

## Section 1: Executive Summary

### 1.1 Duration of accreditation for prevocational medical training program

At the meeting of the PMCV Accreditation Committee held on 16 October 2023 it was resolved that the Intern and PGY2 training programs at Western 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, Western 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	1
Standards Met	58	47
Standards Substantially Met	1	6
Standards Not Met	0	5

Outcomes of the 56 PGY2 Standards	Health Service Self-assessment	PMCV Survey team assessment
Standards Met with Merit	0	1
Standards Met	54	39
Standards Substantially Met	2	8
Standards Not Met	0	8

### 1.3 Commendations of accreditation

Number	Commendation	Standard/s
1	Western Health to be commended on the expansion of simulation sessions for interns to 8 hours with plans to reach 16 hours annually in 2024, alongside protected teaching days for PGY2's.	1.3.1, 6.1, 7.2.1
2	Creating a culture of approachability that fosters open communication and engagement with senior staff members resulting in junior medical staff continuing their training at the health service.	8.2.1, 8.2.2
3	The expansion of the Medical Workforce and Medical Education Units which has resulted in a more strategic approach to workforce redesign and retention.	7.2.2

### 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.

Outstanding Conditions of Accreditation from 2018 Survey Visit

Number	Condition	Standard/s	Risk Rating
1	<p>Review and improve clinical escalation response processes during MET calls to ensure junior doctors are always provided with senior medical support at all sites. There remain two areas for improvement on this condition:</p> <p>Action is required for night staff at Williamstown Hospital. Specifically, to ensure consistent provision of ALS training and a full orientation for night staff to the clinical escalation processes.</p> <p>Develop a process to ensure interns and PGY2's are not the most senior medical staff member attending MET calls at both Footscray and Sunshine during business hours.</p> <p><b>(See Condition 1, 2018 - revised)</b></p>	7.2.2	Extreme
2	<p>Review the intern posts within the Colorectal unit at Footscray, specifically the provision of clinical supervision in clinics, intern workload and their ability to attend operating theatre sessions.</p> <p><b>(See Condition 3, 2018 - revised)</b></p>	3.1.1, 8.1.1	Extreme
3	<p><b>Term Supervisors:</b></p> <p>An overall improvement to term supervision and intern/PGY2 engagement is required, specifically:</p> <ul style="list-style-type: none"> <li>• Introductions to term and clinical supervisors at the beginning of each rotation coupled with frequent interactions across the term;</li> <li>• Interns should know who their Term Supervisor is prior to any rotations.</li> <li>• Encourage term supervisors to consistently seek feedback from all clinical supervisors prior to completing junior doctor assessments and advise junior doctors how feedback is collated.</li> </ul> <p><b>(See Recommendation 3, 2018)</b></p>	1.2.3, 8.1.3	High
4	<p>Develop a PGY2 general stream education program and actively support PGY2s through a roster review that enables attendance at facility-based education sessions.</p> <p><b>(See Recommendation 4, 2018)</b></p>	4.1a, 4.2	Moderate
6	<p>Review supervision and support for Intern involvement in consent for procedures (particularly within diagnostic and interventional radiology). Interns should not be tasked to attain consent for procedures that they have not witnessed and must be supported to perform informed consent.</p> <p><b>(See Recommendation 7, 2018)</b></p>	8.1.1	High

[New Conditions of Accreditation from 2023 Survey Visit](#)

Number	Condition	Standard/s	Risk Rating
7	<p><b>Policies:</b></p> <ul style="list-style-type: none"> <li>• Establish and implement a junior doctor in difficulty management guideline with relevant committee membership and governance.</li> <li>• Develop and publish a leave management policy.</li> <li>• Formalise a clear impartial pathway for timely resolution of professional and/or training-related disputes.</li> </ul>	5.2.7, 7.2.5, 7.5.2	Moderate
8	Establish a formal PGY2 hospital orientation program which incorporates EMR training. Ensure every commencing PGY2 has the necessary competencies to prescribe safely.	3.1.3a	High
9	Ensure unit-based orientation is provided to all prevocational doctors at the commencement of all terms.	3.1.3b	Moderate
10	Ensure that every prevocational doctor has access to an up-to-date term description and unit based orientation handbooks prior to the commencement of a new rotation.	3.1.3c	Moderate
11	Strengthen the existing intern and PGY2 feedback processes to include a training needs analysis to improve the content, relevance and delivery of formal and informal education and training.	5.1.4	High
12	<p><b>Medical Workforce Unit:</b></p> <p>Review medical workforce unit rostering processes and develop a communication strategy for the following:</p> <p>(a) Rosters:</p> <ul style="list-style-type: none"> <li>▫ Undertake a complete review of the creation, quality control and publishing of all prevocational doctor rosters inclusive of leave management.</li> <li>▫ Develop a process for roster review, deficit management and timely publication of rosters prior to commencement of a rotation.</li> </ul> <p>(b) Overtime:</p> <ul style="list-style-type: none"> <li>▫ Western Health to continue to streamline the process and communication in relation to overtime claims.</li> </ul> <p>(c) Leave relief:</p> <ul style="list-style-type: none"> <li>▫ Create a centralised system to optimise workforce requirements and ensure communication of ‘ad-hoc’ leave relief arrangements.</li> </ul>	7.2.2	High
13	Review the EFT of the Medical Education Unit in line with the supervision and education requirements of the new prevocational national framework and expansion of Western Health.	8.1.2	High



