



24 March 2017

Ms Carol Jordon  
Chief Executive Officer  
Postgraduate Medical Council of Victoria  
PO Box 13330  
LAW COURTS VIC 8010

Dear Ms Jordon

**Re: Outcome of the Postgraduate Medical Council of Victoria's 2016 progress report**

Thank you for submitting the Postgraduate Medical Council of Victoria's 2016 progress report and report on conditions. The AMC reviews progress reports by intern training accreditation authorities as part of its monitoring to ensure that accredited providers and authorities continue to meet the relevant standards and domains.

PMCV's 2016 report and reviewer commentary were considered by the October 2016 meeting of the Prevocational Standards Accreditation Committee.

The Committee accepted the report and commended the quality of the report presented.

The AMC has found that PMCV continues to meet the domains for assessing accreditation authorities. It has also satisfied the following condition on accreditation:

- 1.2 If plans for PMCV accreditation of PGY3 positions progress, provide documentation to demonstrate that PMCV has the resources to continue to give intern training accreditation high priority.

The AMC noted the following conditions as progressing:

- 3.1 In view of the heavy workload and limited resources, monitor and advise the AMC of any changes to capacity to achieve objectives in relation to accrediting intern training programs. In 2017 provide an update on the implications on PMCV's workload of changes to IMG registration and requests for additional accredited posts for IMGs.
- 4.5 Provide information about mechanisms for dealing with concerns for patient care and safety if evidence of this is identified during a survey visit. The AMC will provide further guidance on the requirements of this condition for reporting in 2017.
- 4.9 Develop more effective mechanisms for distribution of outcomes of accreditation to junior doctors within health services to assure them that their concerns and commendations have heard and that are being addressed. In 2017 provide information evaluation of the mechanisms for distribution of outcomes.
- 5.1 Engage health consumers and community members in PMCV accreditation functions. In 2017 provide an update on mechanisms currently being explored for active engagement of consumers and community members.

The AMC has advised the Medical Board of Australia of this decision.

The Committee's detailed feedback on the report is at **Attachment 1**.

Thank you for submitting the 2016 progress report. The AMC will seek a report for next year by **17 October 2017**.

If you wish to discuss the outcome of the 2016 report, please do not hesitate to contact me.

Yours sincerely

A handwritten signature in cursive script that reads "Theanne Walters".

Theanne Walters  
Deputy Chief Executive Officer  
Tel: 02 6270 9703



## AMC Prevocational Standards Accreditation Committee's consideration of the Postgraduate Medical Council of Victoria's 2016 progress report

### Explanation of findings:

#### Accreditation Condition

Unsatisfactory	The intern accreditation authority may not meet the related Domain and AMC should investigate further.
Not Progressing	No progress or overly slow progress.
Progressing	Indicates satisfactory progress against the recommendation, with further reporting necessary.
Satisfied and closed	The intern accreditation authority has satisfied all requirements and can cease reporting against the Condition. Condition is closed.

#### Quality Improvement Recommendation

No Rating	Insufficient information to make a judgement.
Progressing	Indicates satisfactory progress against the condition or recommendation, with further reporting necessary.
Satisfied and closed	The intern accreditation authority has satisfied all requirements and can cease reporting against the Quality Improvement Recommendation. Recommendation is marked as closed.

#### Statistics and annual updates

No Rating	Insufficient information to make a judgement.
Progressing	Indicates satisfactory progress against recommendation, with further reporting necessary.
Satisfied and closed	The intern training accreditation authority has satisfied all requirements and can cease reporting against this information request.

The summary that follows records an overall finding for each Domain. The findings against specific attributes are listed only where the finding has changed or this is a finding of substantially met or not met.

## Domain 1: Governance

Accreditation status in 2016		
<b>Domain 1</b>	<b>Status remains: Met</b>	
Conditions	Finding	Commentary
1.2 If plans for PMCV accreditation of PGY3 positions progress, provide documentation to demonstrate that PMCV has the resources to continue to give intern training accreditation high priority.	Satisfied and closed	Noted that PMCV has no plans to progress towards formal PGY3 accreditation at this stage.
Quality improvement recommendations	Finding	Commentary
1.3 Continue efforts to enhance resources to further develop the website and educational resources.	Progressing	Noted a number of developments including enhancements to the PMCV website, a monthly accreditation newsletter and work on developing and distributing professionalism resources. Noted the plans to improve the branding of the JMO forum and raise awareness of their work and role. In 2017, PMCV is requested to provide an update on progress in this area.
Summary of significant developments		
<p>The AMC noted the following:</p> <ul style="list-style-type: none"> <li>• Membership changes to the Accreditation Subcommittee, with two new members and three retiring members, and approved a change to the Committees terms of reference in 2016.</li> <li>• The subcommittee Chair can now recommend to the PMCV Board an extension to an individual's membership for the benefit of the subcommittee for a further year. The subcommittee can also co-opt individuals to assist the subcommittee.</li> <li>• PMCV has finalised its Strategic Plan 2016-2018.</li> </ul>		
Summary against Domain 1		
<p>The AMC considered progress against this domain as satisfactory, with conditions and quality improvement recommendations either satisfied and closed or progressing. Please report on items marked as progressing in the 2017 report.</p>		

## Domain 2: Independence

Accreditation status in 2016		
<b>Domain 2</b>	<b>Status remains: Met</b>	
<b>Conditions: Nil.</b>		
Quality improvement recommendations	Finding	Commentary
2.2 Make the wording of procedures for managing conflicts of interest consistent across committees.	Satisfied and closed	Noted that a revised Conflict of Interest Policy was approved by the PMCV Board in May 2016. Noted the use of a new online meeting portal

		which allows restriction of a committee member's access to meeting documents if there is a perceived or actual conflict of interest. In 2017, PMCV is requested to provide an update on the implementation and evaluation of the new policy and online meeting portal, with regard to managing conflicts of interest.
<b>Summary of significant developments</b>		
As noted above, there have been minor changes to the Conflict of Interest policy to ensure consistency and the implementations of the online meeting portal for Board and Accreditation subcommittee meetings and for future survey visits.		
<b>Summary against Domain 2</b>		
The AMC considered progress against this domain as satisfactory, with the quality improvement recommendation satisfied and closed. In 2017, PMCV is requested to provide an update on the implementation and any evaluation of the new conflict of interest policy and of the online meeting portal, with regard to managing conflicts of interest.		

### Domain 3: Operational management

Accreditation status in 2016		
<b>Domain 3</b>	<b>Status remains: Met</b>	
<b>Conditions</b>	<b>Finding</b>	<b>Commentary</b>
3.1 In view of the heavy workload and limited resources, monitor and advise the AMC of any changes to capacity to achieve objectives in relation to accrediting intern training programs.	Progressing	Noted that PMCV does not anticipate any changes to capability to achieve intern accreditation objectives during the accreditation period. In 2017, PMCV is requested to provide an update on the implications for PMCV's workload as a result of changes to international medical graduate (IMG) registration and requests for additional accredited posts for IMGs.
<b>Quality improvement recommendations</b>	<b>Finding</b>	<b>Commentary</b>
3.1 Enhance the capacity of the PMCV website to share information and to support educational activities, as resources to support this are available.	Satisfied and closed	Noted that PMCV has completed enhancements of the website intended to better target the needs of junior doctors and supervisors. The process of reviewing and updating is ongoing. As noted under domain 1, PMCV has developed other enhancements such as a monthly newsletter.
3.2 Publicise the outcomes of PMCV's evaluations more widely as a mechanism for highlighting strengths of the processes.	Progressing	Noted that PMCV completed an evaluation in 2015 and developed the <i>PMCV Accreditation Program Quality Review Report</i> . The report includes an action plan for 2016 and comparison of evaluation data and outcomes from 2014. This report has been published

		on the website.
3.2 Consider opportunities to publicise PMCV's organisational expectations, or key performance indicators, and outcomes to highlight the successes and strengths of its work.	Satisfied and closed	The <i>PMCV Accreditation Program Quality Review Report</i> includes an assessment of PMCV's KPIs. This is available on PMCV's website.
3.2 Consider succession planning for key staff as part of risk management.	Satisfied and closed.	Noted that the PMCV's <i>Risk Management Framework</i> was reviewed by the Council's Finance and Risk Committee and approved by the PMCV Board.  Noted that there are three areas of risk related to key staff identified as part of the risk management plan including availability of members for Accreditation subcommittee including the Chair, availability of surveyors and team leaders and accreditation secretariat staffing.  Noted that PMCV considers there are appropriate mechanisms in place to manage these risks. In 2017, PMCV is requested to provide an update if there are any changes to these risks.
3.2 Update the overarching risk management policy to formalise PMCV processes for managing risks.	Satisfied and closed.	As noted above, the PMCV's <i>Risk Management Framework</i> was reviewed by the Council's Finance and Risk Committee and approved by the PMCV Board. In future reports, PMCV is requested to provide any updates on the implementation and evaluation of the risk management framework.
3.3 Consider storage of intern related records, for the purposes of confidentiality, in PMCV's overarching records management policy.	Progressing	Noted that the <i>Records Management Policy and Storage Guidelines Policy</i> was approved at the August meeting of the Board. Note: the condition relates to management of the confidential aspects of interns' records, given PMCV's multiple roles in junior doctor education, welfare and assessment. In 2017, PMCV is requested to provide further information with regard to the management of the confidential aspects of interns' records.
<b>Summary of significant developments</b>		
<p>The AMC noted a number of evaluations and reviews of PMCV processes including:</p> <ul style="list-style-type: none"> <li>• The team leader workshop discussed recent evaluations including the AMC Review of PMCV and the 2015 evaluation report, and reviewed changes to the accreditation process and guidelines. The proposed new professional development session for surveyor training was piloted at this workshop.</li> <li>• The Accreditation subcommittee is undertaking a review of the mid-cycle review process</li> </ul>		

implemented from 2015 (when the four-year accreditation cycle was implemented).

- The pre-visit submission document (completed by facilities prior to a survey visit) will be reviewed to incorporate changes to the national accreditation standards from 2017.

### Summary against Domain 3

The AMC considered progress against this domain as satisfactory, with conditions and quality improvement recommendations either satisfied and closed or progressing. Please report on items marked as progressing in the 2017 report including any changes resulting from the *PMCV Accreditation Program Quality Review Report* and updates on the implementation and evaluation of the risk management framework.

## Domain 4: Process for accreditation of intern training programs

Accreditation status in 2016		
Domain 4	Status remains: Met	
Conditions	Finding	Commentary
4.5 Provide information about mechanisms for dealing with concerns for patient care and safety if evidence of this is identified during a survey visit.	Progressing	Noted that PMCV indicates that if patient safety concerns arise during a site visit the mechanisms for dealing with this include conditions and recommendations with monitoring processes and timelines dependent on the issue. PMCV guidelines have been reviewed and modified to emphasise safety of patient care.  PMCV queried the intent of this condition. The AMC team received different responses from stakeholders (including surveyors) about how patient safety issues would be addressed if identified as part of a survey visit (even if it wasn't specifically the term being accredited), including the immediate response of the survey team. The condition concerns an organisational approach to these issues. This links to revisions to the Domains for assessing authorities. All intern training accreditation authorities will be asked to specifically address the new standards regarding patient safety and junior doctor wellbeing in 2017.
4.9 Develop more effective mechanisms for distribution of outcomes of accreditation to junior doctors within health services to assure them that their concerns and commendations have heard and that are being addressed.	Progressing	Noted the mechanisms used by PMCV for distribution of outcomes of accreditation. This now includes a mechanism for distribution of conditions and recommendations in the survey report to those who participated in the survey visit meetings (particularly junior doctors). Health facilities will now also be asked to provide details of how these outcomes were distributed. This

		process will be evaluated at the end of 2016. In 2017, PMCV is requested to provide an update on the evaluation of this process.
Quality improvement recommendations	Finding	Commentary
4.2 Further consider mechanisms to ensure consistency in the operations of the survey teams.	Satisfied and closed.	Noted the mechanisms used to ensure consistency in operations of survey teams.
4.3 Consider issues of subtle conflicts of interest or perceived bias in selection of surveyors, particularly lead surveyors.	Progressing	Noted PMCV's processes for managing conflict of interest which include self-selection and oversight by the subcommittee.  This recommendation related to issues of 'subtle conflict' or 'perceived bias' in selection of surveyors, not necessarily to declared conflicts. The accreditation report refers to an example of subtle conflicts with two team leaders being responsible for accrediting each other's facilities.  PMCV is requested address how it manages subtle conflicts or perceived bias in the selection of surveyors in 2017.
4.5 Consider how PMCV might disseminate more widely information about innovations and good practice in intern training and education in health services.	Progressing	Noted that PMCV has set up a monthly newsletter. The PMCV Symposium is seen as another opportunity for PMCV to disseminate information about innovations and good practice. PMCV notes there is an opportunity to identify innovative practices during accreditation visits and share this more widely. In 2017, PMCV is requested to provide an update on any proposed additional mechanisms for sharing good practice.
Summary of significant developments		
<p>The AMC noted that PMCV has conducted a number of reviews of its accreditation processes and guidelines since the visit in 2015 including, the <i>PMCV Part-time, Interrupted and Incomplete Internships Guidelines</i>, the re-accreditation submission document and <i>PMCV Supervision of Junior Doctors Guidelines</i>.</p> <p>The AMC notes the following evaluations and review processes conducted by PMCV:</p> <ul style="list-style-type: none"> <li>• 2015 PMCV Accreditation Program Quality Review.</li> <li>• The surveyor training workshop program reviewed with changes planned to be implemented for the 2017 workshop.</li> <li>• Changes to guidelines to emphasise junior doctor wellbeing and patient safety and address conditions and recommendations in the AMC report.</li> <li>• The Accreditation subcommittee has undertaken a review of the mid-cycle review process implemented from 2015. PMCV indicates the review demonstrated the value of the process and has resulted in the development of a 'checklist' for review of mid-cycle reports to assist</li> </ul>		

subcommittee members to identify the issues to highlight to facilities.

**Statistics and annual updates**

Standard information is requested for each progress report. The AMC noted this information was provided.

**Summary against Domain 4**

The AMC considered progress against this domain as satisfactory, with conditions and quality improvement recommendations either satisfied and closed or progressing. Please report on items marked as progressing in the 2017 report.

**Domain 5: Stakeholder collaboration**

Accreditation status in 2016		
<b>Domain 5</b> Attribute 5.1	<b>Status remains: Met</b> Status: Substantially met	
Conditions	Finding	Commentary
5.1 Engage health consumers and community members in PMCV accreditation functions.	Progressing	Noted PMCV has been exploring options for engagement of consumer and community members including piloting the use of trained community members on survey visits. In the 2017 report please provide an update on PMCV's mechanisms to engage health consumers and community members in PMCV accreditation functions, including the results of the pilot.
Quality improvement recommendations	Finding	Commentary
5.1 Consider opportunities to engage junior doctors and term supervisors more broadly, rather than largely through the accreditation process.	Progressing	PMCV outlined a number of mechanisms for engaging junior doctors in functions that are broader than the accreditation process for example, the PMCV Symposium and involvement in educational related project groups.  This quality improvement recommendation related to engaging a broader group of junior doctors and term supervisors (other than those directly involved in PMCV processes) rather than mechanisms to engage that already engaged group in broader activities.
5.1 Engage the Department of Health to establish strong high level links and knowledge of areas where PMCV can contribute to Department objectives.	Satisfied and closed	Noted that PMCV provides annual reports on accreditation activities to the Department in addition to PMCV staff meeting at least monthly with DHHS staff to discuss relevant issues.
Summary of significant developments		

The AMC noted:

- The Accreditation Manager is reviewing surveyor training processes across other jurisdictions and has prepared a discussion paper which includes suggestions for review of PMCV surveyor training, as well as accreditation processes and documentation.
- PMCV is monitoring the development and implementation the Queensland Prevocational Medical Accreditation portal.

**Summary against Domain 5**

The AMC considered progress against this domain as satisfactory, with conditions and quality improvement recommendations either satisfied and closed or progressing. Please report on items marked as progressing in the 2017 report.