

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 November 2025 it was resolved that the PGY1 and PGY2 training programs at South West Healthcare, 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 2029 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 2027.
- The next **Accreditation survey visit** will occur in 2029.

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, South West Healthcare 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.

Outcomes of the PGY1 Standards	Health Service Self-assessment	PMCV Survey team assessment
Standards Met with Merit	0	1
Standards Met	66	48
Standards Substantially Met	7	11
Standards Not Met	0	13

Outcomes of the PGY2 Standards	Health Service Self-assessment	PMCV Survey team assessment
Standards Met with Merit	0	1
Standards Met	65	48
Standards Substantially Met	7	10
Standards Not Met	0	12

1.3 Commendations of accreditation

Number	Commendation	Standard/s
1	The employing health service's purpose identifies and addresses Aboriginal and Torres Strait Islander communities' place-based needs and their health in collaboration with those communities.	1.1.2

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 Medical Director 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	South West Healthcare to review the current structure and EFT of the Medical Education Unit to be in line with the PMCV Guidelines for Medical Education Units. Recommendation 1/2021	1.3.3/ 1.4.1/ 5.1.1	High
2	South West Healthcare to ensure prevocational doctors are participating members in Governance Committees related to their training and education, ensuring they understand the committees' functions. Recommendation 7/2021	1.3.6	Low
3	South West Healthcare to develop standard operating procedures that ensure PMCV is notified of any new or proposed changes for Prevocational posts via the online application form on the PMCV website prior to commencement of each position. Condition 1/2021	1.4.2	Extreme
4	South West Healthcare to review the General Medicine, Rehabilitation and Surgical units rostering to ensure that rostered hours are meeting the requirements of the prevocational doctor's workload, supervision and a balance between service provision and learning/training outcomes. Recommendation 3/2021	1.4.3/ 3.1.3 / 4.2.3	Extreme
5	The medical education unit to implement an evaluation framework in the following areas: <ul style="list-style-type: none"> • Quality of supervision (3.3.3) • Prevocational training program (5.1.1) 	3.3.3/ 5.1.1/ 5.1.4	Low

	<ul style="list-style-type: none"> • Intern and External sources of data (5.1.4) 		
6	South West Healthcare to develop and implement a PGY2 education program ensuring clinical units are informed of the significance of supporting PGY2 participants' attendance in accordance with the National Framework. Recommendation 2/2021	3.4.2/ 3.4.4	Medium
7	South West Healthcare to implement a structured, formal and consistent unit orientation at the start of each rotation. Recommendation 5/2021	3.4.3	High
8	Outcomes of evaluation activities and committee decisions are communicated to those involved in the prevocational training program, including prevocational doctors and supervisors.	4.3.1/4.3.2/ 5.2.2	Low
9	South West Healthcare to include prevocational supervisors (Senior Medical Staff) in the planning and delivery of the PGY1 education program.	5.1.2	Low

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	South West Healthcare to review and update the concerns process for prevocational doctors.	1.3.7
2	South West Healthcare to strengthen the local educational resources by utilising the Aboriginal Health Liaison Unit to develop and/ or deliver sessions.	2.2.3
3	South West Healthcare to review the allocation of Term Supervisors in General Medicine to ensure consistency and oversight of the PGY1 doctors and clinical supervisors across the term.	2.4.1
4	South West Healthcare to ensure that doctors supervising Prevocational doctors are supported to undertake training related to supervision, assessment, feedback in order to fulfill their training roles and responsibilities.	3.2.5/ 3.3.2/ 3.3.4
5	South West Healthcare to review and establish a clear, streamlined process for the claiming of overtime.	4.2.3
6	South West Healthcare to establish clear and structured processes to act on collected feedback and adjust the program to support ongoing improvement.	5.2.1

1.6 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						
Likelihood	Consequence					
		5	4	3	2	1
	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
Medium	6-9 months
Low	9-12 months

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