

<b>Policy name:</b>	<b>PMCT Accreditation Policy – Risk Management – Accreditation Process</b>
<b>Subject:</b>	Risk identification, assessment and management
<b>Date of last approval:</b>	14 February 2023
<b>Date due for review:</b>	February 2027
<b>Policy Revision Number</b>	Version 2.2
<b>Responsible Officer</b>	Chair, Accreditation Committee and Manager, Accreditation Committee

## Policy Statement

Postgraduate Medical Education Council of Tasmania (PMCT) has responsibility for ensuring that adequate risk management procedures are in place for the accreditation process. Risk management procedures are designed to ensure the PMCT accreditation body:

- Upholds rigorous, fair and consistent processes for accrediting intern training programs;
- Effectively governs itself and demonstrates competence and professionalism in the performance of its accreditation role;
- Effectively manages its resources associated with accreditation;
- Builds and strengthens stakeholder support and collaborates with other key bodies; and
- Limits the impact of any unavoidable risk.

This policy aims to outline risk identification, assessment and management for PMCT’s intern training accreditation process in Tasmania. PMCT will ensure that adequate resources are available to implement all risk management processes.

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

## Goal of Accreditation Process

PMCT’s accreditation process aims to obtain information about health service performance of intern training against explicit standards and criteria to achieve a high standard of general clinical education and training for interns and the best possible education and training environment for interns.

## Risk Identification and Analysis

Risks associated with the PMCT accreditation process are identified in terms of the likelihood of the risk occurring and the likely impact on the PMCT Accreditation Committee (PMCT AC) and PMCT if it did occur. The risk management template below is used for risk assessment.

		Impact			
		Very High		Medium	Low
Likelihood of Happening	Very high (almost certain)	1: Extreme	2: Very high	3: High	5: Medium
	High	2: Very high	3: High	4: Significant	6: Low
	Medium	3: High	4: Significant	5: Medium	Negligible
	Low	4: Significant	5: Medium	6: Low	Negligible

## Risk Assessment

Identification of risk areas for the Risk Management Plan is underpinned by accreditation principles contained in the *PMCT Accreditation Guidelines* document and the domains identified in the *Quality Framework for the Accreditation Function (The Quality Framework)*. These are:

- Accreditation Processes**  
 The PMCT accreditation body applies the approved national standards for intern training in assessing whether programs will enable interns to progress to general registration in the medical profession. It has rigorous, fair and consistent processes for accrediting intern training programs.
- Governance**  
 The PMCT accreditation body effectively governs itself and demonstrates competence and professionalism in the performance of its accreditation role.
- Operational management**  
 The PMCT accreditation body effectively manages its resources to perform functions associated with accreditation of JMO programs.
- Stakeholder collaboration**  
 The PMCT accreditation body works to build stakeholder support and collaborates with other accreditation bodies and medical education standards bodies.

## Risk Management

For each identified risk the PMCT and PMCT will guard against the risk occurring or manage any adverse impacts if it does occur. Please refer to the *Risk Management Plan* (attached), which outlines the identified risks, rating of risk and management of the risk. PMCT AC members, the PMCT Accreditation Manager, PMCT Medical Education Advisors, Directors of Clinical Training and survey team members are responsible for maintaining an awareness of potential risks, ensuring that procedures are followed and notifying the Chair of the Accreditation Committee and PMCT of any potential or actual risk.

## Monitoring and Reviewing of Risks

The PMCT AC will review the risk management plan annually, in conjunction with the PMCT *Risk Management – Accreditation Process Policy*. An annual report is to be written by the Manager Accreditation in consultation with the Chair of the PMCT AC including: how risks are managed; whether strategies are effective; and any new risks and implications and recommendations will be submitted to the PMCT Board. Where changes are approved, the PMCT Board will determine actions needed to update the risk management plan. The report, for the previous calendar year, is to be reviewed at the first meeting of the PMCT AC (normally February). Once approved by the PMCT AC sends the Risk report to the PMCT Board for their information and consideration. This process normally occurs for both bodies at the first meeting of the new calendar year. The PMCT AC may deem a report is to be sent to the PMCT Board earlier if a significant issue was identified.

### Document History

Date effective	Author/Editor	Approved by	Version	Change Reference Information
11 November 2015	PMCT Accreditation Manager	PMCT Accreditation Committee	1.0	Original document
June 2019	PMCT Accreditation Manager	PMCT Accreditation Committee	2.1	Minor changes to links
14 February 2023	PMCT Accreditation Manager	PMCT Accreditation Committee	2.2	Minor changes

### References:

AHPRA & Australian Forum of Health Professionals. Accreditation under the *Health Practitioner Regulation National Law Act (the National Law): Quality Framework for the Accreditation Function (the Quality Framework)*. July 2013 <http://www.ahpra.gov.au/Publications/Accreditation-publications.aspx>

Management Support Online. No date. *Tool 3.27: Risk Management Plan*.