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| Policy name: | PMCT Accreditation Policy – Document Management and Control |
| Subject: | Process for the tracking changes in all accreditation documents and saving new versions |
| Date of last approval: | 2 June 2020 |
| Date due for review: | June 2024 |
| Policy Revision Number | Version 2.1 |
| Responsible Officer | Chair, Accreditation Committee and Manager, Accreditation Committee |

Policy Statement

This policy outlines the process for accreditation document management, including tracking of changes, version control and naming conventions for all files.

Health services are expected to adhere to the Postgraduate Medical Education Council of Tasmania (PMCT) Accreditation outcomes based on the mandatory requirements of the Intern Registration Standard approved by the Medical Board of Australia (MBA) throughout the period for which they are accredited. All accreditation is subject to the Accreditation Committee being informed by the health service of any change that significantly alters the training capacity of the health service intern training program and/or intern term. PMCT reserves the right to review accreditation status where there is substantial evidence to suggest that accreditation standards are not being met.

This policy is reviewed every four years, or more frequently, if deemed necessary by the Accreditation Committee.

Context

The PMCT accreditation process has been designed to review, monitor and evaluate the provision of intern training by health services. The performance is measured against specific standards and criteria, with the ultimate aim of achieving the following objectives:

1. That Interns achieve a high standard of general clinical education and training; and
2. The best possible environment is provided for the organisation, supervision, education and training of Interns.

The objective of the accreditation process is to ensure that the training health service complies with the following seven standards:

1. Health service culture and support for interns;
2. Orientation;
3. Education and training program;
4. Supervision;
5. Feedback and assessment;
6. Program evaluation; and
7. Facilities and amenities.

Please refer to the *PMCT Accreditation Process Guidelines and Policies* for a detailed description of each standard.

[PMCT Accreditation Guidelines February 2023](#)

Process – Document Updates: Tracking Changes

For document tracking and reviewing purposes by the Accreditation Manager or Accreditation Committee, all changes to any document – major or minor – must be tracked in the document. This allows the reviewer to:

- clearly identify what changes have been made
- confirm if the changes are major or minor (version control)
- ascertain if the changes require the approval of the Accreditation Committee, and
- approve and accept the proposed changes.

It is imperative that any person making changes to a document must turn on “track changes”, and where necessary insert an appropriate comment to provide further information.

Process – Document Version Control

Any document that requires updating and revision on a regular basis needs to include version control as standard practice.

There are two levels of version control – major and minor.

1. Major version control

Major version control is required when major changes are made to any document such as the inclusion or removal of a significant portion of data.

Examples of major changes include replacement of a roster in a Term Description, the name of the term is changed or a section of data is removed such as the removal of six or seven dot points under a heading.

In these instances, the version is increased by one digit. Version 1.0 or Version 3.1 becomes Version 4.0.

All new version numbers must end in a “.0” for major version updates

2. Minor version control

Minor version control is required when minor changes are made to any document, such as updates to phone numbers or key people, corrections for spelling mistakes or other minor changes.

In these instances, the first digit of the version remains the same, but the dot point version is increased by one. Version 1.0 becomes Version 1.1, or Version 5.4 becomes Version 5.5

Process – Document Saving Naming Conventions

Standard conventions need to be applied to the initial name for a saved document, and then for any subsequent updates. The purpose of this naming convention is to clearly identify the most recent document, whether a major or minor change has taken place, whether the document is location specific or statewide, and finally the name of the person making the document changes. The name of the document should also appear in the document footer.

All documents saved must use the following format:

Title/Location/Version Number/Date modified/Initials of modifier

An example of this would be:

Accreditation Policy - Document Management and Control-PMCT-Version 2.0-January 2020-CR

For this example, the following relates to each of the specific naming requirements:

Title: Accreditation Policy – Document Management and Control
Location: PMCT (this is a statewide policy document)
Version: Version 2.0 The previous version was 1.3 but as a major change has been made (the addition of the Document Saving Naming Conventions section) it has moved to Version 2.0
Date: March 2020 (the month and year it has been most recently updated)
Initials: CR (in this example Cate Rejman was the modifier)

Document History

| Date effective | Author/Editor | Approved by | Version | Change Reference Information |
|------------------|----------------------------|------------------------------|---------|------------------------------|
| 5 March 2020 | PMCT Accreditation Manager | PMCT Accreditation Committee | 1.0 | Original document |
| 25 February 2021 | PMCT Accreditation Manager | PMCT Accreditation Committee | 2.1 | Minor changes to links |
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