



RELATED POLICY

Accreditation Policy 1.1

PURPOSE

The following documentation outlines the process for provision of feedback to all those involved in a specific Accreditation Visit.

SCOPE

This process applies to every Full Survey, Self-Assessment Survey, Paper Based Survey and New/Offsite Unit Survey event undertaken by the Prevocational Accreditation Committee Survey Teams. Feedback is received from and provided to:

- a. The NT health regional health service staff involved in the Accreditation Survey Visit
- b. The Surveyors
- c. The Survey Team Leader
- d. Prevocational Accreditation Committee (PAC) through the Prevocational Accreditation Panel (PAP)

The evaluation process is to be completed within one month of the Survey Visit. This Evaluation Process is a part of the continuous quality improvement cycle which assists PAC to monitor their performance and that of their Survey Event Teams, and inform future training programs. The PAC intends that this Evaluation Process be constructive and collegial.

DEFINITIONS

Evaluation – Evaluation is to judge or calculate the quality, importance, amount or value of something. In this case the evaluation is to judge the quality of the survey event processes from a number of contexts including the conduct of survey team members and leader.

NT health regional health service - The NT health regional health service is the institution or clinical setting within which prevocational doctor's work and train. These organisations will usually be hospitals but may be health care centres or supervised practice locations in community settings that have met Accreditation requirements for prevocational doctor training.

Surveyor – is an individual trained in all aspects of the NT Prevocational Accreditation System who acts on behalf of the PAC to visit a NT health regional health service training facility or undertake a desktop survey to assess its compliance with the NT Prevocational Accreditation Standards.

ACCREDITATION EVALUATION PROCESS



Survey Team – is a group of individuals trained in all aspects of the NT Accreditation System who acts on behalf of NT PAC to visit a NT health regional health service/facility or undertake a desktop survey to assess its compliance with the Standards.

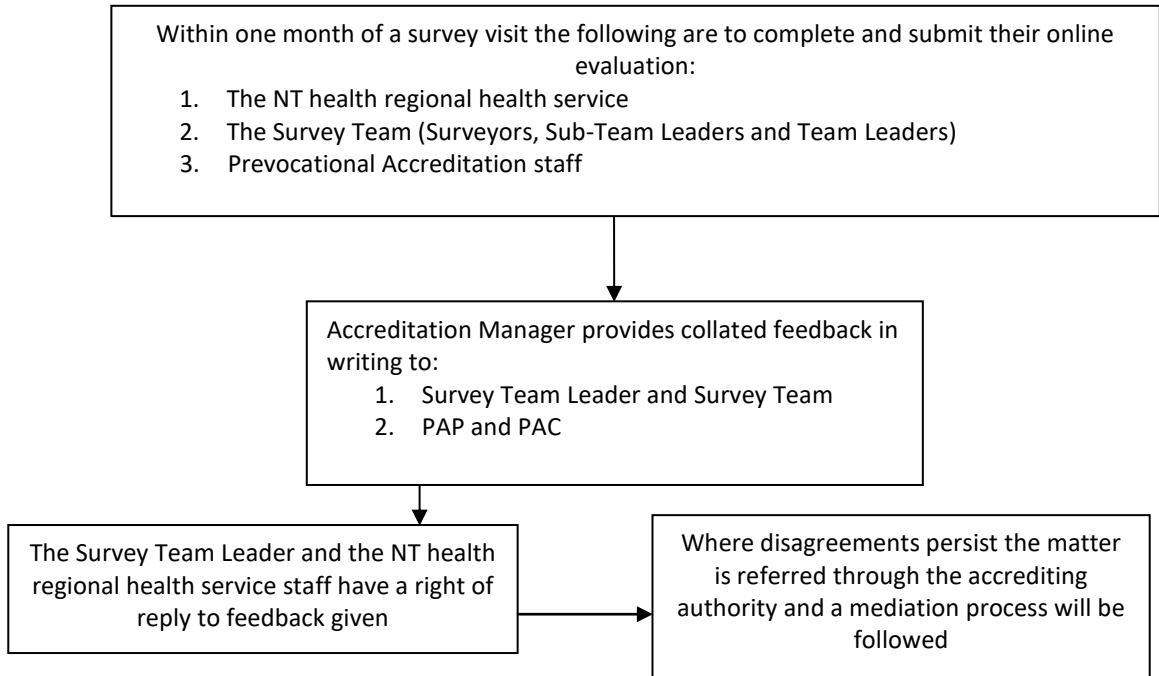
Survey Team Leader – is the specially trained leader of the Survey Team, responsible with assistance from the Accreditation Manager and support staff for managing the survey team and the writing, collation, and review of the Survey Event Accreditation Report. The Survey Team Leader presents the survey event report to the NT Prevocational Accreditation Panel (PAP).



ACCREDITATION EVALUATION PROCESS

PROCESS FLOWCHART

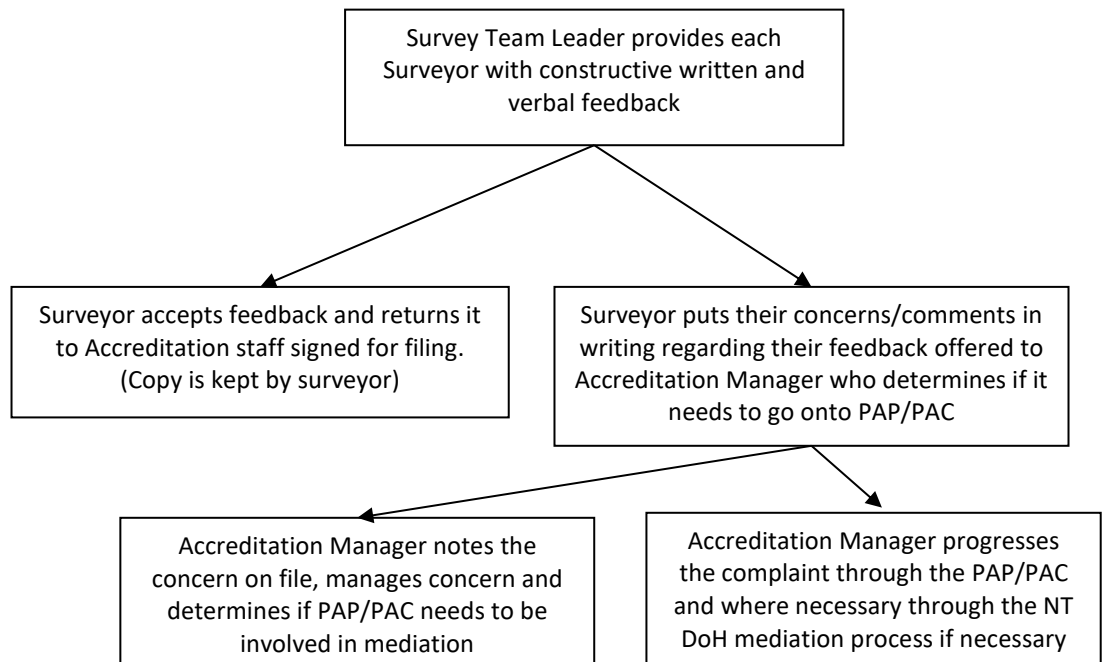
NT HEALTH REGIONAL HEALTH SERVICE FEEDBACK



ACCREDITATION EVALUATION PROCESS



SURVEYOR FEEDBACK





ACCREDITATION EVALUATION PROCESS

PROCESS DESCRIPTION

1. Within two weeks of a Survey Visit, the Prevocational Accreditation staff shall distribute an email link to the online Survey Evaluation tool to the following:
 - a. The NT health regional health service (DMS, DCT, MEO and other staff involved in the survey event)
 - b. The Surveyors
 - c. The Survey Team Leader
 - d. Accreditation staff involved in the survey event
2. Within one month of a Survey event visit, the following are to complete and submit their respective feedback to Prevocational Accreditation staff:
 - a. The NT health regional health service (online evaluation)
 - b. The Surveyors (online evaluation)
 - c. The Survey Team Leader (online evaluation)
 - d. Accreditation staff involved in the survey event (online evaluation)
3. Accreditation staff are to compile the feedback and return the collated feedback to:
 - a. Accreditation Manager
 - b. The Survey Team Leader
 - c. PAP/PAC
4. Both the NT health regional health service delegate and the Survey Team Leader have right of reply and should do so in writing to Prevocational Accreditation Manager. Where an ongoing disagreement is evident, the matter is referred through the accrediting authority. Mediation can be arranged when necessary.
5. The Survey Team Leader must complete a Surveyor Feedback Form (see attached form) for each individual Surveyor and provide this verbally and in writing to the Surveyor.
6. The Surveyor;
 - a. signs the form as sighted, returning it to the Accreditation Team for filing, or
 - b. provides a written response to the feedback received to Accreditation Manager
7. Accreditation Manager either:
 - a. Notes the concern on file, determines if PAP/PAC need to be involved in mediation or
 - b. Progresses the concern to higher mediation through the accrediting authority.

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



ACCREDITATION EVALUATION PROCESS

ATTACHMENT 1

SURVEY TEAM LEADER FEEDBACK-INDIVIDUAL SURVEYORS

(To be completed by the Survey Team Leader on each Surveyor in the team)

Please provide this information to each of the Surveyors on your team within one month of the Survey Event (CC of completed template to NTPMC.THS@nt.gov.au). Complete one form for each individual Surveyor on the team.

Survey Event Details

NT health regional health service/Training facility:

Survey Event Date/s:

Survey type: Full Survey Self-Assessment Survey QAP stages 1 or 2 Survey

New/Offsite Unit/Change of Status Survey Modified Unit

Survey Team Leader Name:

Surveyor Name: _____

Rate the Surveyor's performance for each of the following criteria:	N/A	Dissatisfied	Satisfied	Very Satisfied
a. Preparation for the Pre Survey meeting				
b. Performance as a Survey Team member				
c. Use of questioning techniques to effectively elucidate information and seek clarification of Self-Assessment information (if applicable)				
d. Conduct during the Survey Visit				
e. Knowledge of Standards and Criteria				
f. Appropriate triangulation of NT health regional health service Evidence				
g. Demonstration of unbiased Surveying				
h. Participation in the Summation Conference (if applicable)				



ACCREDITATION EVALUATION PROCESS

Please provide any additional feedback/comments:

PRIVACY STATEMENT

In collecting and recording this information, PAC will only use it for the purposes of supplying accreditation services and continuously improving training and future survey event survey teams. The information provided will be kept on a Personnel in confidence file and will not be disclosed to any persons other than Prevocational Accreditation staff who require it for the purposes intended.

Prevocational Accreditation staff are always willing to provide further information regarding Accreditation services provided in the Northern Territory. Changes to any status of surveyor information provided and recorded previously can be updated by contacting the accreditation staff, (08) 8999 2836 or email via our generic email account NTPMC.THS@nt.gov.au.

Please sign this privacy statement to say that you have received feedback from the Survey Team Leader and return to the Prevocational Accreditation staff via email NTPMC.THS@nt.gov.au

Surveyor Name (please print) _____ **Title** _____

Signature _____ **Date** _____

Thank you.

Please send your completed form to:

Prevocational Medical Assurance Services
PO Box 41326
CASUARINA
NT 0811
Phone (08) 8999 2836

Scan and email to:

OR
NTPMC.THS@nt.gov.au

Office Use Only		
Action	Date completed	Initials
Privacy Statement and Feedback sheet recorded in Personnel-in-Confidence HPE file #		
Actioned by Accreditation Manager		

Adapted from the ACHS Individual Surveyor Feedback on Survey questionnaire 2005, and PMCV Facility Feedback Questionnaire 2007