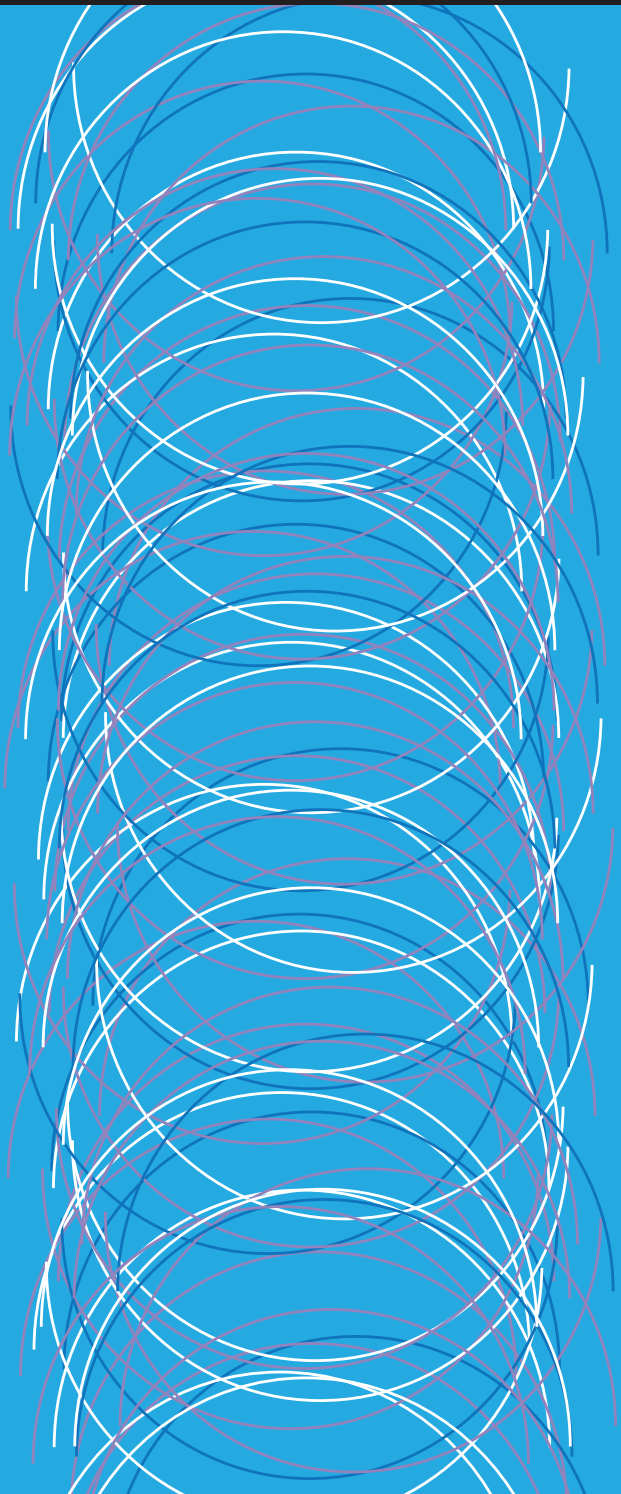


Australian Medical Council Limited

Procedures for Assessment and Accreditation of  
Intern Training Accreditation Authorities  
by the Australian Medical Council

AMC



Prevocational Standards Accreditation Committee  
November 2013

---

## Contents

1. Management of the accreditation process	1
1.1 The Australian Medical Council (AMC)	1
1.2 AMC Prevocational Standards Accreditation Committee	1
1.3 Assessment teams	1
1.4 AMC staff	2
2. The conduct of the accreditation process	3
2.1 Legislative framework	3
2.2 Aims of the process	3
2.3 Scope of AMC assessment	4
2.4 Timing of accreditations	4
2.5 AMC conduct	5
2.6 Contribution of junior doctors to AMC accreditation processes	5
2.7 Conflict of interest	5
2.8 Confidentiality	6
2.9 Public material	7
2.10 Complaints	7
2.11 Fees and charges	8
3. The administration of the assessment process	9
3.1 Types of assessments	9
3.2 Assessment of new developments	9
3.3 Assessment by an AMC team	11
4. AMC monitoring of accredited programs	17
4.1 Purpose of AMC monitoring	17
4.2 Progress reports	17
4.3 Comprehensive report for extension of accreditation	18
4.4 Unsatisfactory progress procedures	18
5. Accreditation outcomes	20
5.1 Accreditation of an intern training accreditation authority	20
5.2 Accreditation of a major change in an established intern training accreditation authority	21
5.3 Accreditation of a new intern training accreditation authority	21
5.4 Procedures following the accreditation decision	21
6. Review of domains and procedures for assessing accreditation authorities	23

# 1. Management of the accreditation process

## 1.1 The Australian Medical Council (AMC)

The AMC is a national standards and assessment body for medicine. Its purpose is to ensure that standards of education, training and assessment of the medical profession promote and protect the health of the Australian community.

The AMC is a company limited by guarantee. Its objects and membership are defined in its Constitution. The AMC Directors manage the business of the Australian Medical Council.

## 1.2 AMC Prevocational Standards Accreditation Committee

The Prevocational Standards Accreditation Committee oversees the accreditation process for intern training accreditation authorities.

The Committee's terms of reference relevant to these procedures include:

- (i) advise the AMC on guidelines, policy and procedures:
  - consider feedback after each review or accreditation assessment;
  - periodically review the procedures used by the AMC to conduct accreditation assessments and reviews;
  - recommend review of the standards and guidelines that form the national framework for intern training accreditation and the terms of reference and scope of such reviews;
- (ii) oversee AMC assessment and review of intern training accreditation authorities:
  - make recommendations on the appointment of AMC teams;
  - make recommendations on the performance of intern training accreditation authorities against Intern Training: Domains for Assessing Accreditation Authorities;
  - monitor the continuing compliance of approved intern training accreditation authorities with approved standards and national framework requirements;
- (iii) seek to encourage improvements in medical education in Australia and New Zealand that respond to evolving health needs and practices, and educational and scientific developments, including:
  - contribute to and advise the AMC on national and international developments and discussions concerning medical education;
  - sponsor and undertake activities that promote improvement in medical education;
- (iv) set an annual program of activities and reports to each general meeting of the Council on its activities.

## 1.3 Assessment teams

On the recommendation of the Prevocational Standards Accreditation Committee, the AMC Directors constitute an assessment team to review each intern training accreditation authority. Teams report to the Accreditation Committee. They work within the accreditation policy and guidelines of the AMC.

Teams are responsible for:

- assessing the intern training accreditation authority against the requirements specified in *Intern training – Domains for assessing accreditation authorities* including their compliance with the *Intern training – national standards for programs*, which outlines the requirements for processes, systems and resources that contribute to good quality intern training;
- with the accreditation authority, developing a program for the assessment of their performance;
- preparing an accreditation report on their assessment findings.

The AMC permits observers on assessments, subject to the approval of the chief executive of the intern training accreditation authority and the Chair of the AMC team. The AMC's expectations of observers are described in the statement *Arrangements for observers*.

## 1.4 AMC staff

The AMC assesses intern training accreditation authorities using these procedures and *Intern training – Domains for assessing accreditation authorities*.

AMC staff implement the accreditation process. Their roles include managing the accreditation work program; implementing AMC policy and procedures; supporting AMC accreditation committees, accreditation working parties and teams; and consulting and advising stakeholder groups on accreditation policy and procedures and individual accreditation assessments.

The AMC asks organisations undergoing accreditation to correspond with AMC staff and *not* directly with AMC committees and team members.

AMC staff will provide as much assistance and advice as possible on the assessment process but organisations are solely responsible for their preparation for accreditation.

Interpretation of AMC policy and processes is the responsibility of the AMC Prevocational Standards Accreditation Committee.

## 2. The conduct of the accreditation process

### 2.1 Legislative framework

The Medical Board of Australia's registration standard for granting general registration to Australian and New Zealand medical graduates on completion of internship requires, among other things, that intern training terms be accredited against approved accreditation standards for intern training positions by an authority approved by the Board.

The AMC has been appointed by the Medical Board of Australia to conduct accreditation functions for the medical profession under the Health Practitioner Regulation National Law (the National Law).

This set of procedures relates to the following functions:

- acting as an external accreditation entity for the purposes of the Health Practitioner Regulation National Law;
- advising and making recommendations to the Medical Board of Australia in relation to:
  - matters concerning accreditation or accreditation standards for the medical profession;
  - matters concerning the registration of medical practitioners.

When the AMC assesses an intern training accreditation authority against the approved domains and decides to grant accreditation, the AMC provides its accreditation report to the Medical Board of Australia.

### 2.2 Aims of the process

The aim of the AMC accreditation process is to recognise intern training programs that promote and protect the quality and safety of patient care, and meet the needs of the interns and the health service as a whole. This is achieved through setting standards for intern training programs and recognising intern training accreditation authorities that assess programs against these standards.

In Australia, accreditation based on a process of regular review by an independent authority has been chosen as the preferred means of providing quality assurance of the phases of medical education.

A system of accreditation is perceived to have the following advantages:

- (i) Periodic external assessment provides a stimulus for the organisation being accredited to review and to assess its own programs. The collegiate nature of accreditation should facilitate discussion and interaction with colleagues from other disciplines to benefit from their experience.
- (ii) The accreditation process respects the autonomy of the organisations being accredited, and acknowledges their expertise and achievements.
- (iii) The accreditation process supports and fosters educational initiatives.
- (iv) The accreditation report assists the organisation being accredited by drawing attention both to weaknesses and strengths.
- (v) Accreditation, as a quality assurance mechanism, benefits interns, employers of junior doctors and, ultimately, health care consumers.

Diversity of approach is one of the strengths of medical education and training in Australia. The AMC accreditation process supports diversity, innovation and evolution in approaches to medical education and in the ways in which accreditation requirements are met.

### **2.3 Scope of AMC assessment**

The AMC accredits authorities to provide intern training accreditation services principally within a defined geographic region.

All AMC assessments are based on the intern training accreditation authority demonstrating that it meets or substantially meets the requirements specified in *Intern training – Domains for assessing accreditation authorities*.

### **2.4 Timing of accreditations**

AMC accreditation entails a cyclical program of review, and the AMC work program for any year is determined in part by the requirement to assess those programs whose accreditation expires in that year. AMC staff negotiate dates for these assessments first. The AMC fits assessments of new developments, such as new intern training accreditation authorities or major changes to established authorities, into this work program.

The AMC sets an accreditation work program each year.

## 2.5 AMC conduct

The AMC will:

- (i) respect each intern training accreditation authority's autonomy to set its own policies and processes;
- (ii) in making decisions, gather and analyse information and ideas from multiple sources and viewpoints;
- (iii) follow its documented procedures, and implement its accreditation process in an open and objective manner;
- (iv) adopt mechanisms to ensure that members of assessment teams, committees and staff apply standards and procedures in a consistent and appropriate fashion;
- (v) review its processes, and the requirements in *Intern training – Domains for assessing accreditation authorities* and *Intern training – national standards for programs* on a regular basis;
- (vi) gather feedback on and evaluate its performance; and
- (vii) work cooperatively with other accreditation authorities to avoid conflicting standards and to minimise duplication of effort.

The AMC process entails both accreditation (validating that standards are met) and peer review to promote high standards of medical education, stimulate self-analysis and assist the intern training accreditation authority to achieve its objectives. Accreditation is conducted in a collegial manner that includes consultation, advice and feedback.

In its accreditation function, the AMC:

- focuses on the achievement of objectives, maintenance of standards, public safety requirements, and expected outputs and outcomes rather than on detailed specification of processes;
- as far as possible, meshes its requirements with internal work priorities;
- following accreditation, monitors developments and the implementation of recommendations and conditions; and
- undertakes a cycle of assessments, with a full assessment of each program at least every eight years.

## 2.6 Contribution of junior doctors to AMC accreditation processes

The AMC considers it important that the junior doctors have opportunities to contribute to the assessment of these programs.

Opportunities for junior doctors to contribute to AMC accreditation processes include:

- AMC surveys and/or submissions;
- during site visits, discussion with members of the AMC assessment team;
- contribution as appropriate to the intern training accreditation authority's progress reports to the AMC.

## 2.7 Conflict of interest

Members of AMC committees are expected to make decisions responsibly, and to apply standards in a consistent and an impartial fashion.

The AMC recognises there is extensive interaction between the organisations that set standards for and provide medical education and training in Australia so that individuals are frequently

involved in a number of programs and processes. The AMC does not regard this, of itself, to be a conflict. Where a member of an AMC accreditation committee or an assessment team has given recent informal advice to an intern training accreditation authority on its program of study outside the AMC accreditation process, that member must declare this as an interest.

The AMC requires its Directors and members of its committees to complete standing notices of interest and to update these regularly. These declarations are available at each meeting of the committee. The agendas for AMC committee meetings begin with a 'declaration of interests', in which members are requested to declare any personal or professional interests which might, or might be perceived to, influence their capacity to undertake impartially their roles as members of the committee.

The committee may decide that a member's interest in a particular item requires the member to be excluded from the committee's usual duties, such as discussion of that item at committee meetings; or it may decide that the member may continue to participate. Members will not vote on matters on which they have a declared personal or professional interest. All declared interests will be recorded in the committee minutes, as will the committee's decision in relation to the interest.

The AMC requires proposed members of assessment teams to declare to the Prevocational Standards Accreditation Committee any personal or professional interest that may be perceived to conflict with their ability to undertake impartially their duties as an assessor. The Committee, having considered any comments by the intern training accreditation authority on the team membership, recommends the composition of the assessment team to AMC Directors. In doing so, it will disclose all declared interests of the persons recommended and any comments by the intern training accreditation authority in relation to the proposed composition of the team. The AMC has full regard to such interests and comments in appointing assessors.

If a conflict of interest emerges for an assessor during an assessment, the team chair and secretary will determine an appropriate course of action. This may entail changing the report writing responsibilities of the assessor, requiring the assessor to abstain from relevant discussion, or altering the assessment program. Any such conflicts, and the course of action taken, will be reported to the Prevocational Standards Accreditation Committee.

## **2.8 Confidentiality**

In order to discharge its accreditation function, the AMC requires organisations undergoing assessment and accreditation to provide considerable information in accreditation submissions and in subsequent progress reports. This may include sensitive information, such as strategic plans, honest appraisal of strengths and weaknesses, and commercial in confidence material.

Intern training accreditation authorities are advised to prepare their accreditation submission as a public document. To facilitate stakeholder consultation (see 3.3.5) the AMC asks intern training accreditation authorities to place their accreditation submission on their website.

The AMC requires the members of its committees and assessment teams to keep as confidential the material provided by intern training accreditation authorities and, subject to the statements below on research, to use such information only for the purpose for which it was obtained in conjunction with the AMC assessment process.

The AMC provides detailed guidance to its committees and teams on its confidentiality requirements and their responsibilities for secure destruction of information once an assessment is complete.



The AMC may conduct research based on information contained in accreditation submissions, progress reports, surveys and stakeholder submissions. The results of this research may be published in AMC policy and discussion papers. Normally, this material will be de-identified. If the AMC wishes to publish material which identifies individual intern training accreditation authorities it will seek the accreditation authority's permission.

The AMC provides opportunities for intern training accreditation authorities to review drafts of the AMC accreditation report at two stages in the assessment process. At such points, these drafts are confidential to the AMC and the accreditation authority. The intern training accreditation authority should not discuss the draft report with third parties without the AMC's consent. If the AMC needs to confirm material in a draft report with a third party, it will advise the accreditation authority of these plans.

## 2.9 Public material

The AMC will place the following material concerning the accreditation status of individual intern training accreditation authorities in the public domain:

- The current status and accreditation history of accredited programs and the date of the next accreditation assessment are posted on the AMC website.
- AMC accreditation reports are public documents.
- The AMC will post an annual summary of its response to progress reports submitted by accredited intern training accreditation authorities on the AMC website.
- The AMC will issue a press statement after it has made an accreditation decision and will publish the executive summary of the accreditation report.

The AMC expects that any public statement made by intern training accreditation authorities about their accreditation status will be complete and accurate, and that organisations will provide the contact details of AMC staff in any such public statement. The AMC will correct publicly any incorrect or misleading statements about accreditation actions or accreditation status.

## 2.10 Complaints

The AMC assesses intern training accreditation authorities against the requirements in *Intern training – Domains for assessing accreditation authorities*.

AMC accreditation processes include opportunities for stakeholder contributions. With the assistance of the organisation being reviewed, the AMC identifies stakeholder organisations and invites them to comment on the performance of the organisation against the approved standards or domains. It considers this feedback in assessing the organisation and/or its program.

*Intern training – Domains for assessing accreditation authorities* requires these authorities to have processes for addressing grievances, complaints and appeals, and the AMC reviews these processes when reviewing an intern training accreditation authority.

Apart from reviewing these processes, the AMC does not have a role in investigating specific complaints of individual trainees, supervisors or health services about the intern training accreditation authority. It will not intervene on behalf of an individual complainant to address grievances relating to matters such as intern post allocation, assessment outcomes, or accreditation decisions by the intern training accreditation authority.

From time to time the AMC does receive questions and/or complaints about the processes of organisations it has reviewed. The AMC will respond to questions or complaints submitted in writing to the AMC office.

The AMC addresses complaints in the following manner:

- The AMC review process is outlined, with reference to any national standards or domains that would apply to the matter raised in the complaint.
- The AMC outlines the options for the complainant to contribute feedback during a scheduled AMC review of the intern training accreditation authority.
- The complainant is given the name of other organisations, if relevant, which may be able to assist.
- AMC staff refer the matter to the Chair of the Prevocational Standards Accreditation Committee. If the AMC has reason to believe that the intern training accreditation authority may not be meeting the *Intern training – Domains for assessing accreditation authorities* or the *Intern training – national standards for programs*, it may seek information from the accreditation authority in writing and consider this information through its monitoring processes.

## 2.11 Fees and charges

The AMC undertakes assessments on a cost-recovery basis. Organisations seeking accreditation pay the direct cost of the assessment. Costs are generally related to the work of the assessment team including their contribution to ongoing monitoring and AMC staff support.

The AMC provides more detailed advice on the costs at the commencement of each assessment.

The intern training accreditation authority is required to pay part of the fee when lodging their accreditation submission and comprehensive report. AMC staff issue an invoice for the remaining fee when the AMC completes the assessment. Payment is due before the AMC makes the decision on the accreditation.

## 3. The administration of the assessment process

The AMC has developed these standard procedures for assessing and accrediting intern training accreditation authorities against the requirements in *Intern training – Domains for assessing accreditation authorities*.

### 3.1 Types of assessments

The AMC undertakes assessments in the following circumstances:

- assessment of new developments including:
  - assessment of *new* intern training accreditation authorities;
  - assessment of proposals for *major change* in established intern training accreditation authorities;
- assessment for the purposes of *reaccreditation* of established intern training accreditation authorities.

In cases where conditions on accreditation or reaccreditation require it, the AMC also conducts *follow-up* accreditation assessments. It may conduct a follow-up assessment when it has granted an intern training accreditation authority a limited period of accreditation, or placed conditions on accreditation.

An AMC assessment entails appointment of an AMC team which reviews the accreditation authority's documentation, undertakes a program of meetings if required, and prepares a report.

For a new development, the accreditation authority seeking AMC accreditation must first demonstrate that it is ready for this assessment. This entails additional steps *before* the AMC begins its standard process for assessment of the program by an AMC team. These steps are outlined in section 3.2.

Section 3.3 provides a description of the standard process for assessment by an AMC team.

### 3.2 Assessment of new developments

For new developments, the AMC will first assess if the work of the intern training accreditation authority is likely to comply with the approved national standards and the domains for assessing accreditation authorities.

The procedures for this first stage assessment of each type of development listed in section 3.1 are described below.

#### 3.2.1. First stage assessment of a new intern training accreditation authority

In its accreditation role, the AMC assures the quality of medical education and training programs and processes. The AMC does not comment on the desirability or otherwise of new medical education providers, or new arrangements for oversight of standards of medical education and training. Where new arrangements are proposed, the organisation seeking AMC accreditation should conduct independent negotiations with the appropriate state/territory and national authorities concerning the role.

Organisations require considerable time to implement new processes and to organise the necessary resources. By advising the AMC early of their intentions, organisations have access to general advice on the national standards for programs and the domains for assessing accreditation authorities, and greater flexibility in negotiating the timing of the AMC

assessment. The AMC expects to receive notification of an organisation's intention when planning begins and at least 12 months in advance of intended change.

Once the AMC has been advised of the plans, the AMC will provide a guide for completion of the preliminary (Stage 1) submission. The AMC judges the organisation's readiness for assessment on the basis of this submission. The submission must outline the scope of the intern training accreditation role and curriculum for the specialist medical program and the continuing professional development program, and the resources including clinical training resources available to deliver these programs.

The Prevocational Standards Accreditation Committee reviews the submission following the process described in section 3.2.3.

### **3.2.2. First stage assessment of a major change in an established intern training accreditation authority**

Major changes to the intern training accreditation authority and the scope of the activities may affect accreditation status. The AMC expects to be informed prospectively of such developments. The regular progress reports required of accredited intern training accreditation authorities is one avenue for such advice. (See section 4). While plans for major change are evolving, the Prevocational Standards Accreditation Committee is able to give general advice as to whether the proposed changes are likely to comply with the requirements in *Intern training – Domains for assessing accreditation authorities*. As many of the changes described below will need to be assessed by an AMC team before they are introduced, the AMC requests at least 12 months' notice of the intended introduction of the change.

Any of the following might constitute a major change in an accredited intern training accreditation authority: a change in the scope of the accreditation authority's work including a change to the geographic region covered by those services; significant change in the objectives, approach, or emphasis of an intern training accreditation authority's existing work; a significant change in the resources available to support the management of the work, including a change in the ownership or governance. The gradual evolution of the intern training accreditation authorities' program and accreditation authority in response to initiatives and review would not be considered a major change.

When it considers the initial advice from an accredited intern training accreditation authority about planned changes, either through a specific notice of intent or through progress reports, the Prevocational Standards Accreditation Committee will decide if it is a major change. If it is, the Committee will also decide whether the major change can be approved for introduction within the current accreditation of the program or is of comprehensive impact that would require reaccreditation of the whole program.

The Committee will advise the intern training accreditation authority of its decision, including whether the assessment will be carried out by correspondence or by visit.

In the event that the Committee decides to assess the change within the intern training accreditation authority's current period of accreditation, the accreditation authority will be required to submit a broad outline of the new program, transitional arrangements for existing trainees if appropriate, the resources including clinical teaching resources available to deliver the training program, the resource implication of the change for healthcare facilities, and evidence of engagement of stakeholders. Information on any changes proposed to the continuing professional development programs for the specialty will also be required. The Committee will consider this submission and make a recommendation to the AMC Directors on accreditation of the program including any specific reporting requirements.

In the event that the AMC decides that the change must have a separate accreditation before it is introduced, the AMC may also require the intern training accreditation authority to demonstrate that the planned program is likely to comply with the approved national standards and that the accreditation authority is able to implement the program. The Prevocational Standards Accreditation Committee reviews the submission following the process described in section 3.2.3.

### **3.2.3. AMC decision on first stage assessments of new developments**

The Prevocational Standards Accreditation Committee completes Stage 1 assessments of new developments based on a review of the applicant's submission. A fee is charged for these submissions.

The AMC will generally assess Stage 1 submissions within three months of their submission. This is subject to the meeting schedule of the Prevocational Standards Accreditation Committee. The dates of the meetings of the Committee are available from AMC staff.

The Committee may recommend one of the following to the AMC Directors:

- (i) that the AMC invite the organisation to submit for assessment by an AMC team;
- (ii) that further development is required and the organisation be invited to submit additional information for consideration;
- (iii) that the AMC not assess the program for accreditation. Where it has rejected a Stage 1 submission, the AMC may specify a period of time to lapse before it will consider a new submission.

Should the AMC invite the organisation to proceed to assessment, the AMC and the organisation will set a date for the assessment. The AMC aims to complete these assessments five months before the change begins, so that the organisation can demonstrate it has satisfied any conditions that must be met before commencement.

The AMC will ask the organisation to complete an accreditation submission providing the outline of its work. A separate guide will be available.

AMC staff are able to advise on the date the submission should be lodged.

## **3.3 Assessment by an AMC team**

An AMC assessment entails appointment of an AMC team which reviews the accreditation authority's documentation, undertakes meetings and visits as required, and prepares a report.

### **3.3.1. Initial contact**

AMC staff write to the intern training accreditation authority concerning the timing of the assessment, the process of assessment, and the documentation required. AMC staff write to intern training accreditation authorities which need reaccreditation or a follow-up assessment approximately 12 months before their accreditation is due to expire. For organisations seeking accreditation of a new development, AMC staff provide customised advice on AMC timings and requirements.

AMC staff will write to the intern training accreditation authority well in advance of the accreditation assessment requesting a submission and providing a draft timeline for the assessment.

The timing of the assessment is planned in consultation with the senior office bearers and chief executive of the intern training accreditation authority.

The AMC assessment team works through AMC staff and the office of the chief executive of the intern training accreditation authority. All requests for information are made to the chief executive, and the plans for assessment visits and meetings are finalised in consultation with the chief executive or nominee.

### **3.3.2. Documentation**

The AMC provides a guide to assist the intern training accreditation authority in preparing the accreditation submission, which is the basis for the assessment. The guide outlines the requirement for self-assessment and critical analysis against the domains for assessing accreditation authorities.

For a follow-up assessment, the AMC asks the intern training accreditation authority to develop a limited accreditation submission, outlining developments since the most recent assessment, and responding specifically to recommendations and issues identified as requiring attention in the most recent accreditation report. The AMC supplements this limited submission by providing copies of the intern training accreditation authority's progress reports, where applicable (see section 4) to the assessment team.

The AMC normally asks the intern training accreditation authority to submit its documentation three months ahead of the assessment. For a follow-up assessment, a shorter timeframe may apply.

### **3.3.3. Selection of the assessment team**

For each assessment, the AMC appoints an assessment team. Assessment teams are appointed by the AMC on the recommendation of the Prevocational Standards Accreditation Committee and following an opportunity for the organisation being accredited to comment on the proposed membership.

The size of the team depends on the complexity of the task and the range of skills required. Whilst the expertise of individual members is of prime importance, the composition of the team provides for a balance of knowledge and experience with particular, but not exclusive, emphasis on prevocational medical training, health service and community interests.

An experienced AMC assessor is appointed as chair of the team. One member of the team is an AMC staff member, who is the executive officer to the team. The chair has overall responsibility for the conduct of the assessment. The executive officer provides policy advice, organises the assessment with the intern training accreditation authority, supports and contributes to the team's assessment, collates and edits the team's report, and ensures the assessment process is evaluated.

The AMC maintains a database of potential team members, based on nominations from stakeholder organisations. The AMC includes a mix of new and experienced members on each team.

Teams for follow-up assessments comprise some members of the original team and some new members.

The AMC produces a detailed guide on the work of the team, *The AMC accreditation handbook*, which is given to each team member when their appointment is confirmed. The AMC periodically provides professional development opportunities for team chairs and assessors.

#### **3.3.4. The team's preliminary meeting**

The assessment team holds a preliminary team meeting normally between two and three months before the accreditation assessment of the intern training accreditation authority. At this meeting, the team identifies key issues and develops an outline of the assessment plan. The members of the team divide the assessment task into specific responsibilities, depending on their expertise and interests. These responsibilities are directly linked to the contents of the final accreditation report.

The AMC invites representatives of the intern training accreditation authority to the final session of the team's preliminary meeting. This allows discussion of the team's preliminary assessment of the accreditation submission. Strengths are identified, any inadequacies or omissions in the documentation are discussed, and also the outline of any agreed program for visits and meetings. The team sets a date for receipt of any further information from the intern training accreditation authority.

Following the meeting, AMC staff confirms the team's assessment plan in writing.

#### **3.3.5. Stakeholder consultation**

The AMC invites stakeholder comment on the intern training accreditation work of the accreditation authority.

The AMC will invite comment from the following: other intern training accreditation authorities; junior doctor and intern groups; the medical schools in the local jurisdiction; the relevant Australian state and territory health departments; and health consumer groups. The AMC has standard questions for each group consulted, which will be reviewed and customised for each accreditation assessment.

The AMC asks the intern training accreditation authority to identify other interest groups.

The AMC will also gather comments from junior doctors, doctors who supervise interns, and their program, and educators who support that program in the jurisdiction relevant to the accreditation authority. It may use surveys and/or interviews.

For a follow-up assessment, the assessment team decides on the extent of the stakeholder consultation required, having considered the issues to be addressed in the assessment.

The AMC provides the intern training accreditation authority with a copy of the stakeholder feedback and, if relevant, de-identified survey reports once the team has completed its assessment.

#### **3.3.6. The team's assessment visit**

The AMC team will determine whether or a program of visits and meetings is required to complete the assessment, taking into account the complexity of intern training accreditation work and the scope of that work.

Following the preliminary team meeting, AMC staff send the intern training accreditation authority a guide to assist in planning the final program of meetings.

Teams may undertake visits to:

- observe some of the standard accreditation activities of the intern training accreditation authority, to judge the robustness of those processes and to assess their implementation
- discuss the intern training accreditation authority's work with senior officers, committees, staff and stakeholders.



All interviews are conducted with the knowledge of the senior office-bearers although not necessarily in their presence. This ensures that views can be expressed freely without being attributed to individuals.

In order to maximise the time available during the assessment and to contain costs, the AMC divides the team into sub-teams for components of the assessment visits.

Before the team's preliminary meeting, AMC staff ask the intern training accreditation authority to tabulate information on the location of its trainees and to provide information on the features of a range of health care facilities and training institutions. This information is discussed at the team's preliminary meeting, and a draft outline of the site visit program is developed. The final program is then negotiated between the AMC and the intern training accreditation authority.

The AMC provides a guide to arranging site visits to assist the intern training accreditation authority to structure the agreed program of activities. Organisation of the site visits is primarily a responsibility of the intern training accreditation authority with assistance from AMC staff.

### **3.3.7. Preliminary findings**

At the end of the review, the assessment team prepares a statement of its preliminary findings that, if sustained, would form the main points and conclusions of its report. It identifies achievements and weaknesses, problem areas requiring attention, and distinctive activities to be encouraged.

The team discusses its findings with key officers of the intern training accreditation authority. The organisation has an opportunity to correct errors of fact and discuss any draft recommendations and action that would need a response. AMC staff circulates the final statement (revised to correct errors) to the intern training accreditation authority and the team members.

The team makes no announcement concerning accreditation or approval of the intern training accreditation authority. This is a decision taken by the AMC Directors after considering recommendations from the Prevocational Standards Accreditation Committee.

### **3.3.8. Preparation of team's draft report**

At the conclusion of the assessment, the team prepares a draft report presenting its findings. This task is coordinated by the team executive officer. The report also provides feedback to the intern training accreditation authority to improve program quality.

The aim is to provide the team's draft document usually within four weeks of the conclusion of the review. More time may be required depending on the complexity of the assessment. The intern training accreditation authority is invited to comment, within a reasonable timeframe, on the factual accuracy of the draft and on any recommendations, conclusions or judgments in the draft.

The team finalises its draft report on its findings having considered the comments by the intern training accreditation authority. AMC staff submit this report to the Prevocational Standards Accreditation Committee. They also submit comments by the intern training accreditation authority if these raise any significant concerns regarding the recommendations, conclusions or judgements in the draft report.

The Prevocational Standards Accreditation Committee considers the team's draft report. It may seek additional information from the intern training accreditation authority or the team. The Committee decides on the final wording of the report to be presented to the AMC Directors and develops its accreditation recommendations.



### **3.3.9. Presentation of the Committee's report to the intern training accreditation authority**

AMC staff provide a copy of the report and accreditation recommendations endorsed by the Committee to the intern training accreditation authority.

The intern training accreditation authority may:

- (i) ask that the Committee's report and recommendations be submitted to the AMC Directors for a decision; or
- (ii) ask the Committee to consider minor changes, such as editorial and wording changes before submitting its report and recommendations to the AMC Directors for a decision; or
- (iii) ask the Committee to consider significant changes to the report and/or recommendations through the AMC's formal reconsideration process. (See 3.3.10)

### **3.3.10. Formal reconsideration of the Committee's report**

An intern training accreditation authority may seek formal reconsideration of the Committee's report and/or recommended decisions.

Reconsideration is undertaken by the Prevocational Standards Accreditation Committee. The intern training accreditation authority must lodge a request for reconsideration in writing with the Executive Officer of the Committee within 14 days of receiving the Committee's report.

Within 30 days of receiving the Committee's report and recommended decision, the intern training accreditation authority must identify the areas of concern, and provide a full explanation of the grounds for reconsideration and any additional material considered relevant to the reconsideration.

The Prevocational Standards Accreditation Committee will discuss the request for reconsideration either at its next scheduled meeting or by special arrangement. The Committee will determine the process necessary to undertake the reconsideration.

The Committee considers the accreditation report and recommendations, the material supplied by the intern training accreditation authority, and any additional material and documentation agreed by the Committee. The Committee finalises its report and accreditation recommendations. Following its meeting, the Committee will advise the intern training accreditation authority in writing of its response to the request for reconsideration and provide a copy of its final report and recommendations.

### **3.3.11. Decision on accreditation**

Having considered the Committee's report and recommendations, the AMC makes its accreditation decision. The AMC will determine an accreditation outcome generally in accordance with the possible outcomes in section 5.

The AMC notifies the intern training accreditation authority. If the decision is to refuse accreditation the intern training accreditation authority is advised of the reasons for the decision and that it may seek internal review (See 3.3.12).

The AMC notifies the Medical Board of Australia of its decision and provides the accreditation report to them.

The Committee's report is a public document. If the decision is to refuse accreditation, the decision and report will not be made public until after the time has passed for seeking internal review, or if internal review is sought, until it is completed.

### 3.3.12. Internal review of a decision to refuse accreditation

An intern training accreditation authority must make any request for an internal review of a decision to refuse accreditation in writing to the AMC Chief Executive Officer within 30 days of receiving notice of this decision. A fee applies to the internal review process.

The request for internal review must provide a detailed explanation of each reason which the intern training accreditation authority claims justifies a different decision, together with all supporting material that the intern training accreditation authority relies on.

The reasons for seeking review would include (but are not limited to) matters such as:

- (i) that relevant and significant information, whether available at the time of the original decision or which became available subsequently, was not considered or not properly considered in the making of the decision to refuse accreditation;
- (ii) that irrelevant information was considered in the making of the decision to refuse accreditation;
- (iii) that AMC procedures that relate to the making of the decision, as described in this document, were not observed;
- (iv) that the original decision was clearly inconsistent with the evidence and arguments put before the authority making the original decision; or
- (v) that an error in law or in due process occurred in the formulation of the original decision.

The AMC will establish a review committee comprising members with appropriate qualifications and experience which will meet as required to consider any request for a review of a decision to refuse accreditation. The review committee will not include any person on the original assessment team.

The review committee will determine the process to be undertaken for the review and will inform the intern training accreditation authority of that process and the timeframe.

The review committee considers the Prevocational Standards Accreditation Committee's final report and recommendations, all submissions by the intern training accreditation authority during the original process and the materials and submissions made by the intern training accreditation authority as part of the request for internal review. The review committee may seek further information from the assessment team, the Prevocational Standards Accreditation Committee, the intern training accreditation authority or AMC staff.

The review committee may recommend that AMC Directors:

- (i) confirm the decision which is the subject of the review;
- (ii) revoke the decision and refer it the Prevocational Standards Accreditation Committee for further consideration (either in whole or in part); or
- (iii) revoke the decision and replace it with another decision.

The review committee may also recommend that AMC Directors waive part or all of the costs associated with the review.

The Directors consider the review committee's recommendation and make its decision on the accreditation. The Directors notify the intern training accreditation authority, and the Medical Board of Australia of the decision.

## 4. AMC monitoring of accredited programs

### 4.1 Purpose of AMC monitoring

Once it has accredited an intern training accreditation authority and its programs of study, the AMC monitors them to ensure they continue to meet the *Domains for Assessing Accreditation Authorities*.

The principal monitoring mechanisms are structured progress reports, comprehensive reports and the full accreditation assessment every eight years. In addition, the AMC expects that accredited intern training accreditation authorities will report at any time on matters that may affect the accreditation status, such as a change to capacity to meet the national standards, or any change that may meet the definition of a major change to the program. (See 3.2)

If at any time the AMC has reason to believe that changes are occurring or planned in the accreditation authority or its work that may affect the authority's accreditation status, it may seek information from the accreditation authority in writing.

### 4.2 Progress reports

The aim of the annual progress reports is to enable the AMC to monitor accredited intern training accreditation authorities and their programs between formal accreditation assessments. The reporting requirement is in no way intended to inhibit new initiatives or the gradual evolution of programs of study in response to ongoing review and evaluation by the intern training accreditation authority.

The AMC may require additional reports of an intern training accreditation authority granted a shorter period of accreditation or which has conditions on its accreditation.

In their progress reports, intern training accreditation authorities:

- inform the AMC of their response to AMC conditions on their accreditation, recommendations for improvement;
- provide data concerning the work program for the next twelve months;
- inform the AMC of significant changes, made or planned, in any area covered by *Intern training – Domains for assessing accreditation authorities*.

AMC staff provides each intern training accreditation authority with an outline for the progress report about four months before the report is due.

#### 4.2.1. Consideration of reports

The report is considered by the Prevocational Standards Accreditation Committee.

#### 4.2.2. Decision on progress reports

The Prevocational Standards Accreditation Committee will determine whether:

- (i) the report indicates that the program and accreditation authority continue to meet the domains for assessing accreditation authorities;
- (ii) further information is necessary to make a decision; or
- (iii) the accreditation authority may be at risk of not satisfying the domains for assessing accreditation authorities.

If the report is considered satisfactory, the intern training accreditation authority is advised. The AMC provides details of any matter to be addressed in the next progress report or in

supplementary information, and any conditions or recommendations which have been satisfied and do not need to be addressed again.

If the Committee needs more information to make a decision on the progress report, it advises the intern training accreditation authority of the relevant national standards, the information required and a date for submission. The Committee may decide that a meeting with representatives of the intern training accreditation authority is necessary to discuss the AMC's requirements.

If the Committee considers that the intern training accreditation authority may be at risk of not satisfying the national standards, then it invokes the AMC unsatisfactory progress procedures. (See 4.4)

If the Committee's consideration of a progress report results in a recommendation to change the accreditation status of a program and its accreditation authority, or identifies major changes to the accredited program or accreditation authority, the Committee will advise the accreditation authority and outline the procedures the AMC will follow. All such actions will be reported to the AMC Directors. The AMC Directors will report any changes to accreditation status to the Medical Board of Australia.

### **4.3 Comprehensive report for extension of accreditation**

Each AMC accreditation report indicates the year in which the accreditation of the intern training accreditation authority and its programs will expire. The accreditation report will also indicate if the intern training accreditation authority is able to seek extension of the accreditation before the next reaccreditation assessment by an AMC team. The AMC considers requests for extension via a comprehensive report.

In the comprehensive report for extension of accreditation, the intern training accreditation authority is expected to provide evidence that it continues to meet the national standards, and that it has maintained its standard of education and of resources. The report also provides an appraisal of the developments since accreditation, and information on plans leading up to the next AMC reaccreditation.

If, on the basis of the report, the Prevocational Standards Accreditation Committee decides that the intern training accreditation authority is continuing to satisfy the domains for assessing accreditation authorities, it may recommend that the AMC Directors extend the accreditation of the intern training accreditation authority and its programs. The period of extension possible is usually three years, taking accreditation to the full period which the AMC will grant between assessments, which is eight years. At the end of this extension, the intern training accreditation authority undergoes a reaccreditation assessment.

### **4.4 Unsatisfactory progress procedures**

A goal of the accreditation process is to encourage further improvements and developments in processes of the accreditation authority. It is expected that during an assessment, in addition to identifying the relevant achievements and strengths, the intern training accreditation authority and the assessment team will identify areas for improvement.

The progress reporting process, described above, is the principal mechanism by which intern training accreditation authorities keep the AMC informed of their actions between formal accreditation assessments.

The procedures described below relate to circumstances where the AMC, on the basis of progress reports or other material, considers the intern training accreditation authority and its

program no longer may meet the domains for assessing accreditation authorities or may have difficulty meeting the domains in the future.

The AMC will investigate the concerns following the process outlined below. If this investigation leads the AMC to reasonably believe the program and the intern training accreditation authority no longer meet the domains for assessing accreditation authorities, the AMC will either impose conditions on the accreditation or revoke the accreditation.

The AMC will inform the intern training accreditation authority of its concerns and the grounds on which they are based. The accreditation authority will be given an opportunity to respond to the statement of concerns. The AMC will inform the Medical Board of Australia of its concerns and the grounds on which they are based, and the process to be implemented.

A team comprising the Chair of the Prevocational Standards Accreditation Committee or nominee, one member of the original assessment team and the Secretary of the Committee will normally investigate the concerns. Additional members with specific expertise may be appointed depending on the conditions set.

The team's discussions with the intern training accreditation authority will focus on actions necessary to meet the requirements in *Intern training – Domains for assessing accreditation authorities* in a defined period of time. The team may ask the accreditation authority to arrange meetings with other bodies as part of their discussions.

The team reports to the Prevocational Standards Accreditation Committee, which may recommend to the AMC Directors:

- (i) that the concerns are being addressed and that the AMC continue accreditation for a defined period subject to satisfactory progress reports;
- (ii) that the concerns can be addressed by imposing conditions on the accreditation and that the AMC continue accreditation for a defined period subject to satisfactory progress reports and to the conditions being met within this period; or
- (iii) that the concerns are not being addressed and/or are unlikely to be addressed within a reasonable timeframe and the domains for assessing accreditation authorities are not satisfied. The AMC will revoke the accreditation.

The same processes as are outlined above for consultation with the intern training accreditation authority, formal reporting and review of reports will apply in relation to these unsatisfactory progress procedures.

The AMC advises the intern training accreditation authority and the Medical Board of Australia of its decision.

## 5. Accreditation outcomes

The range of options available to the AMC in granting accreditation is set out below. There are different options available for the accreditation of an established intern training accreditation authority, accreditation of a new authority or intern training accreditation process, and major changes in established authorities or their processes.

The AMC may grant accreditation with or without conditions. Where it imposes conditions, the continuing accreditation is subject to it satisfying the conditions.

The AMC may grant accreditation if it is reasonably satisfied that the intern training accreditation authority meets the domains for assessing accreditation authorities. The AMC may also grant accreditation if the authority substantially meets the domains, and imposing accreditation conditions will lead to the domains being met within a reasonable time.

Each intern training accreditation authority will undergo accreditation assessment by an AMC team as least every eight years. Following an assessment by an AMC team, the AMC grants accreditation for a maximum period of five years. This period can be extended up to eight years (that is for an additional three years) on the basis of a written comprehensive report in the year the accreditation expires. At the end of the eight-year period, the intern training accreditation authority undergoes a reaccreditation assessment.

### 5.1 Accreditation of an intern training accreditation authority

The accreditation options are:

- (i) Accreditation for a period of five years subject to satisfactory progress reports. In the year the accreditation ends, the intern training accreditation authority will submit a comprehensive progress report for extension of accreditation. Subject to a satisfactory report, the AMC may grant a further period of accreditation, up to a maximum of three years, before a new accreditation assessment.
- (ii) Accreditation for five years subject to certain conditions being addressed within a specified period and to satisfactory progress reports. In the year the accreditation ends, the intern training accreditation authority will submit a comprehensive report for extension of accreditation. Subject to a satisfactory report, the AMC may grant a further period of accreditation, up to a maximum of three years, before a new accreditation review.
- (iii) Accreditation for shorter periods of time. If significant deficiencies are identified or there is insufficient information to determine that the intern training accreditation authority and its processes satisfy the Domains for Assessing Accreditation Authorities, the AMC may award accreditation with conditions and for a period of less than five years. At the conclusion of this period, or sooner if the intern training accreditation authority requests, the AMC will conduct a follow-up review concentrating on the conditions set in the previous AMC accreditation to consider extending the accreditation.  
Should the accreditation be extended to five years, in the year the accreditation ends, the intern training accreditation authority will submit a comprehensive report for extension of the accreditation. Subject to a satisfactory report, the AMC may grant a further period of accreditation, up to the maximum possible period, before a new accreditation assessment.
- (iv) Accreditation may be refused where the intern training accreditation authority has not satisfied the AMC that it can meet the domains of the quality framework. The AMC would take such action after detailed consideration of the impact on the health care system and

on individuals of withdrawal of accreditation and of other avenue for correcting deficiencies.

If the AMC withdraws accreditation, it will give written notice of the decision, its reasons, and the procedures available for review of the decision within the AMC.

An intern training accreditation authority that has its accreditation refused or revoked may re-apply for accreditation. The organisation must first satisfy the AMC that it has the capacity to deliver intern training accreditation services that meet the domains of the quality framework.

## **5.2 Accreditation of a major change in an established intern training accreditation authority**

The accreditation options are:

- (i) Accreditation for a period up to three years, subject to conditions being addressed within a specific period and depending on satisfactory annual progress reports. The conditions may include a requirement for follow-up assessments to review progress in implementing the major change. In the year the accreditation ends, the intern training accreditation authority will submit a comprehensive report for extension of accreditation. Subject to a satisfactory report, the AMC may grant a further period of accreditation, up to the maximum possible period, before a new accreditation assessment.
- (ii) Accreditation will be refused where the intern training accreditation authority has not satisfied the AMC that it can implement the major change at a level consistent with domains for assessing accreditation authorities. The AMC will give the accreditation authority written notice of the decision and its reasons, and the procedures available for review of the decision within the AMC. (See 3.3.12)

Where the AMC refuses accreditation, the organisation may re-apply for accreditation. It must first satisfy the AMC that it has the capacity to address the AMC's concerns by completing a Stage 1 accreditation submission.

## **5.3 Accreditation of a new intern training accreditation authority**

The accreditation options are:

- (i) Accreditation for a period up to three years, subject to conditions being addressed within a specific period and depending on satisfactory annual progress reports. The conditions may include a requirement for follow-up assessments to review progress in implementation. In the year the accreditation ends, the intern training accreditation authority will submit a comprehensive report for extension of accreditation. Subject to a satisfactory report, the AMC may grant a further period of accreditation, up to the maximum possible period, before a new accreditation assessment.
- (ii) Accreditation will be refused where the organisation has not satisfied the AMC that it can meet the domains for assessing accreditation authorities. The AMC will give the organisation written notice of the decision and its reasons, and the procedures available for review of the decision within the AMC. (See 3.3.12)

Where the AMC refuses accreditation, the organisation may re-apply for accreditation. It must first satisfy the AMC that it has the capacity to address the AMC's concerns by completing a Stage 1 accreditation submission.

## **5.4 Procedures following the accreditation decision**

After it has made its accreditation decision, the AMC provides a report to the Medical Board of Australia.

Having made a decision on accreditation of an intern training accreditation authority, the AMC keeps itself apprised of developments in the accredited authority through regular progress reports.

The AMC has a separate series of procedures that relate to circumstances where the Prevocational Standards Accreditation Committee considers, on the basis of progress reports or other material available to it, that the intern training accreditation authority's progress against its accreditation conditions is unsatisfactory and/or that the intern training accreditation authority may be at risk of not satisfying the quality framework.



## 6. Review of domains and procedures for assessing accreditation authorities

The process for reviewing the AMC domains for assessing accreditation authorities and these procedures provides opportunities both for stakeholders to contribute and for the AMC to build on the experience of its accreditation committees. The role of the assessment teams which apply the domains and procedures for assessing accreditation authorities in particular assessments is separate to this development role.

The AMC gathers feedback after each accreditation assessment from the AMC team and from the intern training accreditation authority. AMC staff submit matters concerning the interpretation of the domains for assessing accreditation authorities to the Prevocational Standards Accreditation Committee. The assessment team chair submits feedback on the process to the Committee.

AMC staff collate feedback from the AMC team and from the intern training accreditation authority after each assessment by an AMC team.

- Following each assessment, the Prevocational Standards Accreditation Committee receives a report from AMC staff on any questions concerning the interpretation of the national standards and the domains, and feedback from the assessment team chair on the assessment process. The Secretariat keeps a log of minor procedural changes agreed and reports to the Prevocational Standards Accreditation Committee on their implementation.
- The committee may recommend to Directors changes to the explanatory notes accompanying the national standards and/or the domains for assessing accreditation authorities.
- Should the committee decide that one or more of the domains or standards requires clarification, it recommends a review to Directors, following the process described below.
- Should the committee identify the need for a change to the process described in these Guidelines, it recommends a review to Directors, following the process described below.

The AMC reviews the full set of domains for assessing accreditation authorities as required and at least every five years.

The AMC reviews the procedures in full at least every five years.

The review of the domains for assessing accreditation authorities and/or procedures is completed by an AMC working party established for the process. The process is as follows:

- The Prevocational Standards Accreditation Committee discusses the domains and/or procedures, and presents to the Directors the plan for the review, outlining the proposed scope and timeframe.
- The Prevocational Standards Accreditation Committee places information on the review and consultation processes on its website.
- A working party is established, with an experienced AMC assessor as chair. The working party includes nominees of key stakeholders. Among other things, the working party consults stakeholders, reviews relevant national and international reports and policies, reviews AMC accreditation reports and committee reports, and drafts proposals for change to the domains and procedures, and prepares a summary of stakeholder responses to them.

- The Prevocational Standards Accreditation Committee considers the changes, and submits them to AMC Directors.

## **Approval**

Australian Medical Council 16 December 2013



