

Conditions of accreditation may be a general Condition or a Monitoring Condition. General Conditions are awarded when a standard or standards are assessed during an accreditation activity as partially or not met. Monitoring Conditions may be applied to standards that are assessed as met, however, further monitoring over a longer period of time is required. Accredited Intern Training Providers are required to demonstrate, through the submission of a response and accompanying evidence, that the Condition has been addressed by the stipulated due date. Failure to do so may result in changes to the accreditation status of the program.

For all Conditions a due date for the providers response is identified by the Assessor Team and included in the accreditation report. Each Condition is given a due date that considers the risk of the Condition and a reasonable timeframe for the provider to demonstrate the Condition has been met. As a result, responses to Conditions have previously been due at numerous points throughout the accreditation period. The revised processes recently endorsed by the Prevocational Medical Accreditation Queensland (PMAQ) Accreditation Committee will, generally, see the due date of Conditions aligned to a single annual date.

Conditions and the assessment of the response to such fulfil a key monitoring function with the PMAQ system of accreditation and act to provide assurance that the required standards have been met or continue to be met. The purpose of this document is to provide guidance to the PMAQ Accreditation Committee on the process for responding to Conditions of accreditation that have not been met and have failed to demonstrate a satisfactory progress towards such.

### Process

1. Assessors recommendation that a Condition / Conditions have not been met is endorsed by the PMAQ Accreditation Committee
2. Written correspondence is sent to the relevant provider advising of the outcome, the potential consequences of non-compliance and a subsequent response (generally within two (2) weeks from adjudication)
3. PMAQ agency staff to contact provider to advise of the correspondence and to provide clarification or support
4. The provider's response is assessed by Assessors with recommendations presented to the Accreditation Committee
5. If the condition is **met**, the provider is advised via formal correspondence and ongoing compliance monitored through standard monitoring mechanisms; if the Condition is **not met**, further action is considered by the PMAQ Accreditation Committee. This action should include interviews by Assessors with key personnel from the training provider.

These interviews may be:

- a. Conducted virtually
  - b. Conducted as a face to face visit to the facility
6. The PMAQ Accreditation Committee will determine the timeframe in which the interviews are to be conducted. Consideration will be given to the risk associated with the Condition and potential non-compliance and the logistics of convening a team and travel requirements. A minimum of 24 hours' notice is required.
  7. The PMAQ Accreditation Committee will determine the scope of the visit including if it is limited to the relevant Condition and associated standards or if this will be broadened to include other standards, for example those relating to program governance.
  8. Notification of the activity will be provided to the Deputy Director General – Prevention Division via the Committee's standard reporting processes.
  9. Ideally the same Assessors who reviewed the initial response to the Condition will conduct the interviews with the provider, however, should this not be possible, new Assessors will be endorsed by the Committee and facility acceptance will be sought.
  10. Formal correspondence will be sent to the provider outlining the purpose, scope, required staff and potential outcomes of the activity.
  11. PMAQ agency staff will provide verbal advice to the provider of the correspondence.
  12. PMAQ agency staff will co-ordinate the interviews.
  13. Assessor recommendations to be made to the PMAQ Accreditation Committee either in or out of session.
  14. The PMAQ Accreditation Committee will decide on the outcome of the Conditions and any associated review undertaken as well as the ongoing accreditation status of the program.
  15. Formal correspondence will be provided to the provider on the outcome of the activity and their accreditation status.
  16. Notification of the outcome and potential impacts will be provided to the Deputy Director General – Prevention Division via the Committee's standard reporting processes.

**Note:** Any facility, site or unit that is the subject of an accreditation decision has the right to apply for review of an accreditation decision. The principles of procedural fairness will be applied to all applications for review of accreditation decisions received by PMAQ.

## Version Control

Version	Date	Comments
1.0	3 December 2020	Endorsed by Accreditation Committee