

NOTIFICATION OF CHANGE OF CIRCUMSTANCE THAT MAY AFFECT ACCREDITATION STATUS PROCESS



PROCESS 2.10

Initially Approved by PAC: 2015

Last Amended: June 2021

Next Review: June 2024

RELATED POLICY

Accreditation Policy 1.1

PURPOSE

The following documentation outlines the Process for managing a Notification of Change of Circumstance that may affect a NT health regional health services' Accreditation Status.

SCOPE

Change of circumstances that may affect Accreditation Status may involve the failure or potential failure to satisfy any of the Standards of Accreditation for Prevocational Education and Training.

Notification of Change of Circumstance that may affect a NT health regional health services' Accreditation can 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 ensure confidentiality is maintained at all times according to the Northern Territory Government Fraud and Corruption Policy.

DEFINITIONS

Change of Circumstance – refers to any circumstance which may result in the NT health regional health service no longer achieving the Accreditation Standards e.g. No DCT, no senior clinician available as Supervisor, unsafe practices, closure of a ward causing change to caseload or case mix.

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.

Secondment Allocation Status – is the Accreditation Status awarded to a NT health regional health service with accredited terms, but which is unable to provide one or more of the compulsory terms required for Intern registration.

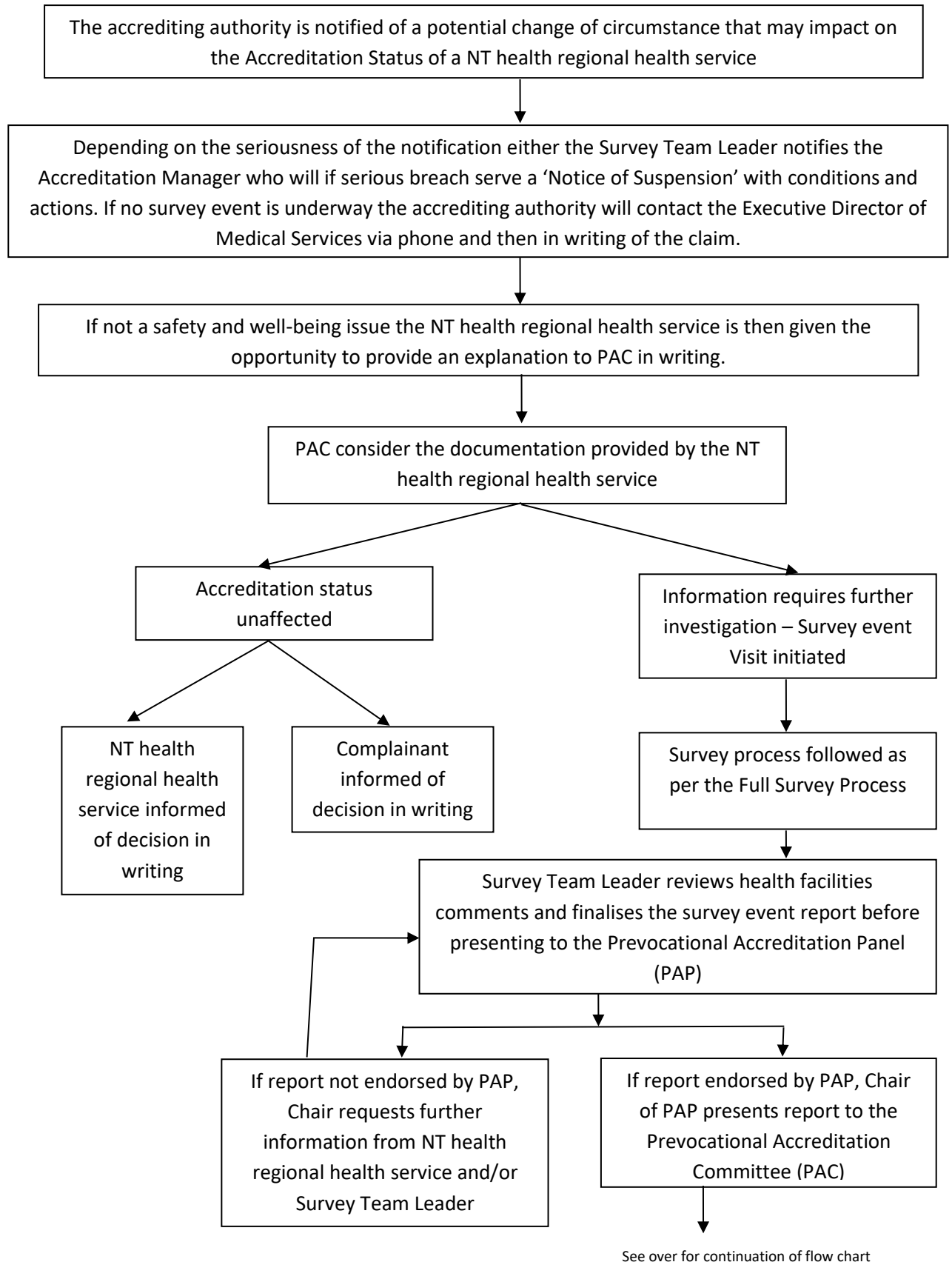
Standard – is a statement which outlines the specifications, processes or procedures required for implementing Prevocational Doctor Education and Training. The Standard is intended to ensure that a NT health regional health service consistently provides or strives to provide a safe and quality education and training program to junior doctors and at a level deemed appropriate by the wider stakeholder group.

Whistle-blower – is the person/s who informs a survey team currently conducting a prevocational accreditation assessment, the PAC (or any of its members) and/or prevocational accreditation staff of the change of circumstance with the potential to impact on a facilities Accreditation Status.

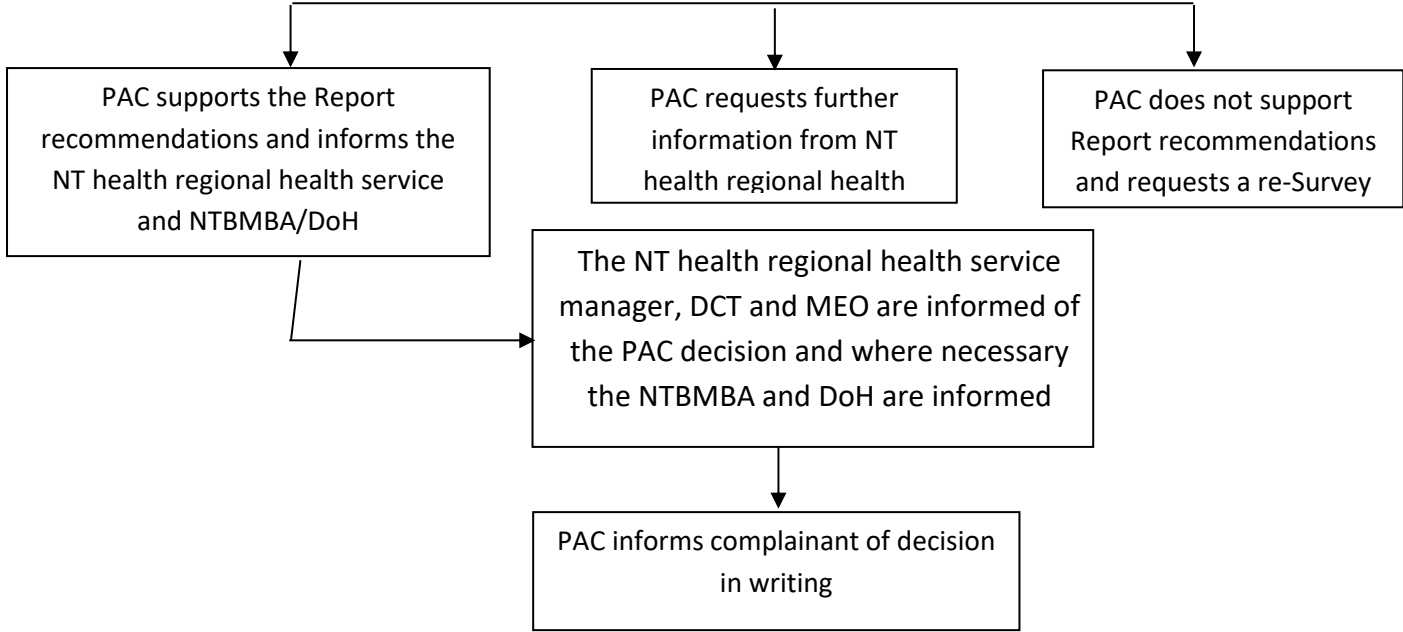
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PROCESS FLOWCHART



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PROCESS DESCRIPTION

1. If a serious breach is identified by the Survey Team undertaking a survey event assessment that requires immediate action (e.g. suspension of PGY1 rotations in a specific term due to unsafe practices in that term) the Survey Team Leader will notify the Accreditation Manager of the circumstances providing evidence of the issue. The Accreditation Manager will then in consultation with the PAC Chair serve a 'Notice of Suspension' for the given area of concern on the facility medical services executive. The 'Notice of Suspension' will have conditions and actions with a time line attached that the NT health regional health service will be required to meet as part of the final accreditation assessment.
2. If change of circumstance does not require an immediate 'Notice of Suspension' to be issued the PAC is notified of the change in circumstance that could affect a NT health regional health services' Accreditation Status.
3. The accrediting authority writes to the NT health regional health service (if correspondence does not originate as notification from the NT health regional health service) notifying it of the complaint and asking for clarification.
4. NT health regional health service provides explanation to PAC in writing
5. PAC reviews NT health regional health service response and:
 - a. If accreditation status unaffected, the NT health regional health service and complainant are informed of the outcome,
 - or
 - b. If the information received requires further investigation, a Survey event Visit or Modified Unit Survey is initiated as appropriate
6. Survey event visit is conducted and recommendation on the issue is made to the PAP for acceptance. If accepted by the PAP, a briefing is presented to the PAC.
7. The PAC reviews the recommendation and endorses or rejects.
8. NT health regional health service is informed of PAC decision. This Process should take no longer than three months from the time of PAC notification.
9. The PAC informs the NT Board of the Medical Board of Australia (NTBMBA) and or DoH of its recommendation/s.
10. PAC informs the complainant in writing if different to NT health regional health service

SUPPORTING DOCUMENTATION

1. *Accreditation Policy 1.1*

PERFORMANCE MEASURES/KPI

1. 100% of notifications of change of circumstance with the potential to impact on Accreditation are acted upon according to this Policy
2. Feedback from NT health regional health services
3. Feedback from Prevocational Accreditation Committee

Process Contact Officer: Quality Assurance Officer