

# New Unit Accreditation Process



## Purpose

To assist Local Health Networks (LHNs) and the SA MET Health Advisory Council Accreditation Committee (Accreditation Committee) through the process to accredit new units for prevocational trainee medical officer positions.

## Overview

Through the process of accreditation, an accreditation team formally evaluates LHNs that employ trainee medical officers (TMOs) against the SA MET Accreditation Standards. The SA MET Health Advisory Council (Advisory Council) has delegated authority from the Medical Board of Australia (MBA) to accredit intern posts in South Australia and reports on the accreditation of other prevocational TMO posts to the Minister for Health. The new unit accreditation focuses on orientation, supervision and exposure to training. The new unit accreditation considers some LHN-wide aspects, but in less detail than for a full LHN accreditation visit.

The process for accrediting new units for interns and PGY2+ posts is detailed below.

## Process for accrediting a new intern unit

1. LHN to complete and provide the *New Unit Accreditation Application*, a detailed term description, completed ACF checklist.
2. SA MET Unit review the New Unit Accreditation Application, term description and other relevant documents.
3. The Accreditation Committee considers the application and if no concerns are noted, provisionally accredits the unit, subject to a site visit after two terms.
4. SA MET Unit will liaise with the LHNs medical education unit to confirm a suitable date and time for the visit to occur, and then establish an accreditation team ensuring there are no conflicts of interest.
5. LHN develops a program for the accreditation visit. The accreditation visit will include individual interviews with the term supervisor, registrars, TMOs, medical education officer (MEO) and the director of clinical training (DCT).
6. Accreditation team convenes to discuss the unit application. The SA MET Unit contacts the LHN if additional information is required before the site visit.
7. At the site visit the accreditation team will interview relevant staff (as mentioned above). It is expected that the MEO will be present to manage all the logistical aspects of the visit and help the team with other requests when required.
8. SA MET Unit drafts an accreditation team report from notes taken during the visit and provides it to team members for review and comment.
9. SA MET Unit provides the accreditation report, excluding the accreditation outcomes, to the LHN for factual checking.
10. SA MET Unit make changes to the draft report (if required) after consulting with accreditation team members.
11. Accreditation report is considered by the Accreditation Committee in order that a decision can be made on the accreditation status of the unit.

12. The Advisory Council is notified of the unit accreditation decision.
13. LHN notified of the accreditation recommendation and has right of appeal to accreditation recommendation, according to *the SA MET Health Advisory Council Accreditation Internal Review Policy and Procedure*.
14. Should no appeal be made for intern terms, SA MET Unit provides the Accreditation Committee decision to the South Australian Board of the Medical Board of Australia (SA Board of MBA).
15. SA Board of MBA advises SA MET Unit of its decision regarding the term's / unit's suitability for registration purposes.
16. The LHN is notified of the accreditation decision for general registration purposes.

## Process for accrediting a new PGY2+ unit

1. LHN to complete and provide the *New Unit Accreditation Application*, a detailed term description, completed ACF checklist.
2. SA MET Unit review the *New Unit Accreditation Application*, term description and other relevant documents.
3. The Accreditation Committee considers the application and if no concerns are noted, provisionally accredits the unit (should concerns exist a site visit is undertaken).
4. After six months, the SA MET Unit arranges for an electronic survey to be distributed to the term supervisor and PGY2+s within the unit. The survey is undertaken to ensure the unit is meeting the requirements under the Accreditation Standards. Data is collected and presented to Accreditation Committee for consideration.
5. Should no major concerns be identified, the Accreditation Committee can accredit the unit for a specified period of time (including commendations, provisos and recommendations). The LHN is then notified in writing of accreditation outcome.
6. Should concerns be identified an accreditation visit is undertaken.
7. At the site visit the accreditation team will interview relevant staff. It is expected that the MEO will be present to manage all the logistical aspects of the visit and help the team with other requests when required.
8. SA MET Unit drafts accreditation team report from notes taken during the visit and provides to team members for review and comment.
9. SA MET Unit provide the accreditation report, excluding the accreditation outcomes, to the LHN for factual checking.
10. SA MET Unit make changes to the draft accreditation report (if required).
11. Accreditation report is considered by the Accreditation Committee.
12. Accreditation Committee recommends accreditation status of the unit.
13. The Advisory Council is notified of the unit accreditation decision.
14. LHN notified of the accreditation recommendation and has right of appeal to accreditation recommendation, according to *the SA MET Health Advisory Council Accreditation Internal Review Policy and Procedure*.

## Timeframe

When applying for accreditation, LHNs should allow sufficient time for the required approval processes. Approval from the SA Board of the MBA is required prior to an intern being placed in any unit.

Accreditation approval processes can be lengthy, typically 2-3 months after the site visit has been conducted.

**If a LHN believes that they are likely to require a new unit to be accredited ready for commencement at the start of the next year, they should advise the SA MET Unit as soon as possible.** Applications to the SA MET Unit will receive a response within 10 days, confirming the relevant processes and timeframes.

It is recommended LHNs do not wait for final funding approval, as this could result in the unit not receiving accreditation status prior to the required commencement date. In the case where accreditation is granted but the funding is not approved, the accreditation status will remain on file for an appropriate period of time pending funding approval. Once funding has been granted the LHN will need to advise the SA MET Unit of any substantial changes that would affect the original accreditation decision, as per the Change of Circumstance process.

## Related Documents

- > New Unit Accreditation Application
- > Term description template
- > Guide to Accreditation

## Glossary

**Accreditation** – a quality assurance process that establishes and monitors the education and training provided for TMOs within LHNs 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, 2 years or 4 years.

**Accreditation Standards** – all accreditation activities are assessed against the SA MET Accreditation Standards.

**Local Health Network** – the institution or clinical setting in which TMOs work and train. LHNs comprise of single or groups of public hospitals which have a geographical or functional connection.

**PGY level** – the number of years since graduation of a trainee medical officer, e.g. PGY2, or PGY3

**South Australian Medical Education and Training (SA MET) Accreditation Committee** – a Committee of 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.

**South Australian Medical Education and Training (SA MET) Unit:** Supports the functions of the SA MET Health Advisory Council and various committees and subcommittees. The unit is committed to supporting the education and training of TMOs in South Australia.

## For more information

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## Document History:

<b>Date effective</b>	<b>Author/Editor</b>	<b>Approved by</b>	<b>Version</b>	<b>Change Reference</b>
6 February 2013	SA MET Project Officer	SA MET Health Advisory Council Accreditation Committee	V0.1	Development of process
19 June 2013	SA MET Project Officer	SA MET Health Advisory Council Accreditation Committee	V0.2	Update process
October 2014	SA MET Project Officer	SA MET Health Advisory Council Accreditation Committee	V0.3	Align with revised Accreditation Standards
February 2015	SA MET Project Officer	SA MET Senior Project Officer	V0.4	Minor formatting and wording change
December 2015	SA MET Project Officer	SA MET Senior Project Officer	V0.5	Updated section 'Timeframe'
August, 2017	SA MET Project Officer	SA MET Senior Project Officer	V0.6	Updated intern post process