

PMCT Accreditation Survey

PMCT Accreditation Survey - PGY2+

Name of Health Service:

Date of Visit:	
Team Leader:	
Team Member:	
Team Member:	
Team Member:	

Date approved by PMCT Accreditation Subcommittee	
Expiry Date:	

Accreditation Decision

4 years with exceptions
2 years with exceptions
1 year with exceptions
Not approved

Introduction

Introduction should include background information, e.g. brief hospital overview; changes that have occurred since the last accreditation visit.

Please ensure that you check off each of the boxes that you have completed or provided the supporting information, with this report:

Updated all Terms Descriptions for PGY2+ on O drive PMCT

Provided the summary of Term evaluations (where available)

Health Service Overview

Health Service Name	
Chief Executive Officer	
Executive Director of Medical Services (or equivalent)	

Executive Staff Member responsible for Prevocational Medical Training	
Name	
Position Title	

Director of Clinical Training (or equivalent)	
Name	
Position Title	
Time allocated to Intern/PGY2 activities (FTE)	

Medical Education Advisor	
Name	
Position Title	
Time allocated to Intern/PGY2 activities (FTE)	

Other Relevant Staff	
Name	
Position Title	
Time allocated to Intern/PGY2 activities (FTE)	

Name of Person compiling report	
Contact Phone	
Contact Email	

Summary of Accreditation Ratings

The accreditation team should use the rating scale below to assess the extent that criteria have been met by a facility. Facilities use the same rating scale when submitting documentation prior to the visit to assess their own performance against the Accreditation Standards.

Rating Scale	
Met	There is good evidence to show compliance with the Accreditation Standards. There is evidence that systems and processes to support the PGY2+ education and training are integrated and observed uniformly across the Health Service.
Partially Met	There is evidence of systems and processes in place to support the PGY2+ education and training, but they are either not yet fully integrated or not observed uniformly across the Health Service.
Not Met	There is little evidence of systems and processes in place to support the PGY2+ education and training.

Please note: this document applies PGY2+ and above.

Hospital Self-Assessment			Accreditation Survey Team Use Only		
Not Met	Partially Met	Met	Not Met	Partially Met	Met

1. The context in which PGY2+ training is delivered						
1.1 Governance						
1.1.3 The health services give appropriate priority to medical education and training relative to other responsibilities.						
<p>Notes: Adequate governance includes a Medical Education Committee (or similar Committee) that oversees the training and assessment roles.</p> <p>Membership of the Medical Education Committee would normally comprise the Director of Medical Services, Director of Clinical Training, Medical Education Advisor, senior staff in supervisory roles and junior doctors.</p> <p>Please provide concise dot points in support of the rating, where necessary.</p>						
Survey Team comments						

Hospital Self-Assessment			Accreditation Survey Team Use Only		
Not Met	Partially Met	Met	Not Met	Partially Met	Met

1.2 Program management

1.2.3 The health services have effective organisational and operational structures to manage PGY2+s.						
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Notes: Program management normally includes a delegated manager with executive accountability for meeting prevocational education and training standards (for example, in a hospital, the Director of Medical Services) and a Director of Clinical Training (or equivalent), responsible for the quality of the training and education program, and who works in collaboration with supervisors. Changes in a health service or terms may affect training quality, and require the accreditation authority's assessment. Major changes in circumstances that normally prompt a review include:

- Absence of senior staff with significant roles in training for an extended period with no replacement (for example, a Director Medical Services or Supervisor absent for more than one month).
- Plans for significant redesign or restructure of the health service that impacts on PGY2+ (for example, a significant change to clinical services provided or a ward closure causing change to caseload and case mix for the term).
- Rostering changes that significantly alter access to supervision or exposure to educational opportunities.
- Resource changes that significantly reduce administrative support, facilities or educational programs available.

Please provide concise dot points in support of the rating, where necessary.

Survey Team Comments

2. Organisational purpose

2.1 The purpose of the health services which employ and train PGY2+s includes setting and promoting high standards of medical practice and training.						
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Please provide concise dot points in support of the rating, where necessary.

Survey Team Comments

Hospital Self-Assessment			Accreditation Survey Team Use Only		
Not Met	Partially Met	Met	Not Met	Partially Met	Met

3. The PGY2+s training

3.1 Orientation Program

3.1.3 PGY2+s participate in formal orientation programs, which are designed and evaluated to ensure relevant learning occurs.						
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Please provide concise dot points in support of the rating, where necessary.

Survey Team Comments

5.2 Feedback and performance review

5.2.1 The Health Service provides regular, formal and documented feedback to PGY2+s on their performance within each term.						
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5.2.4 PGY2+s are encouraged to take responsibility for their own performance, and to seek their supervisor's feedback on their performance.						
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5.2.5 The PGY2+s have clear procedures to immediately address any concerns about patient safety related to intern performance.						
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5.2.6 Early identification process for PGY2+s who are not performing to the expected level and provides them with remediation.						
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Please provide concise dot points in support of the rating, where necessary.

Survey Team Comments

Hospital Self-Assessment			Accreditation Survey Team Use Only		
Not Met	Partially Met	Met	Not Met	Partially Met	Met

6. Monitoring and evaluation

6.3	PGY2+s have mechanisms for providing confidential feedback about their training and education experiences and the learning environment in the program overall, and in individual terms.					
6.4	The Health Service acts on feedback and modifies the program as necessary to improve the experience for PGY2+s, supervisors and health care facility managers.					

Please provide concise dot points in support of the rating, where necessary.

Survey Team Comments

7.2 Welfare and support

7.2.1	The Health Service promotes strategies to enable a supportive learning environment.					
7.2.2	The duties, rostering, working hours and supervision of PGY2+s are consistent with delivering high-quality, safe patient care.					
7.2.3	PGY2+s have policies and procedure aimed at identifying, addressing and preventing bullying, harassment and discrimination. These policies and procedures are publicised to the JMOs, their supervisors and other team members.					
7.2.4	The Health Service makes available processes to identify and support PGY2+ who are experiencing personal and professional difficulties that may affect their training, as well as career advice and confidential personal counselling. These services are publicised to PGY2+, their supervisors, and other team members.					
7.2.5	The procedure for accessing appropriate professional development leave is published, fair and practical.					

Please provide concise dot points in support of the rating, where necessary.

Survey Team Comments

Hospital Self-Assessment			Accreditation Survey Team Use Only		
Not Met	Partially Met	Met	Not Met	Partially Met	Met

7.3 PGY2+s participation in governance of their training

7.3.1 PGY2+s are involved in the governance of their supervision and training.						
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Please provide concise dot points in support of the rating, where necessary.

Survey Team Comments

7.5 Resolution of training problems and disputes

7.5.1 The Health Service supports PGY2+ in addressing problems with training supervision and training requirements, and other professional issues. The processes are transparent and timely, and safe and confidential for interns.						
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7.5.2 The Health Service has clear, impartial pathways for timely resolution of training-related disputes between PGY2+s and supervisors, or PGY2+s and the health service.						
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Notes: PGY2+ need clear advice on what they should do in the event of a conflict with their supervisor or any other person involved in their training. Clear statements concerning the supervisory relationship can avert problems for both PGY2+ and supervisors.

Please provide concise dot points in support of the rating, where necessary.

Survey Team Comments

Hospital Self-Assessment			Accreditation Survey Team Use Only		
Not Met	Partially Met	Met	Not Met	Partially Met	Met

8. Delivering the training – supervision and educational resources

8.1 Supervisors

8.1.1 PGY2+s are supervised by qualified medical staff and at a level appropriate to their experience and responsibilities.						
8.1.3 PGY2+s supervisors understand their roles and responsibilities in assisting PGY2+s to meet learning objectives, and demonstrate a commitment to PGY2+s training.						

Please provide concise dot points in support of the rating, where necessary.

Survey Team Comments

8.2 Clinical experience

8.2.2 In identifying terms for training, the Health Service considers the following: <ul style="list-style-type: none"> • complexity and volume of the unit's workload • the PGY2+s workload • the experience PGY2+s can expect to gain • how the PGY2+s will be supervised, and who will supervise them. 						
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Please provide concise dot points in support of the rating, where necessary.

Survey Team Comments

8.3 Facilities

8.3.1 The Health Service provides the educational facilities and infrastructure to deliver PGY2+s training, such as access to the internet, library, journals and other learning facilities, and continuing medical education sessions.						
8.3.2 The Health Service provides a safe physical environment and amenities that support the PGY2+s.						

Please provide concise dot points in support of the rating, where necessary.

Survey Team Comments

Accreditation Status

Accreditation status of each unit to be listed here.

TERM NAME	Length of Accreditation	Accreditation Expiry	Survey Outcome (to be completed by Survey Team)