



This Glossary has been developed to define some terminology used within the NT Prevocational Accreditation System. Where possible terminology that is more generic has been used to avoid issues in regards to local idioms. The Glossary has been placed here for easy reference when referring to the Prevocational Accreditation System.

ACCREDITATION

Accreditation is a process by which a recognised professional body evaluates an entire program against predetermined Criteria or Standards (Cleary, 1995). In this context, it refers to the evaluation of Prevocational Education and Training Programs (which includes Internship).

ACCREDITATION COMMITTEE (PREVOCATIONAL)

The Accreditation Committee deals with the policies, processes and procedures of Accreditation. This Committee reviews Reports from the Prevocational Accreditation Panel and the Accreditation Survey Teams and makes accreditation status decisions on these survey event reports. The Committee is comprised of a variety of stakeholders as outlined in their Terms of Reference.

ACCREDITATION CYCLE

The Prevocational Accreditation Survey Cycle is a four year cycle of Accreditation Events. Following the initial Survey the next Full Survey occurs in the calendar year in which Accreditation will lapse.

ACCREDITATION MATRIX

The Accreditation Matrix is the document outlining the current Accreditation Status of all Units at a NT health regional health service offering Prevocational Education and Training programs. This document is provided to the NT Board of the Medical Board of Australia as a record and it is a requirement of Accreditation that NT health regional health services maintain an up to date Accreditation Matrix, which is available to all involved in Prevocational Education and Training programs. The NT accrediting authority's website lists all Facility/Training provider prevocational accreditation status.

ACCREDITATION PRINCIPLES

The Accreditation Principles are a series of general statements of intent, which outline the philosophy that underpins the Accreditation System and determines the resultant policies, processes and procedures.

ACCREDITATION POLICIES

Accreditation Policies are statements/rules that must be adhered to when implementing the Accreditation Processes and Procedures. They are derived from the governing Principles that underpin the Accreditation.

ACCREDITATION PROCESSES

Accreditation Processes describe "what happens" at each stage of an Accreditation Survey Event. They outline for the stakeholders what is required at each of the different stages and include a diagrammatic flowchart representation of each step within the Process.

ACCREDITATION PROCEDURE

An Accreditation Procedure outlines a specific course of action required in achieving each of the process steps, tasks or activities, i.e. how it will be done and who will do it. This procedure is written to inform the NT health regional health service being accredited and includes specific steps and timelines for a component of the relevant Accreditation Process.



ACCREDITATION PROGRAM

The Accreditation Program is a framework of principles, policies, processes and procedures undertaken by the Prevocational Accreditation Committee, that occur over time, with the specific aim of establishing a healthcare NT health regional health service's ability to adequately and within a quality framework, implement the training of prevocational (Intern) doctors and hence be bestowed Accreditation Status on behalf of the MBA.

ACCREDITATION REPORT

The Accreditation Report is the formal written document prepared by the Survey Team following an Accreditation Survey Event. It contains a written assessment of the NT health regional health service's compliance with the Standards and provides recommendations, conditions, and comments for quality improvements. The report may include a commendation. This Report contains a recommendation to the Accrediting Authority regarding the level of Accreditation to be awarded.

ACCREDITATION STATUS

Accreditation Status is awarded to a NT health regional health service depending on their ability to provide compulsory terms according to the MBA requirements. NT health regional health services can be awarded the following status:

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

ACCREDITATION SURVEY

The Accreditation Survey refers to the process by which a NT health regional health service or Offsite Unit is assessed against the Prevocational Accreditation Standards. An Accreditation Survey Site Visit requires the Prevocational Accreditation Committee Surveyors to attend the NT health regional health service in person in order to assess the Standards.

ALLOCATION

Allocation refers to the four or five terms that will be undertaken by the prevocational doctor over their first and following postgraduate years. According to Medical Board of Australia requirements for General Registration the first postgraduate year (Internship) must include at least minimum 10 continuous weeks of Medicine, Surgery and minimum of 8 continuous weeks in Emergency Medical Care. In most NT health regional health services, the responsibility for allocation of terms is undertaken by Medical Administration staff or Medical Education Unit staff or advice from both.

APPEAL

An Appeal is a request for review of a decision made by a Prevocational Accreditation Survey Team and endorsed by Prevocational Accreditation Panel, prior to the submission of the Report to the Prevocational Accreditation Committee.

APPEALS COMMITTEE

The Appeals Committee is an independent group convened by the Director of the PMAS or delegate responsible for reviewing the Prevocational Accreditation Committee recommendations and processes regarding the health facility making the appeal.

CHANGE OF CIRCUMSTANCE

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

CRITERION

A Criterion is a component of a Standard that can be objectively assessed.



CURRICULUM FRAMEWORK

The Curriculum Framework is the structure on which the educational program is based. The National Curriculum Framework for Junior Doctors was developed in 2006. The curriculum can be viewed on the NT accrediting authority's website as well as the CPMEC website.

DELEGATED OFFICER

The Delegated Officer refers to the NT health regional health service staff member who has been given responsibility for overseeing a specific Accreditation Standard/s by the NT health regional health service Manager. The Delegated Officer is responsible for ensuring compliance with the Standard/s.

EVIDENCE

Evidence is the data and information that supports a NT health regional health service's Self-Assessment. This documentation and staff interviews (for site visit) is used for verification of the NT health regional health service's level of compliance with a Standard or Criterion.

FUNCTION

A Function is a broad theme outlining the Prevocational Accreditation areas of responsibility allowing a logical grouping of associated Standards.

OUTCOME INDICATORS (USED BY SURVEY TEAMS)

Indicators that highlight specific achievements related to a Criterion. Indicators will assist Survey Teams in maintaining a consistent approach to awarding levels of compliance, and will provide the NT health regional health service with a higher level of clarity of expectations for each level of compliance.

QUALITY ACTION PLAN (STAGE 1 AND STAGE 2)

The Quality Action Plan is a progressive two-stage document initially populated with recommendations, conditions and comments by the prevocational accreditation staff and completed by the NT health regional health service in response to the site visit Prevocational Accreditation Report. This plan in its first stage outlines how the NT health regional health service will action and address the recommendations and conditions detailed within the site visit Prevocational Accreditation Report and includes a NT health regional health service timeframe for completion of each of the listed actions. It is a progressive document and is used for all stages of the QAP. Monitoring (desktop) Survey Teams may request an additional QAP if the NT health regional health service has not progressed to meet all or enough recommendations or conditions received at the NT health regional health services last site visit assessment.

QUALITY ASSURANCE OR CONTINUOUS IMPROVEMENT

Systematic actions to monitor performance and customer requirements and make changes as required (International Standards Organisation Definition No. ISO-9000). In this context, it denotes the monitoring of the quality of the NT health regional health service's performance and outcomes against the NT Prevocational Accreditation Standards.

RATING - ADVANCED COMPLETION (AC60)

Advanced Completion is given where there is deemed by the survey team assessment a high risk to the Intern/prevocational doctor and/or patients and the Survey Team Leader believes that an acceptable level of performance can be achieved within 60 days from being awarded an AC60. AC60s are awarded to an individual Criterion within a Standard. Where there are two or more AC60s in a Survey event, Accreditation status will only be granted to the facility/training provider for a maximum of one year after which a full site visit is required.

RATING - HIGH PRIORITY REQUIREMENT (HPR)



At the time of a Visit survey event, Survey Teams will identify if any of the Standards require a High Priority Requirement (HPR). A HPR is identified by the survey team undertaking a risk analysis, using the likelihood versus consequences matrix. Not all the Standards are worthy of a HPR. HPRs are awarded to an entire Standard not to a single criterion. Any HPRs received require **immediate** action by the Facility/Training Provider – Accreditation status will not be recommended to the NT Accrediting Authority for this Standard for the entire facility/training provider and/or the Unit awarded the HPR.

REPORT RECOMMENDATIONS

Describe the major outcome or the quality improvement needed to meet a specific Standard. The recommendation may be assigned to an appropriate person (by role) or unit. Recommendations will start with the word 'THAT'. Recommendations must be met during the awarded accreditation cycle, usually by the end of the monitoring survey events (QAPs) in order for the facility/training provider to maintain accreditation status. All Recommendations must be met prior to the next scheduled reaccreditation survey assessment (site visit). If urgent and immediate action is required a time frame will be added into the recommendation or a HPR, AC 60 may be awarded as part of the recommendation.

REPORT CONDITIONS

Describe an outcome or minor improvement needed to meet the Standard/s – and may indicate whom the appropriate person (by role) or unit best to work on meeting the condition. A Condition won't prevent on its own the facility/training provider achieving accreditation status however the accreditation status continuing may be reliant on a condition being met in a stated timeframe. Conditions may have a link to and/or underpin a recommendation or it may stand-alone.

REPORT COMMENTS

Describe what was found, state what supporting evidence was found and where a change or improvement is needed. Written to provide further information to the NT health regional health service and is linked to the Condition and/or Recommendation.

REPORT COMMENDATIONS

Provided to commend any processes or part thereof within a PETP. These are given by the survey team to acknowledge and recognise quality PETP systems in place. A commendation may include encouragement to share the processes and systems being commended both locally and nationally. Which may lead to a higher rating e.g. EA – Extensive Achievement or OA – Outstanding Achievement.

ROSTERING

Rostering refers to the daily routine for the prevocational doctor. The roster will indicate the hours of work, location of work (e.g. ward, theatre, outpatients etc.) and specific events such as ward rounds, education sessions, team meetings etc.

SELF-ASSESSMENT - SUBMISSION

A systematic and independent (Accrediting Authority) examination to determine whether activities and related results comply with planned arrangements and whether these arrangements are implemented effectively and are suitable to achieve objectives outlined/implemented. The Self-Assessment submission is the basis of preparation for an Accreditation survey assessment, which may include a site visit and is undertaken and compiled by the NT health regional health service.

STANDARD

A Standard is a statement that outlines the specifications, processes or procedures required for implementing prevocational doctor education and training programs. The Standard is intended to ensure that a NT health regional health service consistently provides or strives to provide quality education to prevocational doctors and at a level deemed appropriate by the wider stakeholder group.

STANDARDS GUIDELINES



Guidelines are statements that outline suggested actions to assist NT health regional health services in achieving the standards. They are provided to guide but **not prescribe** actions and allow some flexibility as to how they may be applied. The use of guidelines is at the discretion of the NT health regional health service

STEP-BY-STEP GUIDE

This step by step guide provides information to the facility/training provider on the

- types of survey events,
- accreditation basics,
- accreditation forms,
- how to interpret the standards,
- how to self-rate,
- presenting evidence for a survey event submission,
- Preparing for an Accreditation site visit, plus more.

SURVEY TEAM

A Survey Team is a group of Surveyors chosen for their individual expertise to undertake a Survey event of a NT health regional health service.

SURVEY TEAM LEADER

The Survey Team Coordinator is the 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 Coordinator/Leader presents the survey event report to the NT Prevocational Accreditation Panel (PAP).

SURVEY SUB-TEAM LEADER

A Survey Sub-Team Leader is an experienced Surveyor assigned to assist the Survey Team Coordinator by leading a Sub-Team of the Survey Team. Each Survey Team consisting of four or more Surveyors may be divided into Sub-Teams in order to conduct the Unit interviews at a NT health regional health service. The Survey Sub-Team Leader is responsible for the tasks outlined in the relevant Position Description.

SURVEYOR

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

THE NT HEALTH REGIONAL HEALTH SERVICE (Facility/Training Provider)

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.

UNIT/TERM

A Unit is an assigned term in which prevocational doctors work and undergo clinical training under the supervision of senior colleagues and a designated Educational (Term) Supervisor. Usually the staff in the Unit consists of a team of clinicians ranging from Intern to Consultant. Examples of a Unit may be Anaesthetics, ENT, Surgery or Respiratory Medicine. Units are required by the Prevocational Accreditation Standards to outline the range of clinical opportunities and case mix that are available. Prevocational doctors are now also training in non-standard settings, which are often based in general practice and community medicine.

The Term is a period of practical experience and training that may occur in a number of clinical areas. A term usually occurs in Units with components of orientation, supervision, education, assessment and clinical experience. NT health regional health services develop a timetable to schedule prevocational doctors working in various clinical settings across



each calendar year. One part of the year, generally 10 – 12 weeks in length, is called a term. An elective term for Interns may be a minimum of five weeks in length.

UNIT/TERM EDUCATION PROGRAM

The Unit/Term Education Program is a specifically developed education program for prevocational doctors, which is available to prevocational doctors rotating through this Unit/Term and may be multidisciplinary in nature.