

# SA MET HEALTH ADVISORY COUNCIL ACCREDITATION COMMITTEE

## Terms of Reference



### **PURPOSE**

The South Australian Medical Education and Training (SA MET) Health Advisory Council (the Advisory Council) is accountable for improving the quality of education, training and welfare for trainee medical officers within the State and making recommendations for the accreditation of prevocational trainees in health services.

The Accreditation Committee is established as a committee of the Advisory Council to provide advice on accreditation processes for the postgraduate training of prevocational medical officers.

### **REPORTING**

The Accreditation Committee will, through its Chair, report to the Advisory Council.

### **FUNCTIONS**

The Accreditation Committee will operate in a manner consistent with the Advisory Council rules and will undertake functions defined by those rules and as determined by the Advisory Council.

The functions of the Accreditation Committee are to:

1. Provide expert advice to the Advisory Council on accreditation processes for the postgraduate training of prevocational medical officers.
2. Undertake accreditation and monitoring of prevocational trainee medical officer posts, clinical units, facilities and networks that support these posts using the current Australian Medical Council's National Framework for Prevocational (PGY1 and PGY2) Medical Training and any additional SA MET accreditation standards.
3. Conduct accreditation with a particular focus on developing the trainee medical officer as a practitioner, professional and leader, health advocate and scientist and scholar; whilst ensuring the provision of a supportive environment, with adequate supervision and appropriate welfare support; and assurance of appropriate measures to ensure patient safety.
4. Review matters relating to accreditation processes for the postgraduate training of prevocational medical officers and make recommendations for endorsement by the Advisory Council.
5. Work collaboratively with specialty medical colleges to support and achieve high quality vocational training within the State.
6. Monitor and review the accreditation standards and processes ensuring relevance and effectiveness.
7. Oversee the recruitment and training of accreditation visit team members and leaders.
8. Develop links and agreements with other accreditation agencies and education providers to:
  - a) promote a continuum of learning
  - b) foster sharing of expertise and information
  - c) minimise duplication of workload on health services associated with multiple accreditation agency processes.
9. Work collaboratively with other Advisory Council Committees.
10. Establish, maintain and promote partnerships with relevant national and jurisdictional organisations

## **MEMBERSHIP**

Members will be appointed by the Advisory Council for a three-year term. Members have the option of being reappointed for a consecutive term.

An asterisk \* indicates membership can have alternate representation. Alternates may observe and participate in meetings of the committee but do not count towards quorum or have voting rights, except where they are taking the place of a committee member who is unable to attend the meeting.

Applications for membership will be considered from across geographical locations and address the skills-based matrix to ensure membership contain the skills, knowledge, experience and capabilities required on the Accreditation Committee.

The membership of the Accreditation Committee will be:

- Chair of the Accreditation Committee (a member of the Advisory Council)
- Deputy Chair of the Accreditation Committee (a deputy member of the Advisory Council)
- Clinician/Term Supervisor (two positions)
- General Practitioner/Private Sector Clinician \*
- Medical Administrator
- Director of Clinical Training
- Medical Education Officer \*
- Trainee Medical Officer \* (two positions) (a Final Year Medical Graduate could hold the alternate membership position).
- Consumer Representative
- At least one member of the committee should provide a rural health service perspective and at least one member should identify as Aboriginal or Torres Strait Islander. Otherwise, additional membership positions should be created specifically for these roles.

A membership vacancy may occur when:

- a member's term of office expires;
- a member resigns by notice in writing to the Chair of the Accreditation Committee;
- a member is absent for three or more consecutive meetings of the Committee without informing the Committee Chair.

Members appointed to the Accreditation Committee should have relevant experience and skills in at least some of the following areas:

- Medical Education and Training
- Indigenous Culture and Community
- Consumer Experience of Health Care
- Rural Health
- Communication
- Analytical Thinking
- Decision-making
- Leadership
- Quality Improvement
- Safety & Quality
- Risk Management

- Evaluation

## **Responsibilities of members**

### **Conflict of Interest**

A Conflict of Interests Register will be maintained, and members will identify any potential conflicts of interest.

Any declared or identified conflict of interest will be noted in the minutes and the register.

The committee will identify any matter arising at the meeting which may cause a conflict of interest for a member/s and such member/s shall exclude themselves from any discussions or decisions concerning such matters.

Any members who participated in accreditation visits will participate in presenting the report and answering committee questions. After which such members will also exclude themselves from any discussions or decisions concerning the report.

### **Confidentiality**

Members will not disclose Accreditation Committee discussions or decisions outside the Accreditation Committee unless there is explicit agreement during a meeting and it is noted in the minutes that this is appropriate.

## **POWERS**

The Accreditation Committee will have the power to:

- seek advice from external experts;
- co-opt members to the Committee as required;
- establish working groups to perform activities relevant to its functions;
- consult appropriately in order to obtain information relevant to the functions of the Committee.

## **MEETING ARRANGEMENTS**

The proceedings of the Accreditation Committee will be governed by the Advisory Council Rules (Part 3), excepting that:

- There will be at least six meetings in a calendar year and these will be held at regular intervals.
- The quorum for a meeting is a majority of members for the time being. If quorum is not met, discussion will continue with in-principle decisions made by attendees at the meeting and confirmed by an out-of-session request to absent members.
- Material which has not been circulated in accordance with the Advisory Council rules may be tabled at meetings only for information or discussion and will only be voted on with approval of the Chair.
- Anecdotal information presented at meetings by members will not be used in the decision making process.
- All decisions will be made at a meeting of the Accreditation Committee unless an accreditation issue requires a decision between scheduled meetings. In this event an out of session decision will be made by Committee members and the outcome minuted at the next scheduled Committee meeting.
- Minutes shall be kept for each meeting. A motion for the confirmation of minutes of any meeting of the Accreditation Committee is to be put to the next meeting.

**OFFICIAL**

- Out-of-session requests will be circulated to members of the Accreditation Committee for consideration only with the approval of the Chair.

**REVIEW**

The Terms of Reference will be reviewed annually.

**REVIEW DATE**

November 2024