

Section 1: Executive Summary

1.1 Duration of accreditation for prevocational medical training program

At the meeting of the PMCV Accreditation Committee held on 21 August 2023, it was resolved that the Intern and PGY2 training programs at Grampians Health be reaccredited as follows:

- **Accreditation** will be granted for **12 months** to address conditions under the PMCV Conditions Monitoring Program (CMP). Upon successful completion of the CMP, accreditation will continue for the remainder of the 4-year cycle until the end of 2027 subject to satisfactory reviews on progress as required by PMCV during the period of accreditation.
- A **Mid cycle review** will be conducted in 2025.
- The next **Accreditation survey visit** will occur in 2027.

If new information is presented to PMCV during the accreditation period, PMCV may conduct a further review in collaboration with the health service.

During the accreditation period, Grampians Health is expected to notify the PMCV Accreditation Committee of the following during the accreditation cycle:

- The planned introduction of new intern and PGY2 terms or posts so that they can be assessed against the accreditation standards and approved prior to junior doctors working in the new posts.
- Any changes to prevocational medical training programs or terms including changes in role of the junior doctor, clinical unit structure, changes in supervision arrangements, staffing changes (e.g., DMS, DCT, SIT) or any other changes which may affect the education and training of junior doctors.
- Any changes in the accreditation status with Australian Council on Healthcare Standards (ACHS) for health services or for general practices: Australian General Practice Accreditation Limited (AGPAL) or General Practices in Australia (GPA) accreditation or any other relevant accrediting body.

1.2 Summary of Intern accreditation and PGY2 quality review standards

See Appendix Item 5.2 *Rating scales* for details of the rating scale used in assessment.

Outcomes of the 59 Intern Standards	Health Service Self-assessment	PMCV Survey team assessment
Standards Met with Merit	0	3
Standards Met	56	51
Standards Substantially Met	3	4
Standards Not Met	0	1

Outcomes of the 56 PGY2 Standards	Health Service Self-assessment	PMCV Survey team assessment
Standards Met with Merit	0	3
Standards Met	51	41
Standards Substantially Met	5	9
Standards Not Met	0	3

1.3 Commendations of accreditation

Number	Commendation	Standard/s
1	The work of the Medical Education and Medical Workforce teams are of outstanding standard and highly valued by all Medical Staff despite limited resourcing/FTE for a training program of this size. In particular, the connection and work of the Medical Education Coordinator is exceptional.	1.3
2	The Queen Elizabeth Centre offers a cohesive training program for both interns and PGY2's, harnessing the collegiate atmosphere to offer a coordinated multidisciplinary experience. The junior doctors indicated they felt valued and useful and both junior doctors and senior medical staff noted that it was a great learning style and gave exposure to the way subacute services should ideally be provided.	4.1b / 4.2
3	The support offered to junior medical officers who either are or are on their way to becoming doctors in distress is at an exceptional standard. The ability to offer flexible rostering and observation weeks for those in need is at the forefront of health services across the state and has remained this way even after a rapid expansion.	7.2.4b
4	The Resources Library on the public website has a vast amount of current and well-versed information with variability for both the community and health professionals to understand alike.	7.4.2
5	The fostering of high levels of engagement from supervisors across all sites. It is evident that all supervisors understand and support the education and training of junior doctors and appear to be well supported to do so.	8.1.3
6	Grampians Health is to be commended for satisfying and closing all previous 21 conditions and recommendations from the previous survey visits to Wimmera and Ballarat	N/A

1.4 Conditions of accreditation

Conditions are in breach of the Accreditation Standards, and as a result they will need to be reviewed utilising the PMCV Conditions Monitoring Program (CMP). The CMP provides a forum for PMCV to liaise with a health service on a regular basis to ensure swift rectification of accreditation concerns.

The PMCV CEO and/or the Chair of the Accreditation Committee (or their nominated representative) and the Accreditation Manager will meet with the Health Service CMO/DMS and DCT and formulate an Action Plan to address the conditions specified in the survey report, and in particular to address any outstanding conditions from the previous accreditation survey visit.

Evaluation of the conditions will be assessed as follows:

- Within 30 days of receipt of the final report, the health service must submit a report to PMCV outlining strategies to address the conditions as part of the response to the survey report.
- A meeting to establish a CMP Action Plan will be set up by PMCV, with ongoing progress monitored over a 3-month to 12-month period, as required.

Number	Condition	Standard/s
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1	A program of education tailored to PGY2 medical staff needs to be developed and scheduled at time when attendance is achievable and able to be protected from clinical work as much as possible. Given the rapid growth of medical staff numbers and with further growth imminent, strong consideration should be given to increasing FTE in the Medical Education Unit to support PGY2 medical staff, whilst not allowing the high standard of the Intern program to slip.	1.1.3 / 4.1a
2	Make the reconsideration, review and appeals process documents available publicly online.	1.5.1

1.5 Recommendations for improvement

Recommendations are for the continuing improvement of junior doctor education and training. It is expected that they would be implemented as soon as practicable but no later than at the mid-cycle review.

Number	Recommendation	Standard/s
1	Wimmera needs be integrated better into the health service. Plans to recruit all JMOs directly to Grampians Health and rotate them through Wimmera and Ballarat should be progressed.	1.4.2
2	Strengthen processes for handover between shifts for some units is required. Guidance could be sought from units that do this well, General Medicine was highly rated.	3.1.3c
3	Supervisor evaluation and feedback processes need to be formalised and regular to develop continuous improvement of the training program.	6.2 8.1.4/5.3.1
4	4.1 Review JMO hours, in particular unrostered overtime, at Wimmera Healthcare Group and consider increasing the number of JMO positions. 4.2 Analyse workload and case mix of patients across units at Ballarat Hospital – particularly after-hours and weekends and determine if redistribution of patients is achievable. 4.3 undertake assessment of O&G weekend roster and cover. Ensure HMO rostered to cover is oriented to O&G.	7.2.2
5	Strengthen and formalise the processes of communication between the Doctors In Training Advisory group back to the PGY1/2's. Enabling JMO's to know how to raise issues and providing timely action/feedback on agenda items.	7.4.1