

# Change of Circumstance: Process



## Purpose

To define and direct local health networks (LHNs) through the change of circumstance process, ensuring the accreditation status of a unit or LHN is maintained and not jeopardised. This particularly relates to periods of significant reform and change within the South Australian health environment.

## Background

South Australia is entering into a period of change and reform in health service delivery. The establishment of the new Royal Adelaide Hospital and the Transforming Health reforms propose complex change to how and where health services are delivered.

The specific extent and nature of the changes in health service delivery are still unknown but there will be considerable implications across the whole system.

The South Australian Medical Education and Training (SA MET) Health Advisory Council (the Advisory Council) has a formal accreditation process. This process supports the revised Accreditation Standards, acknowledges the changing environment for health service delivery and is a more streamlined process. The LHN submission document supporting the accreditation focuses only on establishing key risk areas. Accreditation teams only meet the units that have been identified as having issues and/or areas of concern. When undertaking a unit accreditation, the accreditation visit team only focuses on specific standards relevant to orientation, education and training, welfare, supervision and assessment. Governance standards are not investigated at unit visits.

The same risk based approach has been adopted for managing and processing accreditation decisions relating to any change in circumstances.

## Scope

The process outlined in this document is applicable to all LHNs accredited by the Advisory Council.

## Definition

A change of circumstance refers to any change which impacts the education and training received by trainee medical officers (TMOs) and directly links to the requirements set out in the SA MET Health Advisory Council Accreditation Standards (Accreditation Standards). TMOs in the context of this document are prevocational doctors who have not yet entered into speciality training.

## Notification of change in circumstance

The Advisory Council Accreditation Committee (the Accreditation Committee) must be notified of all changes of circumstance that could affect the accreditation status of a unit or LHN. The Director of Clinical Training (DCT) will determine whether a change of circumstance exists. If the DCT has any reservations as to whether a proposed change constitutes a change in circumstance, they should contact the SA MET Unit for advice.

When there is a change in circumstance relating to the standards under *Domain 1: Governance and Program Management* and *Domain 2: Monitoring, Evaluation and Continuous Improvement* of the

Accreditation Standards, the Accreditation Committee must be notified and provided with correspondence outlining the reasons for the change and impact the change will have on the education and training provided to TMOs.

### Compliance between accreditation visits

LHNs must comply with the Accreditation Standards throughout the period for which they are accredited. The Advisory Council reserves the right to review any accreditation status at any time where there is evidence to suggest the Accreditation Standards are not being met.

Where TMO terms are withdrawn or changed between accreditation visits, LHNs must ensure that the balance in the overall general clinical training program is maintained.

## Levels of change in circumstance

The three levels to describe a change in circumstance are outlined below:

### Significant Change

- Having, or likely to have, a **major impact** on the education and training received by TMOs and subsequent requirement to meet the Accreditation Standards.

### Moderate Change

- Having, or likely to have, **change within a reasonable limit; not considered excessive**, on the education and training received by TMOs and subsequent requirement to meet the Accreditation Standards.

### Minor Change

- Having, or likely to have, change of a **lesser impact** on the education and training received by TMOs and subsequent requirement to meet the Accreditation Standards

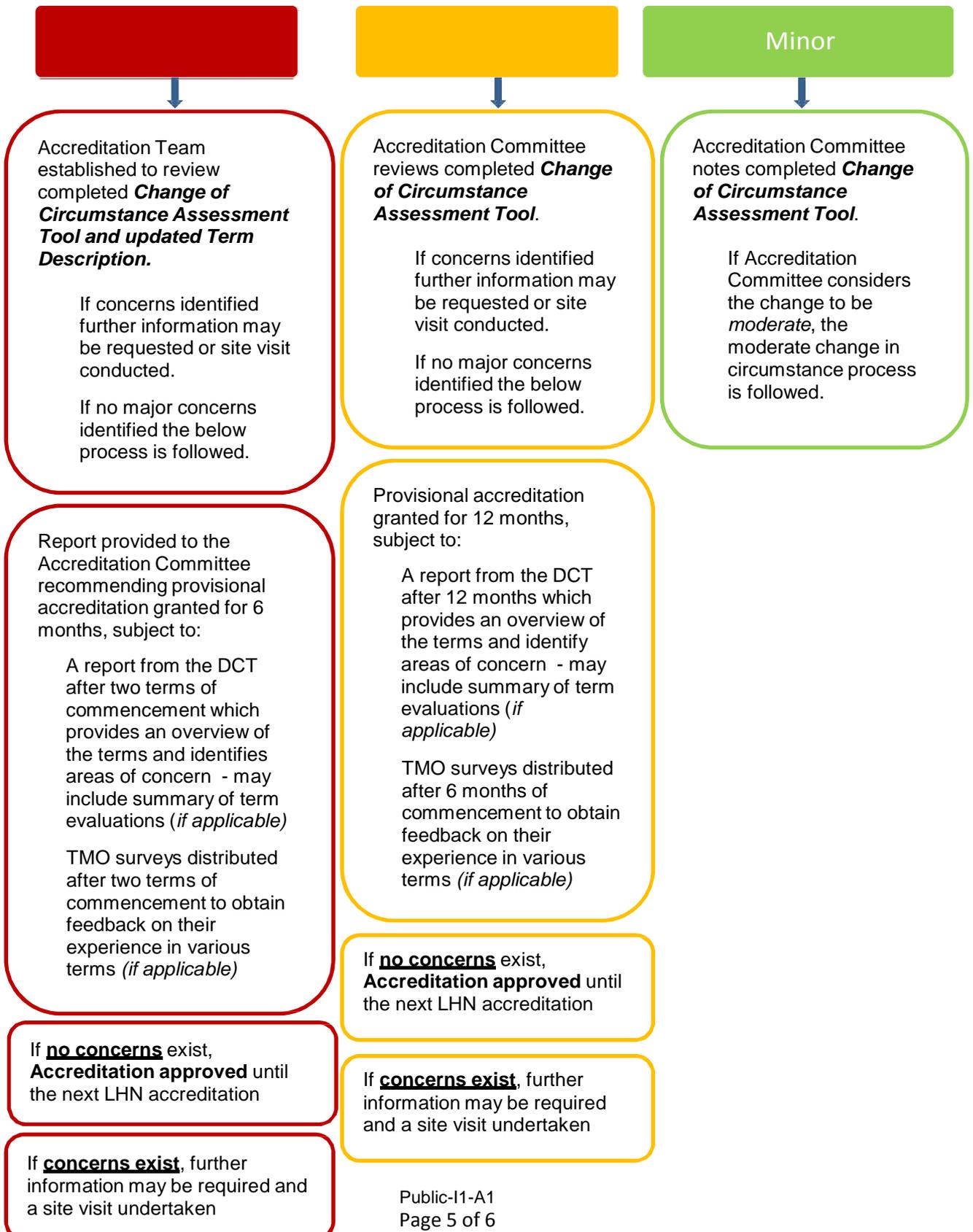
## Samples of change in circumstance

Level of Change	Scenario
<b>Significant Change</b>	<p>Two similar / same specialty units from different facilities amalgamate, resulting in a new model of care, patient flow and changes to team structure.</p> <p>This may include merging of two or more separate terms to form one term, or a split of one term into two or more terms.</p> <p>The number of TMOs in the term increases by more than three TMO (applicable to interns and PGY2+s).</p> <p>The clinical duties of TMOs in a term changes considerably resulting in reduced clinical exposure.</p> <p>Change to TMO rostering, including increased hours worked and rostered / not rostered overtime.</p> <p>Change to 7 day on 7 day off rostering from conventional week day shift rostering.</p> <p>Closure of a ward / facility / secondary site</p> <p>Staff levels and structure on a unit change considerably which impacts the level of TMO supervision and support</p>
<b>Moderate Change</b>	<p>A unit is changing location, and will have an increase in beds (maximum 5 beds)</p> <p>The number of TMOs in the term increases by 1-2 TMOs (applicable to interns and PGY2+s)</p> <p>Supervision arrangements and levels change to a certain degree due to: increased bed numbers, TMO numbers and/or rostering changes</p> <p>Education and training program is changed significantly with a new untried model</p> <p>TMO clinical duties altered due to unit staffing changes or model of care changes</p> <p>TMO rosters are changed slightly, with hours increasing but not considered excessive and in line with relevant policies</p>
<b>Minor Change</b>	<p>Unit increases bed numbers by less than 5 beds (no change in location)</p> <p>Education and Training program delivery method altered, content remains the same / similar</p> <p>Change in Term Supervisor on a Unit, level of supervision and support is maintained</p> <p>Orientation, Assessment and Evaluation processes are updated based on revised national standards</p>

## Process

The Director of Clinical Training is notified of the change in circumstance.

The Director of Clinical Training complete the **Change of Circumstance Assessment Form** to determine whether the change is *significant*, *moderate* or *minor* and follow the appropriate process.



## Related Documents

Change of Circumstance - Assessment Form  
Accreditation Policy  
Guide to Accreditation

## Glossary

**Accreditation** – a quality assurance process that established and monitors education and training provided for TMOs within local health networks to ensure high standards of clinical training for TMOs. Accreditation may be granted to a LHN or a new unit for 6 months, 12 months or four years.

**Accreditation Standards** – all accreditation activities are assessed against published accreditation standards. The current SA MET Accreditation Standards were developed through an extensive consultation process with stakeholders, and endorsed by the Minister for Health in South Australia and the Australian Medical Council in 2014.

**SA MET Accreditation Committee** – a Committee of the SA MET Health Advisory Council that is responsible for an efficient and effective accreditation process taking into account jurisdictional requirements, national program developments, and the needs of TMOs.

## For more information:

**SA MET Unit**  
**Office for Professional Leadership**  
**Level 5, Citi Centre Building**  
**11 Hindmarsh Square, Adelaide SA 5000**  
**Telephone: 8226 7231**  
[SAMETAccreditation@health.sa.gov.au](mailto:SAMETAccreditation@health.sa.gov.au)  
[www.samet.org.au](http://www.samet.org.au)

## Document History:

Date effective	Author/Editor	Approved by	Version	Change Reference
June 2015	Vanessa Heading	Accreditation Committee	3.0	
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