



APPLICATION FOR THE ACCREDITATION OF ADVANCED RESUSCITATION IN CHILDREN TRAINING CENTRE (ARC TC)

- Applicant must be an affiliate member of the National Resuscitation Council (NRC).
- Application Fee: **\$214.00** (inclusive of GST). Payable upon submission of application form.
- Audit Fee: **\$321.00** (inclusive of GST) per audit. Payable upon completion of audit. Training centre which fails the first audit is required to pay for each subsequent audit.
- Please submit cheque payable to 'National Heart Centre of Singapore Pte Ltd' and mail to :
National Resuscitation Council Secretariat
c/o Clinical Affairs Department
National Heart Centre, Annexe Level 2, Mistri Wing
17 Third Hospital Avenue, Singapore 168752
- Validity of accreditation: 2 years

1	Particulars of Organisation / Institution		
	Name: _____		
	Address: _____		
	_____	Postal Code: _____	
	Contact Person : _____	Email: _____	
	Contact No : _____	Facsimile No: _____	
	Affiliate Membership No: _____	Expiry Date: _____	
2	Mission and objectives (Please state)		
	Mission : _____		
	Objective 1: _____		
	Objective 2: _____		
	Objective 3: _____		
3	Fulfillment of the following criteria	Yes	No
3.1	Director		
	<i>Undertakes to oversee the training and ensure consistent standard of the teaching of every ARC courses</i>	○	○
	<i>Undertakes to be responsible to ensure that all instructors update and enhance their knowledge and skills in ARC training</i>	○	○
	If any of the criteria is not met, please specify reasons : _____ _____ _____		
3.2	Chief Instructor (CI)		
	<i>Is an active ARC Instructor for 3 years (Please provide the name of the Chief Instructor & attach his/her current instructor certificate)</i>	○	○

	<i>Is appointed by the Director of the centre and accepted by the training centre</i>	0	0
<p>If any of the criteria is not met, please specify reasons :</p> <hr/> <hr/> <hr/>			
3.3	<p>Instructors</p> <p><i>Have attended an ARC Course successfully (Please attach list of instructors and their current instructor certificates)</i></p> <p><i>Have instructed in at least 2 ARC Provider Courses within 1 year of completing the ARC Course before being eligible for certification as an ARC Instructor</i></p> <p><i>Is the ratio of instructor to participant 1: 8?</i></p>	0 0 0	0 0 0
<p>If any of the criteria is not met, please specify reasons :</p> <hr/> <hr/> <hr/>			
3.4	<p>Training Centre (TC)</p> <p><i>Undertakes to ensure that all instructors update and enhance their knowledge and skills in ARC Training</i></p>	0	0
<p>If any of the criteria is not met, please specify reasons :</p> <hr/> <hr/> <hr/>			
4	<p>Programme and Contents</p> <p><i>Is programme properly spelt out and communicated so that trainees know what to expect and be appropriately prepared for the course? (Please attach programme schedule and list of training dates/times for the next 6 months)</i></p> <p><i>Do the contents of the training adhere to the recommended ARC teaching guidelines? (Please attach training manuals)</i></p> <p><i>Is a theory and practical test administered at the end of the programme? (Please attach theory question and practical sheet)</i></p> <p><i>Are the course materials sent to the participants at least one week prior to the course?</i></p> <p><i>Is the recommended passing rate for the theory and practical tests followed?</i></p>	0 0 0 0 0	0 0 0 0 0

If any of the criteria is not met, please specify reasons :			
5	Facilities and Equipment <i>Are the child and infant manikins and a defibrillator to be used in good working condition?</i> <i>Are the manikins properly maintained and disinfected according to the recommended safety measures?</i>	<input type="radio"/>	<input type="radio"/>
6	Certification <i>Are the trainees given certificates (with date of issue and signed by CI) when they successfully complete the training?</i> <i>Is the certificate valid for 2 years?</i>	<input type="radio"/>	<input type="radio"/>
			(Please specify validity period)
7	Records <i>Does the centre maintain its own registry of certified trainees with the following particulars? (Name, NRIC / Passport No., Organisation, Date of Attendance and Date of expiry of ARC Certificate)</i> <i>Does the centre maintain its own registry of Chief Instructor(s) and Instructors and their participation in training activities?</i>	<input type="radio"/>	<input type="radio"/>
8	Evaluation of ARC Training Programme <i>Is there any evaluation procedure by which the standards of training programme are assessed and maintained? (Please attach a copy of feedback form)</i> <i>Does the centre maintain records of feedback and evaluation information for referral purposes?</i> <i>Are the evaluation tools and methods reviewed regularly and revised according to current developments in this field?</i>	<input type="radio"/>	<input type="radio"/>
9	I, _____ (Name of Training Centre Manager / Head) undertake that the declaration given above is true and accurate to the best of my knowledge. I agree to allow a random external audit by the personnel instructed by NRC. Signature: _____ Date: _____ <i>Note: Please ensure all the necessary information/documents are submitted with the application form. Incomplete application form will result in delay of accreditation.</i>		

<u>For Official Use Only</u>	Receipt No : _____
Date of Issue : _____	Expiry Date : _____
Name/Signature : _____	Date : _____

updated as at 1 January 2009