



NOTIFICATION OF A POTENTIAL BREACH OF ACCREDITATION STATUS PROCESS

PROCESS 2.15

Approved by PAC: June 2020

Last Amended: June 2021

Next Review: June 2024

RELATED POLICY

Accreditation Policy 1.1

PURPOSE

The following documentation outlines the process for managing the notification of a potential breach of a NT health regional health service and/or unit/term that may affect the NT health regional health services accreditation status. NT health regional health services are required to notify in writing the accrediting authority as soon as possible of any potential situations that may cause a breach of their accreditation status. Any stakeholder or individual may report a potential breach of accreditation standards. It is considered a potential breach until confirmed by the Accrediting Authority.

SCOPE

All notifications of any potential breaches are treated as serious until proven to not cause any patients or prevocational doctors to be unsafe.

Notification of a potential breach of accreditation status may affect a NT health regional health services' Accreditation status causing prevocational doctors to be relocated from the NT health regional health service or unit/s breaching the Prevocational Accreditation Standards.

Notification of the potential breach may come from:

1. The NT health regional health service Manager, or
2. An employee of the NT health regional health service, or Individual, consumer, or
3. Any survey team engaged in a survey event, or
4. Recognised body interested in Prevocational Education and Training

Where a whistle-blower is involved, this process will maintain confidentiality at all times according to the Northern Territory Government Policy.

DEFINITIONS

Potential Breach – refers to any unsafe practices by the prevocational doctor, NT health regional health service/training provider which may result in unsafe patient outcomes or causes the prevocational doctor to be unsafe e.g. No DCT, No Medical Education Officer, no supervision, unsafe practices, allocation to unaccredited terms. It is a potential breach until confirmed.



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High Priority Requirement (HPR) – The entire Standard achieves a HPR rating. Not all Standards are worthy of a rating of HPR. Any HPR's received require immediate rectification.

Advanced Completion within 60 days (AC60) – is given where there is deemed to be a high risk to the Intern/prevocational doctor and/or patients and where an acceptable level of performance can be achieved in 60 days. An AC60 rating is considered where an individual Criterion within a Standard is not met. The 60 days can vary where rectification is required in less than 60 days e.g. Orientation will occur in 10 days with no current resources.

Primary Allocation Status – is the Accreditation Status awarded to a NT health regional health service capable of providing all the compulsory terms required for Intern registration.

Offsite Unit – is an accredited term at a site outside of the primary allocation centre but under the governance of that Primary Allocation Centre.

Whistle-blower – is the person/s who informs the accrediting authority, the PAC (or any of its members) and/or prevocational accreditation survey teams of a potential breach to a Training provider/NT health regional health service/Facilities PETP that has the potential to impact on a facility or terms Accreditation Status.

PROCESS DESCRIPTION

1. Accrediting Authority receive notification of a potential breach at a NT health regional health service /training provider. Where necessary provide Form 10 to be completed by person/individual reporting potential breach. If urgent and requiring immediate action, the staff member receiving the verbal notification would complete the initial document.
2. Accrediting Authority to determine actions in a timely manner which may include but not be limited to:
 - a. Timely investigation by Accrediting Authority (Accreditation Manager) to confirm if there has been a breach against the Prevocational Accreditation Standards;
 - b. Contact stakeholder who reported potential breach to inform outcome particularly if no grounds for breach are found;
 - c. If a breach is confirmed identify actions to resolve breach e.g. HPR, AC60, Suspension of Accreditation Status for term/unit;
 - d. Notify PAC Chair of notification and outcome of investigation and actions to resolve;
 - e. Contact the NT health regional health service Executive Director of Medical Services and/or other clinical/non-clinical staff to discuss potential and/or breach circumstances;
 - f. If required issue the NT health regional health service/training provider with a Notice of Suspension (NT health regional health service status, term status);
3. PAC notified at next scheduled meeting;
4. Follow up with NT health regional health service/unit with breach;
5. All actions and documentation electronically recorded.



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SUPPORTING DOCUMENTATION

1. *Accreditation Policy 1.1*
2. *Notification of Change of Circumstance Process 2.10*
3. *Full Survey - Process 2.3*
4. *Appeals - Policy 1.2*
5. *Notice of Suspension of Accreditation Status Form 9*
6. *Notification of Potential Breach of Accreditation Status Form 10*
7. *Rating Scales and Outcome Indicators Guide*

PERFORMANCE MEASURES/KPI

1. 100% of notifications are acted upon according to this Process

Process Contact Officer: Quality Assurance Officer