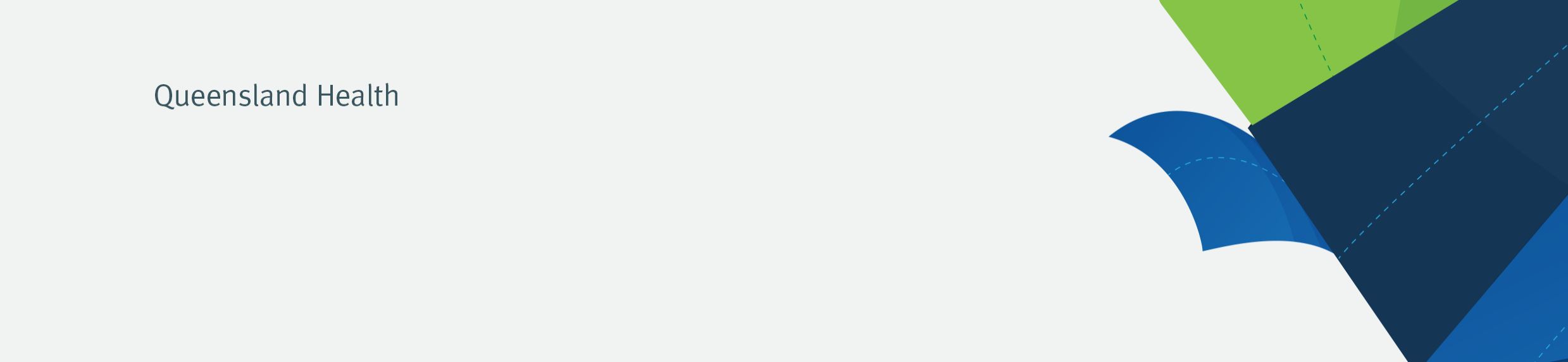
**We**

Phase 1 Provider self-assessment

Preparation for and implementation of the National Framework for Prevocational Medical Training



**Guiding notes**

2023-2025 will see Queensland-based providers focus on transitioning their programs to meet the requirements and standards of the National Framework for Prevocational (PGY1 & PGY2) Medical Training. During the implementation period Prevocational Medical Accreditation Queensland (PMAQ) PMAQ will work collaboratively with providers to support the implementation of the new framework, ensure that accreditation standards are met or that there is satisfactory organizational progress toward the achievement of such.

The self-assessment (attached) is required in phase one of the implementation and is aligned to two key sections of the framework: training and assessment requirements, and the requirements for programs and terms. The purpose of this self-assessment is two-fold, firstly it is to support the providers readiness to implement some of the requirements and secondly to demonstrate continued progress towards the implementation to PMAQ. While providers must demonstrate satisfactory progress in the implementation, it is acknowledged that the progress of facilities may differ, however continuous progress must be demonstrated.

This self-assessment requires providers to evaluate their progress against the key statements below. If a provider is working towards meeting a requirement or has not yet met it, they are asked to provide a brief description of the steps they are undertaking to meet it in future.

A component of the self-assessment is completion of the term categorization spreadsheet (or similar), to ensure **currently** **accredited terms** are assigned appropriate clinical experience categories (A-D).

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| The self-assessment checklist and accompanying term categorisation spreadsheet is to be submitted to PMAQ on or before  18 September 2023. |

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| For new PGY1 terms or those requiring significant change, a change in circumstance request is to be submitted.  Change in circumstance requests are to be submitted to PMAQ by 11 August 2023. |

**SELF-ASSESSMENT CHECKLIST**

SUBMIT ON OR BEFORE 18 SEPTEMBER 2023

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **REQUIREMENT** | | **YES** | **NO\*** | **WORKING TOWARDS\*** | **\*DESCRIBE STEPS & TIMELINE TO ACHIEVE** |
| TRAINING & ASSESSMENT REQUIREMENTS | 1. The governance and oversight arrangements for the program are clearly defined and their role in the implementation of the revised framework is clear. This should include the roles and responsibilities of the executive officer with responsibility for the program (e.g., EDMS or equivalent and the committee with program oversight, e.g., the MEC or equivalent) |  |  |  |  |
|  | 1. The abovementioned roles / committees are aware of the risks associated with the transition to the revised framework and appropriate mitigation strategies, if required, have been implemented |  |  |  |  |
|  | 1. A program-wide process has been defined to ensure all prevocational doctors participate in beginning of term discussions (e.g., a guideline or procedure) and mechanisms identified to monitor this to ensure compliance |  |  |  |  |
|  | 1. Processes implemented (for example, supervisor training) to ensure all interns commencing in 2024 will have mid and end-of-term assessments completed on the national form |  |  |  |  |
|  | 1. For the assessment review panel: |  |  |  |  |
|  | * + 1. the terms of reference have been confirmed |  |  |  |  |
|  | * + 1. A process for training and support of panel members in their role on the panel has been defined |  |  |  |  |
|  | * + 1. The panel has been established |  |  |  |  |
|  | 1. For supervisor training on the PGY1 requirements of the new framework: |  |  |  |  |
|  | * + 1. Training of supervisors has commenced |  |  |  |  |
|  | * + 1. A mechanism to monitor compliance is in place |  |  |  |  |
|  | * + 1. A process to manage issues or non-compliance is in place |  |  |  |  |
| NATIONAL STNDARDS & REQUIREMENTS | For currently accredited PGY1 terms: |  |  |  |  |
|  | 1. All terms have been allocated to one or two clinical experience categories (submission of the [term categorisation spreadsheet](https://healthqld.sharepoint.com/:x:/r/teams/QldPrevocationalTrainingNetwork-Resources/Shared%20Documents/General/Shared%20resources/DRAFT-%20Term%20spreadsheet%20for%20categorisation.xlsx?d=w29f96370953d4ddeb4f68a3bbe573bd3&csf=1&web=1&e=efSfXg) is due by 18 Sep 2023) |  |  |  |  |
|  | 1. A term description/orientation guide for all terms has been completed and covers all items listed on the Tip Sheet – Term orientation guide (AMC template does not need to be used if local guide includes all requirements listed on Tip Sheet) |  |  |  |  |
|  | 1. Local governance and policy documents have been reviewed and updated to ensure the new standards are reflected |  |  |  |  |
|  | 1. PGY1 allocations have been reviewed to ensure all allocations will meet the new standards in 2024 |  |  |  |  |
|  | 1. A gap analysis to inform an action plan to address the new cultural safety focussed outcome statements and standards has been undertaken (refer to tip sheet)? |  |  |  |  |
|  | 1. Processes to monitor and evaluate the implementation and effectiveness of A to J above have been defined, which include reporting the findings to those with program oversight and governance responsibilities |  |  |  |  |

**Continue to the next page for delegate certification**

**DELEGATE CERTIFICATION**

| **Accountable officer certification (EDMS or equivalent)** | |
| --- | --- |
| **Name** |  |
| **Position** |  |
| **Statement** | As the officer with responsibility for the prevocational training program at this provider, I certify this is an accurate reflection of work undertaken and to be undertaken in preparation for implementation of requirements and standards of the National Framework for Prevocational (PYG1 and PGY2) Medical Training. |
| **Signature** |  |
| **Date** |  |
| **Chair of the prevocational medical training governance committee (or equivalent) certification** | |
| **Name** |  |
| **Roles** | 1. Chair of the prevocational training governance committee |
| **Statement** | As Chair of the prevocational training governance committee, I certify this is an accurate reflection of work undertaken and to be undertaken in preparation for implementation of requirements and standards of the National Framework for Prevocational (PYG1 and PGY2) Medical Training. |
| **Signature** |  |
| **Date** |  |