



Guideline Name	Communication of Accreditation Recommendations to Third Parties
Consultation and Date Approved	Accreditation Subcommittee: 16 July 2012 PMCV Board: 6 August 2012
Responsible Officer	Accreditation Manager

Purpose & Scope

The purpose of this guideline is to outline the role of the Postgraduate Medical Council of Victoria (PMCV) in regards to:

1. communicating with parent health services in relation to the accreditation of health services to which prevocational junior doctors are rotated; and
2. communicating with rotational site health services in relation to accreditation issues at their parent site health service.

Context

The Postgraduate Medical Council of Victoria (PMCV) has delegated functions in relation to intern accreditation from the Medical Board of Australia, based on those in existence at the time of the national accreditation and registration scheme in July 2012. Accordingly, the functions undertaken by PMCV in relation to intern (PGY1) positions include, but are not limited to:

- Provide advice to the Board about the criteria necessary for a position to be an accredited intern position;
- Provide advice to the Board about the requirements that should be fulfilled before the intern is eligible for general registration;
- Receive and consider applications for the approval of new intern positions in hospitals or other institutions for the purposes of intern training and make recommendations to the Board with respect to those applications;
- Periodically review approved positions and make recommendations to the Board on whether or not the positions should continue to be approved and whether any terms or conditions should be attached to the approval.

Further, PMCV also reviews PGY2 positions at the request of the Victorian Department of Health.

Guideline Details

Current Accreditation Reporting Processes

PMCV is responsible for maintaining an accreditation program for health facilities which offer prevocational medical training which includes assessment of the overall program as well as individual positions. This program involves visits to facilities by trained survey teams at least every three years.

After a survey visit, a survey report is prepared by the survey team which includes recommendations for quality improvement of the prevocational medical training provided by the facility and a recommendation in regards to the duration of accreditation to be awarded. This report is reviewed by the PMCV Accreditation Subcommittee which makes a recommendation in regards to the positions to be accredited. This report is then forwarded to the facility for review and response.

The recommendation of the Accreditation Subcommittee is then considered for endorsement by the PMCV Board before being forwarded to the Victorian Board of the Medical Board of Australia for approval. The facility is then formally advised of the accreditation outcome including any conditions which may be applied.



Relationship between parent and rotational site health services

Currently, the involvement of parent health services in survey visits to health services to which they rotate junior medical staff, or rotational site health services, is minimal:

- PMCV does not formally advise parent health services or rotational site health services when a survey visit is planned although a list of current year visits is maintained on the website;
- Representatives from the parent health service or rotational site health services are not invited to survey visits;
- Survey reports of visits including recommendations are not forwarded to associated parent health services or rotational site health services ; and
- The final confirmation of accreditation is not forwarded to parent health services or rotational site health services.

Need for formal communication from PMCV to parent health service and rotational site health services

There is value in considering a more formal communication arrangement between parent health services and rotational site health services for a number of reasons.

Parent health services should be advised of the accreditation status of intern and PGY2 posts at their rotational sites, and also any relevant survey recommendations, for appropriate planning for recruitment and rotational site allocation.

Furthermore, there is reference in the PMCV Accreditation Standards to the relationship between parent health service and rotational site health services and survey teams seek feedback from health services which receive prevocational doctors on rotation on this relationship.

In the standards for health services, Standard 1.9 states: *The overall management (orientation, allocation, education, feedback and appraisal) of the HMO year is coordinated between the parent health service and rotational site health service(s)* and in the standards for general practices there are numerous references to the role of parent health services including:

- The role of the Supervisor of Intern Training or Director of Clinical Training;
- The role of the parent health service in assessment and management of prevocational doctors on rotational site; and
- The role of the parent health service in evaluation of the rotational site.

Rotational site health services should be advised of any overarching issues in regards to accreditation of their parent health service's prevocational medical training program.

Proposed Communication Protocol

1. PMCV will advise parent health services of survey visits scheduled to their rotational site health services.
2. PMCV will advise the parent health service of outcomes of the survey visit to a rotational site health service in terms of:
 - Specific recommendations that involve the parent health service; and
 - Duration and type (core/non-core) of accreditation for rotational sites relevant to the parent health service.
3. PMCV will advise the rotational site health service should there be any major accreditation issues or intention to withdraw accreditation of prevocational medical training at the parent health service.
4. All correspondence sent to the parent health service or rotational site health service will be copied to the surveyed health service.