequate Access to Dining Facility, Cafeteria and/or Vending Machine (Males/ Females). ETR1	
R.5.4. Adequate Access to Appropriately Furnished and Equipped Lounge and/ or Office Space for the Trainees (Males/ Females). ETR2	
R.5.5. Access to Technical Resources for Patient Healthcare Delivery. ETR1	
R.5.6. Access to Simulation Center or Facility for Direct Observation of Clinical and Procedural Skills. ETR2	
R.5.7. Access to Private Space for Clinical and/or Educational Confidential Discussion. ETR1	
R.6. Supporting Facilities and/or Services.	
R.6.1. Lab Services ETR1	
R.6.2. Surgery/OR Services. ETR1	
R.6.3. Pathology Service ETR1	
R.6.4. Critical care Services. ETR1	



		Trainir	ng Rotations					
 معتمد Accredited ETR Type Duration			Rotations					
 Mandat			tory Rotation					
	ETR0	6 Months	Body Computed Tomography (CT)					
	ETR0	3 Months	Body Magnetic Resonance Imaging (MRI)					
	ETR0	4 Months	Ultrasound					
	ETR1	6 Months	Neuroradiology					
	ETR1	5 Months	Musculoskeletal Imaging					
	ETR1	5 Months	Chest Imaging					
	ETR1	4 Months	Pediatric Imaging					
	ETR1	4 Month	Nuclear Medicine (NM) /Positron Emission Tomography (PET)					
	ETR1	3 Months	Interventional Radiology					
	ETR1	3 Months	Breast & Women Imaging					
	ETR1	2 Months	Fluoroscopy (FL) and Plain Films					
	ETR1	1 Month	Cardiac Imaging					
	ETR1	1 Month	Emergency Radiology and Plain Films					
	ETR1	1 Month	Research					
		Selective Rotati	ons (any one of them)					
	ETR1	4 weeks	Obstetric Ultrasound					
	ETR1	4 weeks	Vascular Imaging					
	ETR1	4 weeks	Head and Neck Imaging					

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List of Affiliated Training Sites (Training Sites that are linked to the Governance of the same Training Center and accredited for the Training Program)					
Training Site		Training Site			
	11	1			
	12	2			
	13	3			
	14	4			
	15	5			
	16	6			
	17	7			
	18	8			
	19	9			
	20	10			

Program to bridge a co	ertain gap or to e	another Training Center that collaborate with the Training xpand the Clinical Training Exposure)				
Training Site		Training Center				



Programs Accreditation Survey Agenda							
Time	Minutes	Agenda	Remarks				
8:00 - 09:00	60	Meeting the Program Director					
9:00 - 10:00	60	Documents Review (Part 1)					
10:00 - 11:00	60	Meeting with the Trainees					
11:00 - 11:40	40	Meeting with the Faculty Trainers					
11:40 - 12:15	35	Meeting with the Head of Department					
12:15 – 13:00	45	Break					
13:00- 13:45	45	Facility Tour	On-Call Rooms, Lounge, Training Classrooms, OPD, Wards, ER, OR, Lab, Radiology, Pharmacy				
13:45 - 15:15	90	Documents Review (Part 2) Surveyors Closed Meeting & Preparing the Survey Report					
15:15 – 16:00	45	Exit De-Brief with the Program Director					

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لاستخدامه في التقييم الذاتي/ المراجعة الداخلية FOR SELF-ASSESSMENT USE/INTERNAL REVIEW

	اسم البرنامج								
	Findings/Issues الملاحظات								
			فاة في كل قسم	عتماد البرامجي المستوف	عدد معايير الا				
								T	
Section R ETR0: () ETR1: () ETR2: ()	Section E ETR0:0 ETR1:14 ETR2:0	Section C ETR0:0 ETR1:32 ETR2:1	Section S ETR0:0 ETR1:8 ETR2:2	Section G ETR0:4 ETR1:0 ETR2:0	Section T ETR0:3 ETR1:0 ETR2:0	Section A ETR0:2 ETR1:44 ETR2:4	Section I ETR0:0 ETR1:2 ETR2:0	Standards' Weight	
ETR0:() ETR1:()	ETR0:0 ETR1:14	ETR0:0 ETR1:32	ETR0:0 ETR1:8	ETR0:4 ETR1:0	ETR0:3 ETR1:0	ETR0:2 ETR1:44	ETR0:0 ETR1:2	Standards' Weight (ETR0)	
ETR0:() ETR1:()	ETR0:0 ETR1:14	ETR0:0 ETR1:32	ETR0:0 ETR1:8	ETR0:4 ETR1:0	ETR0:3 ETR1:0	ETR0:2 ETR1:44	ETR0:0 ETR1:2	Weight	
ETR0:() ETR1:()	ETR0:0 ETR1:14	ETR0:0 ETR1:32	ETR0:0 ETR1:8	ETR0:4 ETR1:0	ETR0:3 ETR1:0	ETR0:2 ETR1:44	ETR0:0 ETR1:2	Weight (ETR0)	
ETR0:() ETR1:()	ETR0:0 ETR1:14	ETR0:0 ETR1:32	ETR0:0 ETR1:8	ETR0:4 ETR1:0 ETR2:0 Program D	ETR0:3 ETR1:0 ETR2:0	ETR0:2 ETR1:44	ETR0:0 ETR1:2	Weight (ETR0) (ETR1)	
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FOR EXECUTIVE ADMINISTRATION OF ACCREDITATION USE ONLY

لاستخدام الإدارة التنفيذية للاعتماد فقط

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ETR0:() ETR1:()			Section S	Section G ETR0:4 ETR1:0 ETR2:0			ETR0:0 ETR1:2 ETR2:0	Standards Weight
ETR0:() ETR1:()	ETR0:0 ETR1:14	ETR0:0 ETR1:32	Section S ETR0:0 ETR1:8	ETR0:4 ETR1:0	ETR0:3 ETR1:0	ETR0:2 ETR1:44	ETR1:2	Standards Weight (ETR0)
	ETR0:0 ETR1:14	ETR0:0 ETR1:32	Section S ETR0:0 ETR1:8	ETR0:4 ETR1:0	ETR0:3 ETR1:0	ETR0:2 ETR1:44	ETR1:2	Weight
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الطاقة الاستيعابية المقترحة في كل مستوى (لا ينطبق على رفض الاعتماد البرامجي أو تجميد الاعتماد البرامجي)										
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