

Section 1: Executive Summary

1.1 Duration of accreditation for prevocational medical training program

At the meeting of the PMCV Accreditation Committee held on 17 February 2025 it was resolved that the PGY1 and PGY2 training programs at Latrobe Regional 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 2028 subject to satisfactory progress of conditions based on risk rating timeframes, as required by PMCV during the period of accreditation, refer to *PMCV CMP guide for Health Services*
 - A **Mid cycle review** will be conducted in 2026.
 - The next **Accreditation survey visit** will occur in 2028.

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, Latrobe Regional Health is expected to notify the PMCV Accreditation Committee of the following during the accreditation cycle:

- The planned introduction of new PGY1 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 PGY1 accreditation and PGY2 quality review standards

See Appendix Item 5.2 *Rating scales* for details of the rating scale used in assessment. Discrepancies in numbers are related to areas that were not assessed by the survey team due to secondments or standards not relevant to the health service at the time of the visit.

Outcomes of the 72 PGY1 Standards	Health Service Self-assessment	PMCV Survey team assessment
Standards Met with Merit	2	0
Standards Met	70	60
Standards Substantially Met	0	9
Standards Not Met	0	3

Outcomes of the 69 PGY2 Standards	Health Service Self-assessment	PMCV Survey team assessment
Standards Met with Merit	2	0
Standards Met	69	56
Standards Substantially Met	0	9
Standards Not Met	0	4

1.3 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	Risk Rating
1	Latrobe Regional Health to formalise the roles and responsibilities of Term Supervisors ensuring adequate time and resources are allocated to undertake the supervision portion of their roles. for training to be able to undertake the requirements of the NFPMT within their Units.	2.4.1 / 2.4.2 / 3.2.2	High
2	Latrobe Regional Health to engage the supervisors regarding the NFPMT implementation including the required supervisor training, and any feedback and evaluation updates.	3.3.3 / 3.3.4 / 5.1.1	High
3	Latrobe Regional Health to develop and implement a structured, formal and operationally practical Unit orientation process to ensure consistent practice in all units across the health service.	3.4.3	High
4	Latrobe Regional Health to ensure that both PGY1s and PGY2s are supported by their unit teams to attend the health services formal, weekly education sessions	3.4.4	Medium

1.4 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	Latrobe Regional Health to review the effectiveness of the formal processes for the leave requests of Prevocational doctors.	1.4.3
2	A review into the structure and model of care in the General Medicine units is required to ensure that staffing levels are in alignment with the workload.	3.1.3 / 4.2.3
3	A review into the content of the PGY1 education program should be undertaken to limit duplication and ensure topics are pertinent to the PGY1 level.	3.4.1 / 5.1.1
4	Latrobe Regional Health to implement support structures to allow PGY2s to attend formal, hospital wide education sessions.	3.4.2 / 5.1.1
5	Latrobe Regional Health ensure adequate access to a safe and secure space for the storage of personal items whilst on shift.	3.5.2

1.5 Risk Rating

PMCV applies a risk management framework to all conditions. Below demonstrate risk categories and consequences as well as the process to assign a risk rating.

Risk Matrix - Risk is recorded using a heat map (or risk matrix) illustrated below.

Risk Rating						
		Consequence				
		5	4	3	2	1
Likelihood	5	Extreme	Extreme	High	Medium	Medium
	4	Extreme	High	High	Medium	Low
	3	High	High	Medium	Medium	Low
	2	Medium	Medium	Medium	Low	Low
	1	Medium	Low	Low	Low	Low

Likelihood	
5	Almost Certain
4	Likely
3	Possible
2	Unlikely
1	Rare

Consequence	
5	Extreme
4	Major
3	Moderate
2	Low
1	Negligible

Risk Rating	Rectification Timeframe
Extreme	Within 3 months
High	3-6 months
Moderate	6-9 months
Low	9-12 months

For more information regarding risk, please refer to *PMCV CMP Guidelines for Health Services*.