



Approved by PAC: 2015

Last Amended: August 2026

Next Review: August 2029

RELATED POLICY

Accreditation Policy 1.1

PURPOSE

This document outlines the process for obtaining and providing feedback following an accreditation survey visit. The feedback process supports continuous quality improvement and informs the ongoing development of accreditation activities.

SCOPE

This process applies to all accreditation survey events conducted by a survey team on behalf of the Prevocational Accreditation Committee (PAC).

Feedback is sought from, and/or provided to, the following participants:

1. Prevocational training provider staff involved in the accreditation survey visit.
2. Surveyors.
3. The Survey Team Leader.
4. The prevocational accreditation staff.

The evaluation process must be completed within one month of the survey visit.

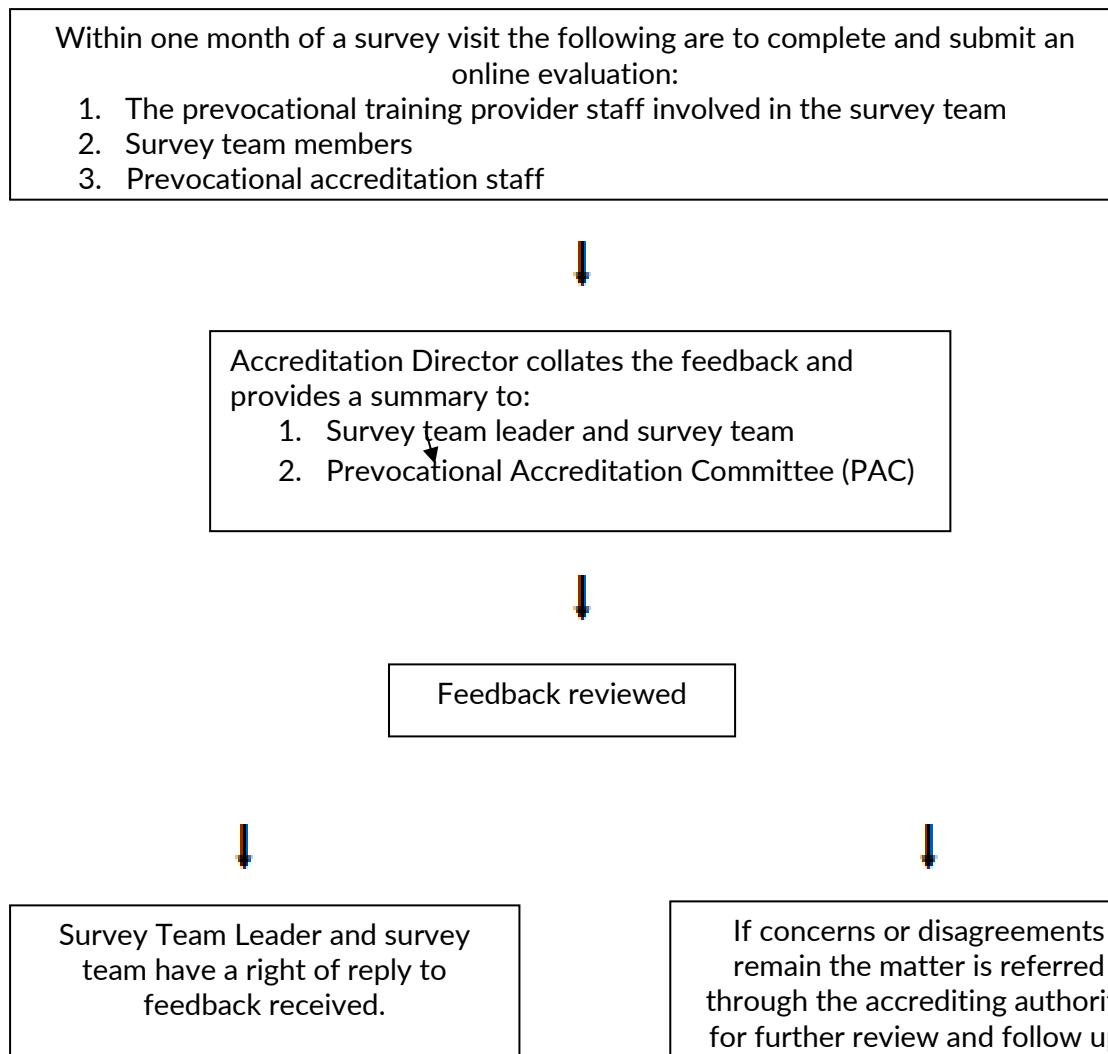
As part of the continuous quality improvement framework feedback is used by the PAC to monitor the effectiveness of accreditation processes and the performance of survey teams and to identify opportunities for improvement. The PAC is committed to ensuring that the feedback process is constructive, collaborative and focused on supporting quality outcomes.

ACCREDITATION EVALUATION PROCESS



PROCESS FLOWCHART

PREVOCATIONAL TRAINING PROVIDER FEEDBACK



ACCREDITATION EVALUATION PROCESS



SURVEYOR FEEDBACK

Survey Team Leader provides each surveyor with constructive written and verbal feedback. Survey team members and the Accreditation Director also provide written feedback to the Survey Team Leader



Feedback Outcome



Feedback accepted by Surveyors and the Survey Team Leader. Documentation is signed and returned to Accreditation Staff for filing. A copy is retained by the surveyor



Surveyors or the Survey Team Leader submit written concerns or comments regarding the feedback. The Accreditation Director determines whether referral to the PAC is required.



Accreditation Director progresses the matter through the Prevocational Accreditation Committee (PAC).



Accreditation Director records and manages the concern and determines whether PAC involvement or mediation is required.

ACCREDITATION EVALUATION PROCESS



PROCESS DESCRIPTION

1. Distribution of Evaluation Surveys

Within **2 weeks of the survey visit** Prevocational Accreditation staff will distribute a link to the online evaluation survey to:

- Prevocational training provider representatives involved in the survey visit (including the Director of Medical Services (DMS), Director of Clinical Training (DCT), Medical Education Officer (MEO) and other relevant staff)
- Surveyors
- Survey Team Leader
- Accreditation staff involved in the survey event

2. Submission of Feedback

Within **one month of the survey visit** the following participants must complete and submit the online evaluation survey:

- Prevocational training provider representatives
- Surveyors
- Survey Team Leader
- Accreditation staff involved in the survey event

3. Collation and Distribution of Feedback

Prevocational Accreditation staff will collate the feedback and provide a summary report to:

- Accreditation Director
- Survey Team Leader
- Prevocational Accreditation Committee (PAC)

4. Right of Reply

The Survey Team member and the Survey Team Leader have the right to respond to any feedback received.

Responses should be submitted in writing to the Accreditation Director.

5. Surveyor Performance Feedback

The survey team leader must complete an individual **Surveyor Feedback Form** for each surveyor and provide feedback in writing.

ACCREDITATION EVALUATION PROCESS



Survey team members and the Accreditation Director will also complete an individual **Surveyor Feedback Form** for the survey team leader and provide feedback in writing.

6. Management of Concerns

Where a concern is raised the Accreditation Director will:

- a. Record the concern and determine whether PAC involvement or mediation is required; or
- b. Refer the matter to the PAC for further review and resolution.

SUPPORTING DOCUMENTATION

1. *Accreditation Policy 1.1*

PERFORMANCE MEASURES/KPI

1. 100% of feedback is conducted according to the process

Process contact officer: Quality Assurance Officer