

Policy name:	PMCT Accreditation Policy – Evaluation and Feedback		
Subject:	Process for evaluation and feedback for all involved in the accreditation process		
Date of last approval:	23 August 2022		
Date due for review:	August 2026		
Policy Revision Number	Version 2.2		
Responsible Officer	onsible Officer Chair, Accreditation Committee and Manager, Accreditation Committee		

## **Policy Statement**

Postgraduate Medical Education Council of Tasmania (PMCT) recognises the requirement for the provision of evaluation and feedback to all those involved in an accreditation visit. The evaluation process is part of the quality control cycle that assists PMCT to monitor their performance and that of their survey teams, and inform future accreditation training programs. PMCT intends the process to be constructive and collegial.

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 <u>PMCT Accreditation Guidelines.</u>

## **Process**

Within one month of a survey visit, the Chair or Secretariat of the Accreditation Committee will email an electronic link to an online survey for the health service and the survey team members to provide feedback on the performance of the members of the survey team, including the team leader, and the accreditation process.

Feedback is received from and provided to:

- The health service staff involved in the accreditation survey visit;
- The survey team members; and
- The survey team leader.

Feedback is requested to be submitted within two weeks of the survey visit. The Manager of the Accreditation Committee or other suitable PMCT Officer compiles a de-identified summary report of this feedback which is considered by the Accreditation Committee at the next meeting.

At the end of each full accreditation visit the Chair or Manager of the Accreditation Committee will ask the survey team leader about the suitability of the survey team members. This will help to determine whether any members of that team should be encouraged to become team leaders, continue as accreditation team members or be counselled about their performance.

Where a health service or survey team member has any significant concerns about the performance of any of the members of the survey team or the accreditation process those concerns should be raised immediately with the Chair or Manager of the Accreditation Committee, or if not appropriate then with the Chair of PMCT.

The PMCT Chair will consult with the Board regarding termination of the appointment of a survey team member/leader found in breach of the PMCT Code of Conduct <u>PMCT Accreditation Code of Conduct</u> and the PMCT Confidentiality and Data Management Policy <u>PMCT Accreditation Policy - Confidentiality and Data Management V2.2</u>

## **Document History**

Date effective	Author/Editor	Approved by	Version	Change Reference Information
13 May 2015	PMCT Accreditation	PMCT Accreditation	1.0	Original document
	Manager	Committee		
23 August 2022	PMCT Accreditation	PMCT Accreditation	2.2	Minor changes to links
	Manager	Committee		