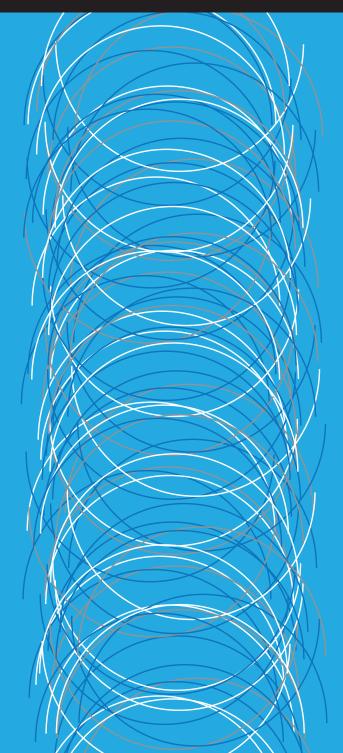
Procedures for Assessment and Accreditation of Intern Training Accreditation Authorities by the Australian Medical Council





Prevocational Standards Accreditation Committee October 2019

Approval

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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 reports to AMC Directors. It performs functions in connection with standards of medical education and training, specifically standards for the prevocational medical education phase, and accreditation of programs for international medical graduate assessment.

The Committee:

- (i) Develops, monitors and reviews standards and procedures relating to the accreditation of programs and providers in the prevocational medical education phase.¹
- (ii) Oversees the AMC's accreditation activities for the preovcational phase of medical education.
- (iii) Supports improvement in medical education in Australia and New Zealand.

The Committee includes members appointed after consultation with the Australian Health Ministers' Advisory Council; the Australian Medical Association; the Medical Board of Australia and the Confederation of Postgraduate Medical Education Councils. The Committee also includes a doctor in training, a graduate of a workplace based assessment program, members with a background in, and knowledge of, health consumer issues and a position to enhance the contribution of Aboriginal and Torres Strait Islander people to the AMC's accreditation processes.

1.3 Assessment teams

The Prevocational Standards Accreditation Committee constitutes an assessment team to assess each intern training accreditation authority. Teams report to the Prevocational Standards 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;

¹ The *Health Practitioner Regulation National Law* uses the term *education provider* for organisations that may be accredited to provide education and training for a health profession. The term encompasses universities, tertiary education institutions, or other institutions or organisations that provide vocational training; or specialist medical colleges or other health profession colleges. For consistency, the AMC uses the National Law's terminology in its standards and guidelines.

• preparing an accreditation report that assesses the authority against the domains.

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 separate statements on 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 relevant AMC accreditation Committee.

1.5 AMC advisory groups

There are circumstances where accreditation authorities require additional advice on AMC accreditation requirements. In these circumstances, with the agreement of the accreditation authority, the accreditation committee may recommend to the AMC Directors the establishment of an advisory group. The advisory group works with the accreditation authority to clarify the requirements that must be satisfied.

The advisory group does not:

- give detailed advice on how to manage the authority's business; it is expected that the authority will engage appropriate staff or consultants if such expertise is required;
- contribute to writing the authority's documentation or submissions to the AMC;
- make a recommendation on accreditation to the AMC.

The advisory group determines the frequency and means of contact with the accreditation authority.

The advisory group is required to keep the AMC accreditation committee informed of any plans for meetings or site visits.

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 AMC functions:

- to act as an external accreditation entity for the purposes of the Health Practitioner Regulation National Law;
- to advise and make 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.

The approved accreditation standards for the accreditation assessments covered by these procedures are at <u>https://www.amc.org.au/accreditation-and-recognition/assessment-accreditation-prevocational-phase-medical-education/national-internship-framework/</u>.

2.2 Purpose of AMC accreditation

The purpose of AMC accreditation 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 means of quality assurance of the phases of medical education.

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

- 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 organisation being accredited, and acknowledges its 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, healthcare consumers.

Diversity of approach is one of the strengths of medical training and education 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 accreditations

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 organisations 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 material 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) recognise each intern training accreditation authority's autonomy to set its 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) apply a code of conduct for members of assessment teams, progress report reviewers, committees and staff;
- (vi) 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;
- (vii) gather feedback on and evaluate its performance; and
- (viii) 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 to the organisaton under review.

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 intern training accreditation authority 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 these assessment processes.

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 on their appointment 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 additional 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 will decide how the member's interest in a particular item will be managed within guidelines provided by the AMC. 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 AMC will disclose all declared interests of the recommended team members to the intern training accreditation authority and seek the intern training accreditation authority's comments on the team membership. Having considered the interests declared and the intern training accreditation authority's comments, the accreditation committee makes a decision on the appointment of the team.

Where the intern training accreditation authority's view on the suitability of an appointment conflicts with the view of the accreditation committee, the committee will refer the appointment of the team to the AMC Directors for decision.

If a conflict of interest emerges for an assessor during an assessment, the team chair and executive officer 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 places 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 organisations and the date of the next accreditation assessment are posted on the AMC website.
- AMC accreditation reports are public documents.
- The AMC posts an annual summary of its response to progress reports submitted by accredited intern training accreditation authorities on the AMC website.
- The AMC issues a statement after it has made an accreditation decision and publishes 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 AMC contact details will be included 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 does not have a role in investigating specific complaints of individual junior doctors, supervisors or health services about the intern training accreditation authority. The *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.

From time to time, the AMC receives questions and/or complaints about the organisations it has accredited or is assessing for accreditation. The AMC policy, *Complaints about programs of study, education providers and organisations accredited by the Australian Medical Council* available on the AMC website applies.

The AMC distinguishes between:

 comments or 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 organisations being assessed. Matters which might be characterised as complaints received during an assessment process will be treated as a part of the assessment.

and

• complaints received outside a formal assessment process, which may be relevant to the AMC's monitoring role (see section 4).

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 post allocation or assessment outcomes.
- b. A systemic complaint which may evidence some systemic matter that could signify a failure of a program or provider to meet accreditation standards.

The AMC complaints process relates to systemic complaints.

2.11 Fees and charges

The AMC undertakes assessments on a cost-recovery basis.

AMC policy is to charge individual providers the direct costs of the assessment of their program(s) including the monitoring of accredited programs. A charge applies to any AMC process which may result in a new decision on a program's accreditation. Costs are related to the work of any assessment team or advisory group (including AMC direct staff support for that work), and the work of the AMC accreditation committee.

Fees for accreditations of intern training accreditation authorities undertaken from January 2016 are as follows:

Advisory group: AMC to advise case-by-case

AMC advisory groups work on a cost-recovery basis.

Assessment of new intern training accreditation authority: \$2,500

The fee covers all associated work in relation to the review of the Stage 1 application or application for initial accreditation.

Accreditation assessment costs: AMC to advise case-by-case

The AMC undertakes assessments on a cost-recovery basis. The Medical Board of Australia has agreed to fund the AMC for the direct cost of these assessments, such as the travel and accommodation of team members. The AMC provides cost estimates to the Medical Board as part of its annual budget processes.

All fees are GST exclusive.

3. The administration of the assessment process

The AMC has developed 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 material change in established intern training accreditation authorities;
- assessment for the purposes of **reaccreditation** of established intern training accreditation authorities;
- or where the accreditation committee considers it necessary, as part of the review of a comprehensive report for extension of accreditation (see section 4.3).

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.

In an accreditation assessment, the AMC appoints 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

The AMC supports innovation and evolution in medical education and training. It follows that the accreditation process is open to new approaches to management of intern training accreditation functions. It is the responsibility of the applicant to demonstrate how their plans will meet *Intern Training - Domains for assessing accreditation authorities*, and to demonstrate how their experience is relevant to the proposal.

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. The AMC would not proceed to an accreditation

assessment of an intern training accreditation authority without evidence that the intern training accreditation authority is supported to undertake 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 8 months in advance of intended change.

Once the AMC has been advised of the plans, the AMC will provide a guide for completion of an initial accreditation assessment. In the initial accreditation process the AMC Prevocational Standards Accreditation Committee assesses a written submission addressing the five domains of the *Intern Training - Domains for assessing accreditation authorities.*

3.2.2. First stage assessment of a material change in an established intern training accreditation authority

Material 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 material 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 some of the changes described below will need to be assessed by an AMC team before they are introduced, the AMC requests at least 8 months' notice of the intended introduction of the change.

Definition of a material change in an established accreditation authority

Any of the following might constitute a material 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' activities or program in response to initiatives and review would not be considered a material 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 material change. If it is, the Committee will also decide whether the material change can be approved for introduction within the current accreditation of the program or is of comprehensive impact that would require reaccreditation.

The AMC will advise the intern training accreditation authority of its decision, including whether the assessment will be a paper-based review or require discussions with the intern training accreditation authority.

In the event that the AMC 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 its new functions and role, governance arrangements, the resources available to deliver the functions, accreditation processes, transitional arrangements and management of risk during the transition, and evidence of engagement of stakeholders in the changes. The Prevocational Standards Accreditation Committee will consider this submission

and make a recommendation to the AMC Directors on accreditation 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 its 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 new development submissions within two 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 AMC grants accreditation if the submission demonstrates that the intern training accreditation authority meets the domains or that it substantially meets the domains and setting conditions will lead to the domains being met in a reasonable timeframe.

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

- (i) the submission indicates that the authority will meet the domains for assessing authorities and initial accreditation is recommended (with or without conditions);
- (ii) further information is necessary to make a decision; or
- (iii) the intern training accreditation authority may not satisfy the domains and initial accreditation is not recommended.

When it accredits a new intern training accreditation authority or a material change in an established authority, the AMC will also propose a date for for the assessment of the intern training accreditation authority by an AMC team. The procedures for these assessments are outlined in section 3.3 of this document.

3.3 Assessment by an AMC team

The AMC has developed standard procedures which apply to all assessments conducted by an AMC assessment team. The types of AMC assessment are detailed in section 3.1.

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. This submission 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 submission by providing copies of the intern training accreditation authority's progress reports and relevant correspondence between the AMC and the education provider (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 relevant accreditation committee following a review of the declared interests of proposed team members and 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 also 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.

Following the meeting, AMC staff confirm in writing the team's accreditation program and request for any additional information.

3.3.5. Stakeholder consultation

The AMC invites stakeholder submissions 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 also gathers feedback 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

The AMC team will determine whether or not 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 its upcoming accreditation activities, and the healthcare facilities undergoing accreditation. 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 accreditation program. 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. The AMC provides the final statement (revised to correct errors) to the intern training accreditation authority and the team members. This statement is confidential to the intern training accreditation authority and the AMC.

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 five weeks of the conclusion of the review. More time may be required depending on the complexity of the assessment. The AMC invites the intern training accreditation authority 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's draft report will include the team's recommendations to the committee on proposed conditions on accreditation. The AMC will provide an opportunity for the intern training accreditation authority to discuss with AMC staff and the team chair the timeframes for meeting any draft conditions.

The team finalises its draft report 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 final 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 the report and recommendations to the AMC Directors for an accreditation 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. 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 listed 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 material 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 significant changes, made or planned, in any area covered by *Intern training – Domains for assessing accreditation authorities* and respond to any AMC recommendations for improvement or monitoring items;
- respond to AMC conditions on their accreditation, recommendations for improvement and AMC questions concerning information in earlier progress reports;
- provide data concerning the work program for the next twelve months.

AMC staff provide each intern training accreditation authority with an outline for the progress report at least 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 domains or 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 material 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. 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

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 and invite the accreditation authority 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 an AMC staff member 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; or
- (ii) that the concerns can be addressed by imposing conditions on the accreditation. In this case the AMC will grant ongoing 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 material 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 undergoes accreditation assessment by an AMC team at 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. Accreditation may also be subject to certain conditions being addressed within a specified period and to satisfactory progress reports. (See 4) 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 a shorter period of time. If significant deficiencies are identified or there is insufficient information to determine that the intern training accreditation authority satisfies the domains for assessing accreditation authorities, the AMC may grant 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.

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.

(iii) Accreditation may be refused or revoked where the intern training accreditation authority has not satisfied the AMC that it can meet the domains for assessing accreditation authorities. The AMC would take such action after detailed consideration of the impact on the healthcare system and on individuals of withdrawal of accreditation and of other avenues 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 for assessing accreditation authorities.

5.2 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.

5.3 Accreditation of a material change to 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 material 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 material 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.

5.4 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 domains for assessing accreditation authorities.

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 AMC gathers feedback after each accreditation assessment. AMC staff collate feedback 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.

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.

AMC staff make minor procedural changes agreed to as part of the review process and report to the Prevocational Standards Accreditation Committee on their implementation.

The accreditation committee may recommend to AMC 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 published process, it may recommend a review to Directors, following the process described below.

The AMC reviews both the full set of domains for assessing accreditation authorities and the accredittaion procedures 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.
- If the AMC is planning to review the domains or the national standards, it advises the Medical Board of Australia. The AMC places information about the review and consultation processes on its website.
- The AMC establishes a working party, with an experienced AMC accreditation assessor as chair. The working party includes nominees of key stakeholder bodies. Among other things, the working party consults stakeholders; reviews relevant AMC, national, and international reports and policies 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. The AMC Directors submit changes to the domains for assessing accreditation authorities and new domains to the Medical Board of Australia for approval.