



Complaints about programs of study, education providers and organisations accredited or being accredited by the Australian Medical Council

1. The Australian Medical Council Limited (“AMC”) is a company limited by guarantee. It has been appointed by the Medical Board of Australia as the external accreditation entity for the medical profession under the *Health Practitioner Regulation National Law*. As such, in the context of accreditation of programs it reports and is accountable to the Medical Board of Australia (“MBA”) and works with the Australian Health Practitioner Regulation Agency (“AHPRA”).
2. The AMC develops standards for medical education and training in all phases of medical education. In its processes for accreditation of programs of study, the AMC assesses education providers and their medical programs against the standards and monitors them to ensure they continue to meet the standards. The AMC accredits primary medical education programs provided by university medical schools, and specialist medical training provided by national specialist medical colleges.
3. [Note: The AMC also uses accreditation as a mechanism to assess the standards of authorities that accredit intern training programs and posts, and the standards of some specific assessments of international medical graduates (pre-employment structured clinical interview providers and workplace based assessment providers). This set of procedures does not apply to those three AMC processes. The AMC procedural guidelines for each of those three processes contain an appeals process which aligns with this process.]
4. From time to time the AMC will receive complaints about the educational processes of programs and providers or organisations it has accredited or is assessing for accreditation.
5. Those complaints may come from students, trainees, staff, or other stakeholders. They may also be referred to the AMC by other bodies involved in the regulatory framework such as the MBA or AHPRA.
6. The AMC distinguishes between:
 - a. Complaints received during the process of conducting an assessment for accreditation. During an assessment the AMC seeks comment and feedback from a range of people or organisations associated with the program or provider being assessed. Matters which might be characterised as complaints received during an assessment process will be treated as a part of the assessment process itself.
 - b. Complaints received outside a formal assessment process, which may be relevant to the AMC’s monitoring role.
7. In broad terms, complaints will fall into one or two categories:
 - a. A *personal complaint* which the complainant seeks to have investigated and rectified so as to bring about a change to their personal situation. This would include, for example, matters such as selection, recognition of prior learning/experience, training post allocation, assessment outcomes, bullying, or dismissal from training. It is not the role of the AMC to investigate and manage personal complaints. The AMC’s accreditation standards require that providers have an effective process in place to handle such complaints. Applicants should use these processes.

- b. A *systemic complaint* which may evidence some systemic matter that could signify a failure of a program or provider to meet accreditation standards. A personal complaint may also involve some systemic element, such that some part of the complaint will be treated as a systemic matter.

For example, a complaint that the training supervision of the person complaining has been inadequate involves a personal complaint, and it would not be the role of the AMC to manage or seek to resolve that complaint. However if the complaint about supervision indicated inadequate supervision was widespread or that the processes of the organisation concerned to manage that issue were unsatisfactory or were not being properly implemented, then the complaint might also involve a systemic element relevant to the AMC's role.

8. The AMC will generally follow the following process in handling complaints it receives:
 - a. It will acknowledge receipt of a complaint to the complainant. This includes if the complaint is referred to the AMC by another entity.
 - b. The AMC will determine whether the complaint is a personal complaint or a systemic complaint (or both).
 - c. To the extent that a complaint is determined to be a personal complaint, the AMC will advise the complainant that it is not an issue for the AMC to investigate or manage, and to whom the complaint should (in the AMC's opinion) be best directed for response. This will usually be the accredited provider. The complainant will be directed to sources of information such as relevant websites (e.g. for accreditation standards) and will be informed of the current accreditation status of the provider.
 - d. If the complaint has elements of a systemic complaint, the complaint will be referred to an appropriate senior person within the AMC to provide advice as to the management of the complaint. This will typically be the chair of the relevant AMC accreditation committee (Medical School Accreditation Committee, or Specialist Education Accreditation Committee). In some cases the complaint will then be referred to the relevant AMC accreditation committee (as above) itself.
 - e. The senior person or the committee may give specific direction in relation to the investigation and management of the complaint.
 - f. Confidentiality and anonymity of complaints:
 - i. The AMC will not circulate the complaint more widely than is reasonably necessary to allow the AMC to deal with it properly.
 - ii. If the AMC considers it is necessary that the complainant be identified to the education provider concerned, (or the nature of the complaint is such that the education provider concerned is likely to identify or be able to discover the identity of the complainant), then the AMC will first seek the complainant's consent to the disclosure proposed. If the complainant does not give consent or the process for disclosure cannot be agreed, then the AMC's capacity to deal with the issues raised in the complaint may be restricted. The AMC may de-identify relevant material in any disclosure.
 - iii. In exceptional circumstances the AMC may decide that it is important that the complaint be raised with the organisation involved even without the consent of the complainant to disclosure. In this circumstance the AMC will inform the complainant of its proposed disclosure, and the reasons for it.

- iv. Systemic complaint during an assessment process:
 - o Generally the AMC will inform the provider or other person or entity involved of the substance of the complaint, but it may not do so or may delay in doing so in exceptional circumstances.
 - o If the nature of the complaint is such that the AMC considers that it can be appropriately dealt with in a general way during the assessment process without identifying the complainant or the particular complaint, then the AMC will do so. Where more than one complaint or complainant has identified the same or similar issues this will often be the case.
 - o In this case the complainant will be informed that the matter is to be handled in this way, and will be informed of the anticipated timetable for finalisation of the assessment process. The complainant will generally not be specifically informed as to the outcome of the AMC's consideration of the issues raised but will be directed to the final accreditation report.

- v. Systemic complaint outside of an assessment process:
 - o Generally the AMC will inform the provider or other person or entity involved of the substance of the complaint, but it may not do so or may delay in doing so in exceptional circumstances.
 - o Where the AMC investigation of the complaint incurs additional direct costs (such as those relating to travel to meetings and sessional fees for the AMC members/experts specifically to consider the complaint), the AMC will inform the provider concerned of the likely additional costs, and may require the provider to pay all or part of the costs.
 - o If the nature of the complaint is such that the AMC considers that it can be appropriately dealt with in a general way as part of the monitoring function without identifying the complainant or the particular complaint, then the AMC will do so. In this case the complainant will be informed that the matter is to be handled in this way. The complainant will generally not be specifically informed as to the outcome of the AMC's consideration of the issues raised.

9. Complaint outcomes:

- a. Where a systemic complaint is found to have some substance then the AMC will take appropriate steps to manage the issue. That may involve discussion and agreement with the provider concerned, monitoring of the issue, which may involve specific immediate monitoring, and/or the imposition of conditions on accreditation.
 - b. The AMC's processes in connection with monitoring and/or conditions are explained in the published accreditation procedures for the relevant accreditation processes (<http://www.amc.org.au/accreditation>) and the *Health Practitioner Regulation National Law*.
 - c. If the AMC considers that the complaint could involve an issue relevant to the registration status of an individual doctor or doctors, or involve an unlawful act, the AMC may refer the complaint to AHPRA, the MBA and/or the police. The complainant will generally be informed if this occurs, but in certain circumstances it may be considered inappropriate to do so, or the AMC may be asked not to inform the complainant.
10. The AMC will maintain a complaints register and will periodically monitor the status of complaints on that register.
11. The AMC will provide the Medical Board of Australia with de-identified information on the number, types and outcomes of the complaints received.