

Procedures for AMC Accreditation of CPD Homes

Approval

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Acknowledgement of country



The Australian Medical Council acknowledges Aboriginal, Torres Strait Islander Peoples and Māori Peoples as the Traditional Custodians of the lands the AMC works upon.

We pay respects to Elders past, present and emerging and acknowledge the ongoing contributions that Indigenous Peoples make to all communities. We acknowledge the government policies and practices that impact on the health and wellbeing of Indigenous Peoples and commit to working together to support healing and positive health outcomes.

The AMC is committed to improving outcomes for Aboriginal, Torres Strait Islander and Māori Peoples through its assessment and accreditation processes including equitable access to health services for First Nations Peoples.

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Introduction

The Registration standard: Continuing professional development

In July 2021, Australia's Health Ministers approved an updated Medical Board of Australia (the Board) *Registration standard: Continuing professional development (CPD)* which outlines the Board's minimum requirements for CPD for medical practitioners.

Registered medical practitioners who are engaged in any form of practice are required to participate regularly in CPD that is relevant to their scope of practice to maintain professional currency, and support them to maintain, improve and broaden their knowledge, expertise and competence, and develop the personal and professional qualities required throughout their professional lives.

The new registration standard is effective from 1 January 2023.

Legislative framework

The Medical Board of Australia's *Registration standard: Continuing professional development* requires, among other things, that medical practitioners meet, in each calendar year, the requirements of a CPD program of a CPD home that is accredited by the AMC.

The AMC has been appointed to conduct accreditation functions 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.

The approved accreditation criteria relevant for the accreditation assessments covered by these procedures are at <https://www.amc.org.au/accreditation-and-recognition/accreditation-standards-and-procedures/>.

Introduction

Figure 1.

Overview of the accreditation criteria



Criterion 1

CPD home context and governance

The CPD home has appropriate governance structures, expertise and resources to be a CPD home providing a CPD program(s) that supports meaningful professional development. The home provides clear information about its CPD program(s), requirements and costs.

Criterion 2

Provision of the CPD program

The CPD home provides a CPD program(s) that enables practitioners to meet the requirements of the Registration standard: CPD and has effective systems, policies and processes to provide the CPD program(s).

Criterion 3

Support and guidance

The CPD home provides guidance to help practitioners identify high quality CPD activities that support development across the breadth of their scope(s) of practice.

Criterion 4

Auditing and reporting

The CPD home complies with the Medical Board of Australia's auditing and compliance reporting requirements, and the AMC's accreditation requirements for its CPD program(s).

When the AMC assesses an organisation against the approved accreditation criteria and decides to grant accreditation, the AMC provides its accreditation report to the Medical Board of Australia.

The AMC has been appointed by the Board as the body responsible for accrediting CPD homes.

The AMC accredits organisations to be a CPD home, subject to organisations continuing to demonstrate that they meet the accreditation criteria.

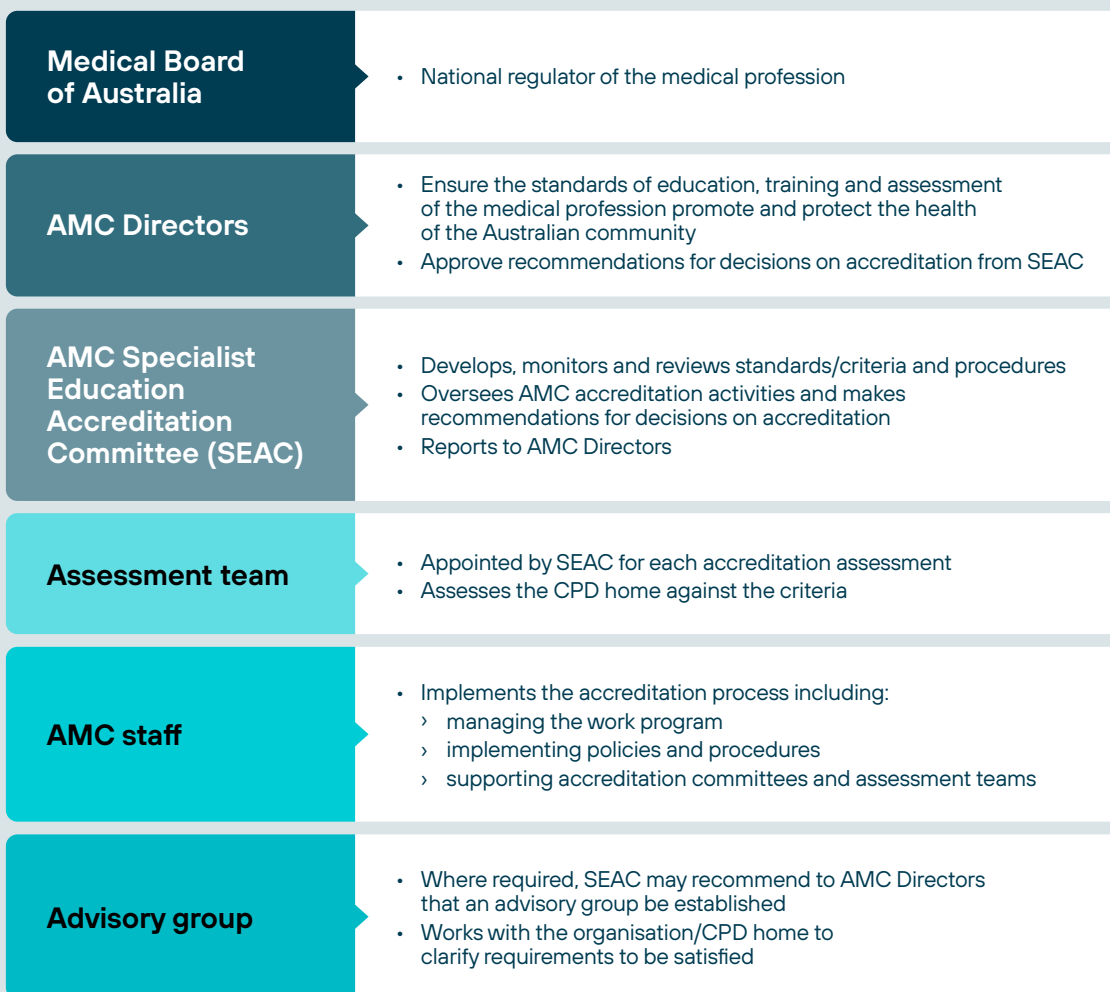
Accredited CPD homes must act in accordance with the *Criteria for AMC Accreditation of CPD Homes*.

The AMC will provide an annual update to the Medical Board of Australia on whether accredited CPD homes continue to meet the accreditation criteria.

Management of the accreditation process

Figure 2.

Groups involved in managing the accreditation process



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 Specialist Education Accreditation Committee

The Specialist Education Accreditation Committee reports to AMC Directors. It performs functions in connection with standards of medical education and training, specifically specialist medical education, education and training for endorsement of registration, continuing professional development, and specialist international medical graduate assessment.

The Committee includes members appointed after consultation with the Health Chief Executives Forum; the Australian Medical Association; the Council of Presidents of Medical Colleges; the Medical Council of New Zealand; the Medical Board of Australia; Universities Australia and Medical Deans Australia and New Zealand. The Committee also includes members from other related AMC committees; members who hold senior positions at a health service in Australia and New Zealand; a doctor in training and a specialist doctor who has recently completed training; members with a background in, and knowledge of, health consumer issues; and, two positions for Aboriginal, Torres Strait Islander and Māori members.

1.3 Assessment teams

The Specialist Education Accreditation Committee constitutes an assessment team to assess each organisation that has applied to become a CPD home. Teams report to the Specialist Education Accreditation Committee. They work within the accreditation policy and guidelines of the AMC.

Teams are responsible for:

- objectively assessing the organisation against the approved accreditation criteria;
- with the organisation, developing a program for the assessment;
- preparing a report that assesses the organisation against the accreditation criteria.

Observers are permitted on AMC assessments, subject to the approval of the chief executive of the organisation and the chair of the AMC team. The AMC's expectations of observers are described in separate statements.

1 Management of the accreditation process

1.4 AMC staff

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

The AMC asks organisations undergoing accreditation to correspond with the 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 organisations require additional advice on AMC accreditation requirements. In these circumstances, with the agreement of the organisation, the accreditation committee may recommend to the AMC Directors the establishment of an advisory group.

The advisory group works with the organisation to clarify the requirements that must be satisfied.

The advisory group does not:

- give detailed advice on CPD program development, planning or provision; it is expected that the organisation will engage appropriate staff or consultants if such expertise is required;
- contribute to writing the organisation'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 organisation.

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

The organisation pays the direct cost of the work of the advisory group.

The conduct of the accreditation process

2.1 Purpose of AMC accreditation process

The purpose of the accreditation process is to accredit CPD homes so they provide quality assured CPD programs that are robust, monitored and evaluated. Accreditation of CPD homes is key to ensuring all practitioners participate in a structured CPD program with support and guidance available.

In Australia, accreditation based on a process of regular review by an independent accreditation 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:

- 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 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 and the organisation and its professional development program(s).
- v. Accreditation, as a quality assurance mechanism, benefits medical practitioners, employers 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 the ways in which accreditation requirements are met.

2.2 Scope of AMC accreditations

The AMC accredits organisations to become CPD homes that will provide CPD programs for medical practitioners. The overarching principle is that organisations wishing to be CPD homes demonstrate commitment to supporting high quality medical practice by providing a high quality CPD program(s) for medical practitioners that:

- supports practitioners to tailor their CPD to their individual learning needs
- provides assurance to the community that practitioners' CPD is designed to improve their practice.

All AMC assessments are based on the organisation being accredited demonstrating that it meets or substantially meets the requirements specified in the *Criteria for AMC Accreditation of CPD Homes*.

2 The conduct of the accreditation process

2.3 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 CPD homes or material changes to established CPD homes, into this work program.

The AMC sets an accreditation work program each year.

2.4 AMC conduct

The AMC will:

- i. recognise each CPD home'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, monitoring submission reviewers, committees and staff apply criteria and procedures in a consistent and appropriate fashion;
- v. apply a code of conduct for members of assessment teams, monitoring submission reviewers, committees and staff;
- vi. review its processes and the accreditation criteria 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 criteria are met) and peer review to promote high standards of medical education, stimulate self-analysis and assist the organisation to achieve its objectives. Accreditation is conducted in a collegial manner that includes consultation, advice and feedback to the organisation under review.

In the accreditation of CPD homes, the AMC:

- focuses on the achievement of objectives, maintenance of criteria, 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 conditions and recommendations; and
- undertakes a cycle of assessments, with a full assessment of each program at least every ten years.

2.5 Contribution of medical practitioners to AMC accreditation processes

The AMC considers it important that those completing CPD programs have opportunities to contribute to these assessment processes.

Opportunities for medical practitioners to contribute to the accreditation process include:

- input into the AMC's development and review of the accreditation criteria, policy and procedures;
- membership of the AMC accreditation committees;
- membership of AMC assessment teams;
- AMC surveys, submissions and/or discussions.

2 The conduct of the accreditation process

2.6 Conflict of interest

Members of AMC committees are expected to make decisions responsibly, and to apply standards and criteria 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, and continuing professional development 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 a (potential) CPD home on its CPD program 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 Specialist Education 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 persons recommended to the organisation being accredited and seek the organisations comments on the team membership. Having considered the interests declared and the organisation's comments, the accreditation committee makes a decision on the appointment of the team.

Where the organisation's view on the suitability of an appointment conflict 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 during relevant discussion, or altering the assessment program. Any such conflicts, and the course of action taken, will be reported to the Specialist Education Accreditation Committee.

2.7 Confidentiality

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

Organisations are advised to prepare their accreditation submission as a public document. To facilitate stakeholder consultation (see section 3.3.5) the AMC asks organisations to make their submission publicly available on their website. Organisations may redact some information, for example financial information, that may not be publicly available. Where this is the case, it must be made clear on the published submission that content has been redacted and for what reason.

The AMC requires the members of its committees and assessment teams to keep as confidential the material provided by organisations 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.

2 The conduct of the accreditation process

The AMC may conduct research based on information contained in accreditation submissions, monitoring submissions, 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 organisations it will seek the organisations' permission.

The AMC provides opportunities for organisations 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 organisation. The organisation 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 organisation of these plans.

2.8 Public material

AMC accreditation reports are public documents. The AMC also publishes the current status of accredited organisations and the date of the next accreditation assessment on the AMC website. Monitoring data may also be published.

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

2.9 Complaints

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 organisation being assessed. Matters which might be characterised as complaints received during an assessment process will be addressed 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 meeting the CPD program requirements of a home.
- b. A systemic complaint which may evidence some systemic matter that could signify a failure of a CPD home to meet accreditation criteria.

The complaints process relates to systemic complaints.

The AMC does not have a role in investigating the complaints of individual medical practitioners about the CPD home. It will not intervene on behalf of an individual complainant to address grievances relating to matters such as meeting the CPD program requirements of a home. The accreditation criteria require organisations accredited by the AMC to have processes for addressing grievances, complaints and appeals, and the AMC reviews these processes when conducting an accreditation assessment.

2 The conduct of the accreditation process

2.10 Fees and charges

The AMC undertakes accreditation assessments on a cost-recovery basis.

AMC policy is to charge individual organisations the direct costs of the assessment including the monitoring. A charge applies to any AMC process which may result in a new decision on an organisation'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 accrediting CPD homes are as follows. All fees are GST exclusive:

Submission for initial accreditation as a CPD home (applies to new organisations): \$6,500

The fee covers all work associated with the review of the submission for initial accreditation.

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

The AMC provides a cost estimate to the organisation at the commencement of the assessment.

The organisation seeking accreditation pays the direct cost of the assessment. Most costs are related to the work of any expert AMC group such as an accreditation team including AMC staff.

Deposit: \$2,000

The organisation is required to pay part of the fee as a deposit when lodging its accreditation submission.

The AMC issues an invoice for the remaining fee when it completes the assessment. Payment is due before the AMC makes the decision on the accreditation.

Annual monitoring submission: \$1,500

The AMC charges an annual monitoring fee for accredited CPD homes which covers the review and consideration of the annual monitoring submission.

Note: For AMC-accredited specialist medical college CPD homes, the cost of their training program accreditation assessment already includes a fee of 15% of the total assessment visit cost to contribute to the costs incurred by the AMC in making the training program accreditation decision and the ongoing review of monitoring submissions and reports on accreditation conditions relating to both the training program and CPD home accreditation.

Accreditation extension submission: \$5,000

The fee covers the review and consideration of an accreditation extension submission and subsequent accreditation decision.

Note: For AMC-accredited specialist medical college CPD homes, the cost of their training program accreditation extension submission will also include review and consideration of the accreditation extension submission for CPD home accreditation.

1. Fees current from July 2022.

The administration of the assessment process

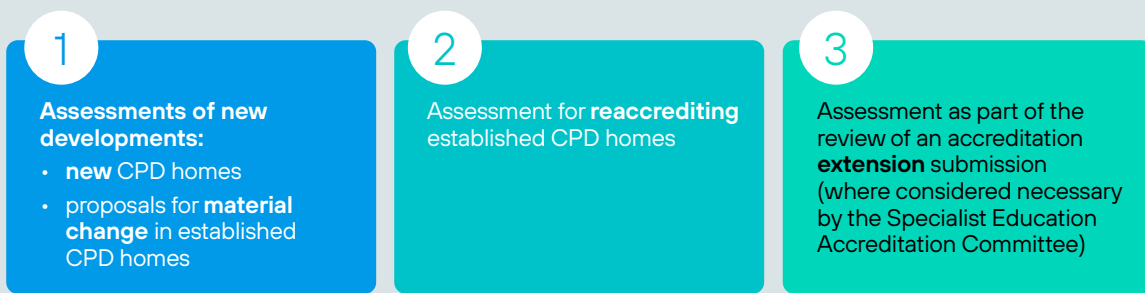
The AMC has developed standard procedures for assessing and accrediting CPD homes against the approved accreditation criteria.

Figure 3.

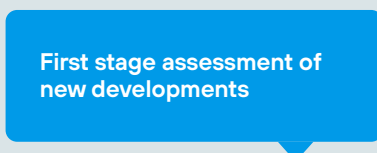
Assessment types including assessment of new developments and the assessment process



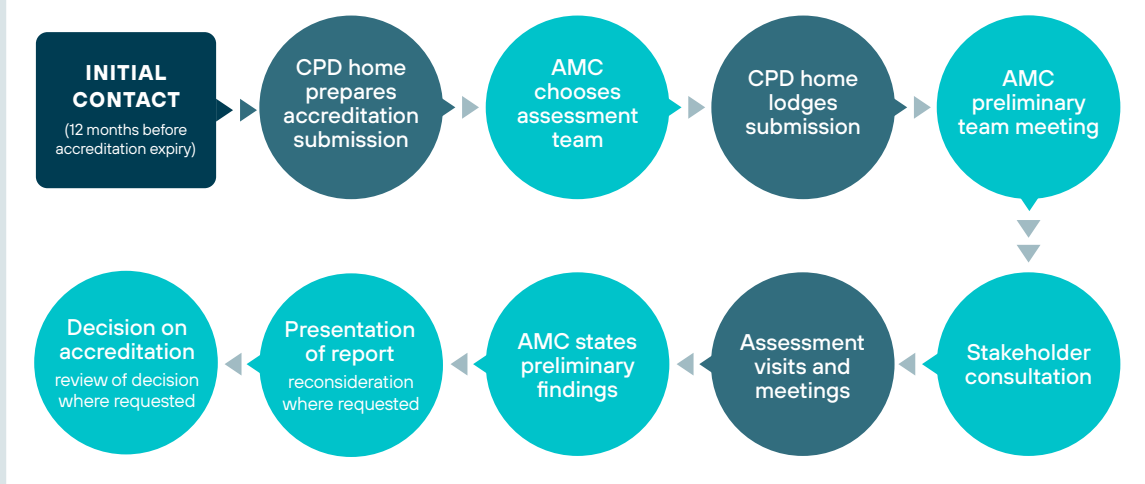
Types of assessments (3.1)



Assessment of new developments (3.2)



Assessment by an AMC team (3.3)



3 The administration of the assessment process

3.1 Types of assessments

The AMC undertakes assessments in the following circumstances:

- assessment of new developments including:
 - › assessment of **new** organisations seeking accreditation as a CPD home (submission for initial accreditation)
 - › assessment of proposals for **material change** in established CPD homes (dependent on the extent of the change)
- assessment for the purposes of **reaccreditation** of established CPD homes
- where the accreditation committee considers it necessary, as part of the review of an **accreditation extension submission** or **monitoring submission** (see sections 4.2 and 4.3).

In an accreditation assessment, the AMC appoints an AMC team which reviews the organisation's documentation, undertakes a program of meetings, and prepares a report.

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 the organisation's capability to comply with the approved accreditation criteria and the organisation's commitment to provide the CPD program(s).

3.2.1 Submission for initial accreditation as a CPD home

In its accreditation role, the AMC assures the quality of CPD homes and processes to ensure they provide CPD programs that are robust, monitored and evaluated. The AMC does not comment on the desirability or otherwise of new CPD homes.

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 accreditation criteria, and 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 CPD program commencement.

Once the organisation has notified the AMC of its intention, the AMC will provide a submission template for initial accreditation. The AMC judges the organisation's readiness for assessment on the basis of this submission. The submission must address each of the accreditation criteria and provide the requested evidence.

The Specialist Education Accreditation Committee reviews the submission following the process described in section 3.2.3.

3 The administration of the assessment process

3.2.2 Assessment of a material change in an established CPD home

Material changes to an accredited CPD home may affect accreditation status. CPD homes must inform the AMC prospectively of such developments. The regular monitoring submissions required of accredited CPD homes is one avenue for such advice. (See section 4). While plans for material change are evolving, the Specialist Education Accreditation Committee is able to give general advice as to whether the proposed changes are likely to comply with the accreditation criteria. As some of the changes described below may need to be assessed by an AMC team before they are introduced, the AMC requests at least eight months' notice of the intended introduction of the change.

DEFINITION OF A MATERIAL CHANGE TO AN ACCREDITED CPD HOME

Any of the following might constitute a material change in an accredited CPD home:

- a significant change in the objectives and approach of a CPD home's existing work
- a significant change in the resources available to support the provision of the CPD program, including funding, staffing, IT infrastructure, number of CPD program participants, a change in the ownership or governance
- a change in the types of medical practitioners the CPD home provides support and guidance for.

When it considers the initial advice from an accredited CPD home about planned changes, either through a specific notice of intent or through monitoring submissions, the Specialist Education Accreditation Committee will decide if it is a material change.

The AMC may require further information and/or assessment by an AMC assessment team depending on the nature and extent of the change(s).

After considering the submission/information and/or assessment, the Committee will make a recommendation to the AMC Directors on accreditation of the CPD home including any specific reporting requirements.

3.2.3 AMC decision on assessments of new developments

The Specialist Education Accreditation Committee completes assessments of new developments based on a review of the organisation's submission.

The AMC will generally assess submissions within four months of their submission. This is subject to the meeting schedule of the Specialist Education Accreditation Committee. The dates of the meetings of the Committee are available from the AMC.

The AMC grants/confirms accreditation if the submission demonstrates that the organisation meets the criteria, or that it substantially meets the criteria and setting conditions will lead to all criteria being met in a reasonable time.

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

- i. that the submission indicates that the organisation will meet the criteria for AMC accreditation of CPD homes;
- ii. that further information is necessary to make a decision;
- iii. that the organisation may not satisfy the criteria and accreditation is not recommended. Where it has rejected a submission, the AMC may specify a period of time to lapse before it will consider a new submission.

When the AMC grants initial accreditation to a new organisation as a CPD home, or requires an assessment by an AMC assessment team to make a decision on a material change in an established CPD home, the AMC will also propose a date for the AMC team assessment of the CPD home. The procedures for these assessments are outlined in section 3.3.

3 The administration of the assessment process

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 organisation concerning the timing of the assessment, the process of assessment, and the documentation required. The staff write to organisations which are due for reaccreditation approximately 12 months before their accreditation is due to expire. For other assessments, the AMC provides customised advice on AMC timings and requirements.

The timing of the assessment is planned in consultation with the senior office bearers and chief executive of the CPD home.

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

3.3.2 Documentation

The AMC provides a submission template to assist the organisation in preparing the accreditation submission, which is the basis for the assessment of the CPD home. The template outlines the requirement for self-assessment and critical analysis against the accreditation criteria.

The AMC normally asks the organisation to submit its documentation six months ahead of the assessment. For an assessment that may be required as part of an accreditation extension/monitoring submission, 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 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 medical education and training, professional development, and community interests.

An experienced AMC assessor is appointed as chair of the team. One member of the team is a staff member of the AMC, who is the executive officer. The chair has overall responsibility for the conduct of the assessment. The executive officer provides policy advice, organises the assessment with the organisation being accredited, 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 include 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 The administration of the assessment process

3.3.4 The team's preliminary meeting

The assessment team holds a preliminary team meeting approximately two months before the discussions and/or assessment. At this meeting, the team identifies key issues and develops an outline of the accreditation program. 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.

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 CPD home and its CPD program(s) addressing the accreditation criteria.

The AMC may invite comment from a range of stakeholders such as:

- other organisation with whom the CPD home engages to develop, and/or implement its CPD program(s);
- professional bodies for related health professions;
- Australian state and territory health departments; and
- health consumer groups.

The AMC asks the CPD home to identify other relevant interest groups.

The AMC also gathers feedback from members of the CPD home. It may use surveys and/or interviews. The AMC has standard survey instruments. These are reviewed and customised for each assessment in consultation with the CPD home. AMC staff prepare surveys, arrange distribution, and manage the survey returns. For privacy reasons, the AMC requests that the organisation being accredited distributes the surveys to members of its home.

For an assessment that is part of an accreditation extension/monitoring submission, 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 organisation 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

An assessment normally occurs over a single day and includes meetings with the CPD home's senior officers and committees, staff and CPD home participants/member, as well as a time for review of the IT infrastructure/platform available to members.

Following the preliminary team meeting, AMC staff provide a guide to arranging the assessment to assist the CPD home to structure the agreed accreditation program.

All interviews are conducted with the knowledge of the senior office-bearers although not necessarily in their presence. This ensures that dissenting 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 may divide the team into sub-teams for components of the assessment.

3 The administration of the assessment process

3.3.7 Preliminary findings

At the end of the assessment, 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 presents its findings in a written statement which is discussed with key staff and office-bearers of the organisation. The organisation has an opportunity to correct errors of fact and discuss any draft recommendations and action that would need a response. AMC staff circulate the final statement (revised to correct errors) to the organisation and the team members. This statement is confidential to the organisation and the AMC.

The team makes no announcement concerning accreditation. This is a decision taken by the AMC Directors after considering recommendations from the Specialist Education 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 against the criteria. The report also provides feedback to the organisation to improve program quality. The team executive officer coordinates this task.

The aim is to provide the team's draft document to the organisation usually within six weeks of the conclusion of the assessment. More time may be required depending on the complexity of the assessment. The AMC invites the organisation 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 the accreditation. The AMC will provide an opportunity for the organisation 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 organisation's comments.

AMC staff submit this report to the Specialist Education Accreditation Committee. They also submit comments by the organisation if these raise any significant concerns regarding the recommendations, conclusions or judgments in the draft report.

The Specialist Education Accreditation Committee considers the team's draft report. It may seek additional information from the organisation 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 organisation

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

The organisation may:

- i. ask that the Committee's report and recommendations be submitted to the AMC Directors for an accreditation 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 for an accreditation decision; or
- iii. ask the Committee to consider significant change 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

The organisation may seek formal reconsideration of the Committee's report and/or accreditation recommendations.

Reconsideration is undertaken by the Specialist Education Accreditation Committee. The organisation must lodge a request for reconsideration in writing with the executive officer of the Committee within 14 calendar days of receiving the Committee's report.

Within 30 calendar days of receiving the Committee's report and accreditation recommendations, the organisation 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 Specialist Education Accreditation Committee will discuss the request for reconsideration either at its next scheduled meeting or by special arrangement. The Committee will determine any process considered necessary to undertake the reconsideration.

The Committee considers the accreditation report and recommendations, the material supplied by the organisation, and any additional material and documentation agreed by the Committee. The Committee finalises its report and accreditation recommendations. The Committee will advise the organisation of its response to the request for reconsideration in writing following its meeting 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 accreditation outcomes in section 5.

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

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

The Committee's report is a public document. If the decision is to refuse accreditation, the AMC will not make the decision and report 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 organisation must make any request for an internal review of a decision to refuse accreditation in writing to the AMC Chief Executive Officer within 30 calendar 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 organisation claims justifies a different decision, together with all supporting material that the organisation 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 body 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 organisation of that process and the timeframe.

The review committee considers the Specialist Education Accreditation Committee's final report and recommendations, all submissions by the organisation during the original process and the materials and submissions made by the organisation as part of the request for internal review. The committee may seek further information from the assessment team, the Specialist Education Accreditation Committee, the organisation 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 to the Specialist Education 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 the Directors waive part or all of the costs associated with the review.

The AMC Directors consider the review committee's recommendation and make a decision on the accreditation. The Directors notify the organisation, and the Medical Board of Australia of the decision.

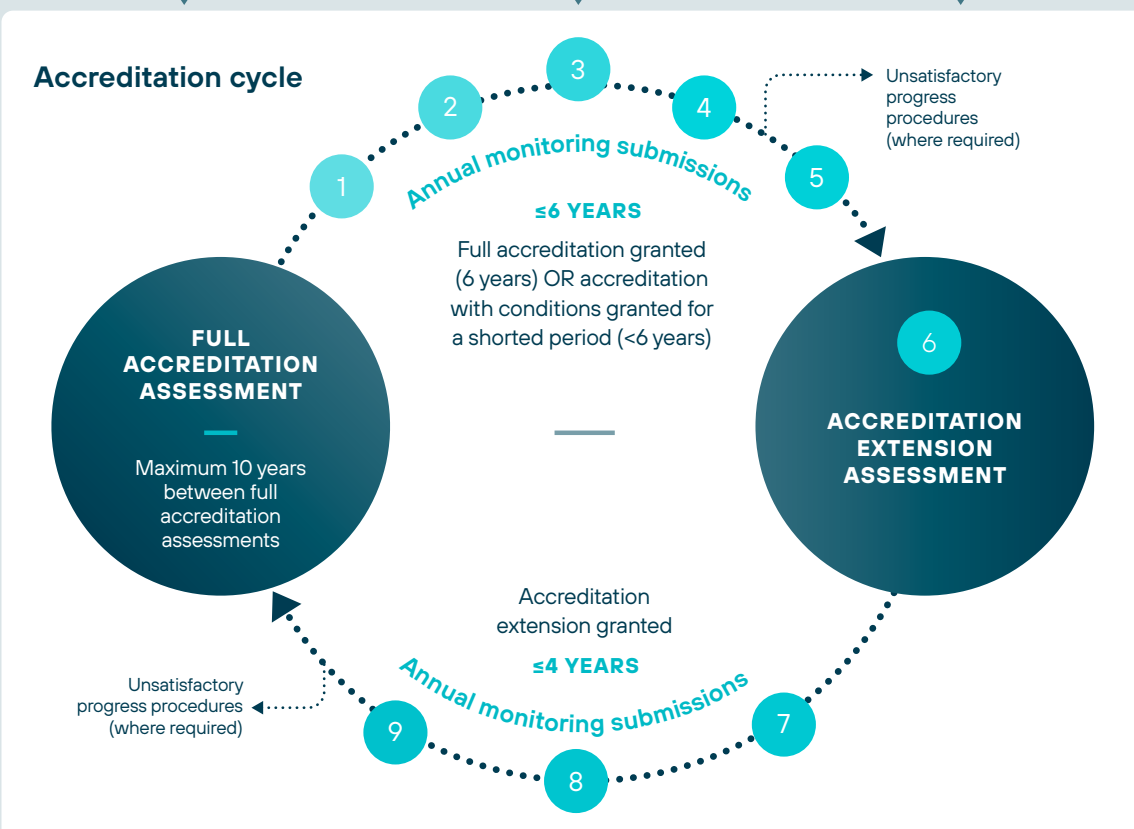
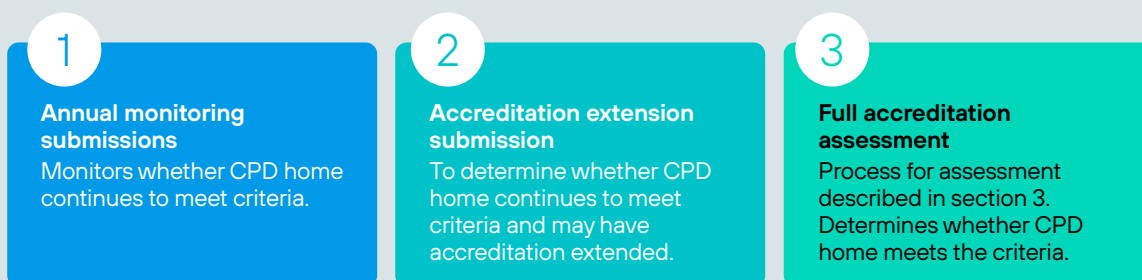
AMC monitoring of accredited programs

Figure 4.

Types of monitoring processes and the accreditation cycle



Types of monitoring processes



4 AMC monitoring of accredited programs

4.1 Purpose of AMC monitoring

Once it has accredited a CPD home, the AMC monitors it to ensure that it continues to meet the accreditation criteria.

The principal monitoring mechanisms are structured monitoring and accreditation extension submissions, and the full accreditation assessment every ten years. In addition, the AMC expects that accredited CPD homes will report at any time on matters that may affect their accreditation status, such as a change to capacity to meet the accreditation criteria, or any change that may meet the definition of a material change. (See section 3.2)

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

4.2 Monitoring submissions

The aim of the monitoring submissions is to enable the AMC to monitor accredited CPD homes between formal accreditation assessments. The reporting requirement is not intended to inhibit new initiatives or the gradual evolution of the CPD home's activities in response to ongoing review and evaluation by the CPD home.

In their monitoring submissions, accredited CPD homes:

- inform the AMC of significant developments, completed or planned, in any area covered by the accreditation criteria;
- respond to AMC conditions on their accreditation, recommendations for improvement and AMC questions concerning information in earlier monitoring submissions;
- provide data, for example on participation, appeals, and feedback.

Monitoring submissions are required either annually or every two years but information may be required more frequently if issues are identified. AMC staff provide each CPD home with a template the monitoring submission at least four months before the submission is due.

4.2.1 Consideration of monitoring submissions

The submission is considered by the Specialist Education Accreditation Committee.

4.2.2 Decision on monitoring submissions

The Specialist Education Accreditation Committee will determine whether:

- i. the submission indicates that the CPD home continues to meet the accreditation criteria including if accreditation conditions have been satisfied in the time period set by the AMC; or
- ii. further information is necessary to make a decision; or
- iii. the CPD home may be at risk of not satisfying the accreditation criteria.

If the submission is considered satisfactory, the CPD home is advised. The AMC provides details of any matter to be addressed in the next monitoring submission or in supplementary information, and any conditions or recommendations which have been satisfied and do not need to be addressed again.

4 AMC monitoring of accredited programs

If the Committee needs more information to make a decision on the monitoring submission, it advises the CPD home of the relevant accreditation criteria, the information required and a date for submission. The Committee may decide that a meeting with representatives of the CPD home is necessary to discuss the AMC's requirements.

If the Committee considers that the CPD home may be at risk of not satisfying the accreditation criteria, then it invokes the *AMC Unsatisfactory Progress Procedures*. (See 4.4)

If the Committee's consideration of a monitoring submission results in a recommendation to change the accreditation status of a CPD home, or identifies material changes to the CPD home, the Committee will advise the CPD home 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 the accreditation status of CPD homes to the Medical Board of Australia.

4.3 Accreditation extension submission

Each AMC accreditation report indicates the year in which the accreditation of the CPD home will expire. The accreditation report will also indicate if the CPD home is able to seek extension of the accreditation before the next reaccreditation assessment by an AMC team. The AMC considers requests for extension via an accreditation extension submission.

In the accreditation extension submission, the CPD home is expected to provide evidence that it continues to meet the accreditation criteria. The submission also provides an appraisal of the developments since accreditation, and information on plans leading up to the next AMC reaccreditation.

The Specialist Education Accreditation Committee may decide that that review of the accreditation extension submission should entail discussions with the CPD home or an assessment by an AMC team.

If, on the basis of the submission, the Specialist Education Accreditation Committee decides that the CPD home is continuing to satisfy the accreditation criteria, it may recommend that the AMC Directors extend the accreditation of the CPD home. The period of extension possible is usually three to four years, taking the accreditation to the full period which the AMC will grant between assessments, which is ten years. At the end of this extension, the CPD home undergoes a reaccreditation assessment.

4.4 Unsatisfactory progress procedures

The procedures described below relate to circumstances where the AMC, on the basis of monitoring submissions or other material, considers the CPD home no longer may meet the accreditation criteria or may have difficulty meeting the criteria in the future.

The AMC will investigate the concerns following the process outlined below. If this investigation leads the AMC to reasonably believe the CPD home no longer meets the accreditation criteria, the AMC will either impose conditions on the accreditation or revoke the accreditation.

4 AMC monitoring of accredited programs

The AMC will inform the CPD home of its concerns and the grounds on which they are based, and invite the CPD home 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 Specialist Education 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 CPD home will focus on actions necessary to meet the accreditation criteria in a defined period of time. The team may ask the CPD home to arrange meetings with other relevant bodies as part of their discussions.

The team reports to the Specialist Education Accreditation Committee, which may recommend to the AMC Directors:

- i. that the concerns are being addressed. In this case, the AMC will grant ongoing accreditation for a defined period subject to satisfactory monitoring submissions;
- 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 monitoring submissions 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 CPD home does not satisfy the accreditation standards. In this case the AMC will revoke the accreditation.

The AMC advises the CPD home and the Medical Board of Australia of its decision.

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 a new CPD home, reaccreditation of an established CPD home, and when material changes occur in a CPD home.

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

The AMC may accredit an organisation if it is reasonably satisfied that the organisation meets the accreditation criteria. The AMC may also grant accreditation if the organisation substantially meets the accreditation criteria, and imposing accreditation conditions will lead to the organisation meeting the criteria within a reasonable time.

Each CPD home undergoes accreditation assessment by an AMC team at least every ten years. Following an assessment by an AMC team, the AMC grants accreditation for a maximum period of six years. This period can be extended up to ten years on the basis of a written accreditation extension submission in the year the accreditation expires. At the end of the ten-year period, the CPD home undergoes a reaccreditation assessment.

5.1 Initial accreditation of new CPD homes

The accreditation options are:

- i. Initial accreditation, subject to conditions being addressed within a specific period and depending on satisfactory monitoring, up until completion of an accreditation assessment by an AMC assessment team.
- ii. Accreditation will be refused where the organisation has not satisfied the AMC that it can meet the accreditation criteria. 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 of a new organisation, 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 new submission for initial accreditation.

5.2 Accreditation/Reaccreditation of CPD homes

The accreditation options are:

- i. **Accreditation for a period of six years subject to satisfactory monitoring submissions.** Accreditation may also be subject to certain conditions being addressed within a specified period and to satisfactory monitoring submissions. (See 4)
- ii. **Accreditation for a shorter period of time.** If significant deficiencies are identified or there is insufficient information to determine that the CPD home satisfies the accreditation criteria, the AMC may award accreditation with conditions and for a period of less than six years. At the conclusion of this period, or sooner if the CPD home requests, the AMC will conduct a follow-up review to consider extending the accreditation. The CPD home may request either:
 - › a full accreditation assessment, with a view to granting accreditation for a further period of six years; or
 - › a more limited review, concentrating on the areas where deficiencies were identified, with a view to extending the current accreditation to the maximum period (six years since the original accreditation assessment).
- iii. **Accreditation may be revoked where the CPD home has not satisfied the AMC that it can meet the accreditation criteria.** The AMC would take such action after detailed consideration of the impact on the healthcare system and on individuals of accreditation being revoked and of other avenues for correcting deficiencies.

If the AMC revokes accreditation, it will give the organisation written notice of the decision, its reasons, and the procedures available for review of the decision within the AMC. (See 3.3.12)

An organisation that has its accreditation revoked may re-apply for accreditation. The organisation must first satisfy the AMC that it has the capacity to be a CPD home that meets the accreditation criteria by completing a submission for initial accreditation.

5.3 Accreditation extension

In the year the accreditation ends, the CPD home will submit an accreditation extension submission. Subject to a satisfactory accreditation report, the AMC may grant a further period of accreditation, up to a maximum of four years, before a new accreditation review. Accreditation may also be subject to certain conditions being addressed within a specified period and to satisfactory monitoring submissions. (See 4)

5.4 Material changes to established CPD homes (that is not part of an accreditation or reaccreditation assessment)

The accreditation options are:

- i. Confirmation that the CPD home can meet the accreditation criteria in making the change(s). Continued accreditation may be subject to the CPD home addressing certain conditions within a specified period. The conditions may include a requirement for follow-up assessments to review progress in implementing the change(s).
- ii. Accreditation of the change is refused where the CPD home has not satisfied the AMC that it can meet the accreditation criteria. The AMC will give the CPD home 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 of a material change, the CPD home may re-apply for consideration of the change. It must first satisfy the AMC that it has the capacity to address the AMC's concerns about the proposed change by completing a submission for initial accreditation.

5.5 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 accrediting a CPD home, the AMC monitors developments in the CPD home through regular monitoring submissions. This process is explained in Section 4.2 to 4.3.

The AMC has a separate series of procedures that relate to circumstances where the Specialist Education Accreditation Committee considers, on the basis of monitoring submissions or other material available to it, that the CPD home's progress against its accreditation conditions is unsatisfactory and/or that the CPD home may not satisfy one or more accreditation standards. These procedures are outlined in Section 4.4.

Review of accreditation criteria and procedures

The process for reviewing AMC accreditation criteria and procedures provides opportunities both for contribution by stakeholders and for the AMC to build on the experience of its accreditation committees.

The relevant accreditation committee reviews the accreditation criteria and procedures after each assessment by an AMC team. AMC staff collate feedback from the team and the organisation being accredited on the application of the accreditation criteria and on the assessment process.

- Following each assessment, the relevant accreditation committee receives a report from AMC staff on any questions concerning the interpretation of accreditation criteria 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 accreditation committee on their implementation.
- The accreditation committee may recommend to the AMC Directors changes to the explanatory notes accompanying the criteria.
- Should the committee decide that a criterion or criteria require clarification or new criteria are required, it may recommend a review by an AMC working party, following the process described below.
- Should the committee identify the need for a change to the published procedures, it may recommend a review, following the process described below.

The AMC reviews the full set of accreditation criteria at least every five years. It reviews the accreditation procedures in full at least every five years. In reviewing its accreditation criteria, the AMC takes account of the Australian Health Practitioner Regulation Agency *Procedures for Development of Accreditation Standards*. The AMC reviews the procedures in full at least every five years.

The review of accreditation criteria and/or procedures is completed by AMC working parties established for the purpose. The process is as follows:

- The accreditation committee discusses the criteria and/or procedures, and presents to the AMC Directors the plan for the review, outlining the proposed scope and timeframe.
- If the AMC is planning to review the criteria, it advises the Medical Board of Australia. It places information on the review and consultation processes on its website.
- A working party is established, 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 national and international reports and policies, reviews AMC accreditation reports and committee reports, drafts proposals for change to the criteria and procedures, and prepares a summary of stakeholder responses to them.
- The relevant accreditation committee considers the changes, and submits them to the AMC Directors.
- The AMC Directors submit changes to the accreditation criteria and new criteria to the Medical Board of Australia for approval.