



SOUTH AUSTRALIAN
MEDICAL EDUCATION & TRAINING
HEALTH ADVISORY COUNCIL

NEW UNIT ACCREDITATION PROCESS

Version: 1.0

Purpose

A process for health services and the SA MET Health Advisory Council Accreditation Committee (the Accreditation Committee) to follow to accredit new training terms for prevocational doctor positions.

Overview

Through the process of accreditation, an accreditation team formally assesses health services that employ prevocational doctors against the [Australian Medical Council's National Framework for Prevocational \(PGY1 and PGY2\) Medical Training](#). The SA MET Health Advisory Council (Advisory Council) has delegated authority from the Medical Board of Australia (MBA) to accredit intern positions in South Australia and reports on the accreditation of other prevocational doctors positions to the South Australian Minister for Health and Wellbeing. The Accreditation Committee has been delegated the responsibility to review, assess and make recommendations to the Advisory Council on the accreditation of PGY1 and PGY2 positions.

The new unit accreditation process focuses on orientation, supervision, clinical exposure and medical education opportunities. The new unit accreditation process considers some health service-wide aspects within the National Standards, but in less detail than a full health service accreditation assessment.

The process for accrediting new units for PGY1 and PGY2 positions are detailed below.

Process for accrediting a new PGY1 unit:

1. The health service to complete the New Unit Accreditation Application via the Virtual Accreditation Manager System (VAM) and submits a completed term description.
2. The SA MET Unit reviews the New Unit Accreditation Application, term description and other relevant documents; and prepares a briefing to the Accreditation Committee at their next meeting.
3. The Accreditation Committee reviews the application and, if no concerns are identified, provisionally accredits the unit, with a site visit to occur after two filled terms. If the health service is due for a full facility assessment site visit within 12 months of completing the filled PGY1 terms, the unit assessment may be incorporated into the full facility process, provided the PGY1 end-of-term evaluation data is satisfactory.
4. The SA MET Unit to liaise with the health services' Medical Education Unit (MEU) to confirm a suitable date and time for the site visit to occur and then establish an accreditation surveyor team ensuring there are no identified conflicts of interest. The health service will have the opportunity to also confirm the surveyor team and ensure there are no identified conflicts of interest.
5. The health service develops a schedule for the accreditation surveyors. The accreditation visit will include individual interviews with the Term Supervisor, Registrars, prevocational doctors, Medical Education Officer (MEO) and the Director of Clinical Training (DCT).
6. The accreditation surveyors convene to discuss the new unit application. The SA MET Unit contacts the health service if additional information is required before the site visit.
7. At the assessment visit the accreditation survey 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 if required.
8. The accreditation surveyors convene after the interviews to discuss their findings, identify any commendations, recommendations or conditions. The SA MET Unit compiles a draft accreditation report from these discussions and with notes taken during the visit and finalises with the accreditation surveyors.

9. The SA MET Unit to provide the accreditation report, excluding the accreditation outcomes and any commendations or conditions, to the CEO, EDMS, DCT and MEO for factual checking.
10. The SA MET Unit make changes to the draft report (if required) after consulting with the accreditation survey team and the health service.
11. The accreditation report is considered by the Accreditation Committee, and a recommendation on the accreditation status is made and a briefing prepared for the Advisory Council for final endorsement.
12. The Advisory Council is provided with the accreditation report for consideration and endorsement at their next meeting.
13. The health service is provided with the accreditation report and the outcome, with the right of appeal to accreditation recommendation, according to the SA MET Health Advisory Council Accreditation Internal Review Policy and Procedure.

Process for accrediting a new PGY2 unit:

1. The health service to complete the New Unit Accreditation Application via the Virtual Accreditation Manager System (VAM) and attached a completed term description.
2. The SA MET Unit to review the New Unit Accreditation Application, term description and any other relevant documents.
3. The Accreditation Committee considers the application and if no concerns are noted, provisionally accredits the unit, subject to satisfactory prevocational doctor feedback after two terms, as appropriate. Prevocational doctor feedback could be provided as term evaluation data or a DCT report.
4. Should no major concerns be identified, the Accreditation Committee can accredit the unit for a specified period of time and any conditions (if necessary). The health service is then notified in writing of accreditation outcome.
5. Should concerns be identified an accreditation visit may be requested.
6. At the assessment visit the accreditation surveyors 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.
7. The accreditation surveyors convene after the interviews to discuss their findings, identify any commendations, recommendations or conditions. The SA MET Unit compiles a draft accreditation report from these discussions and with notes taken during the visit and finalises with the accreditation surveyors.
8. The SA MET Unit to provide the accreditation report, excluding the accreditation outcomes and any commendations or conditions, to the CEO, EDMS, DCT and MEO for factual checking.
9. The SA MET Unit make changes to the draft report (if required) after consulting with the accreditation survey team and the health service.
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11. The Advisory Council is provided with the accreditation report for consideration and endorsement at their next meeting.
12. The health service is provided with the accreditation report and the outcome, with the right of appeal to accreditation recommendation, according to the SA MET Health Advisory Council Accreditation Internal Review Policy and Procedure.

Timeframe

The health service should allow sufficient time for the required approval processes. Provisional approval from the Accreditation Committee is required prior to PGY1s being placed in any unit.

The new unit accreditation approval processes can typically take up to two to three months after the assessment visit has been facilitated.

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 health services 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 health service 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

- > Accreditation Policy and Procedure
- > Term Description Template
- > Guide to developing a Term Description
- > SA MET Health Advisory Council Conflict of Interest Policy and Procedure
- > SA MET Health Advisory Council Accreditation Internal Review Policy and Procedure
- > Australian Medical Council's National Framework for Prevocational (PGY1 and PGY2) Medical Training

Glossary

Accreditation – a quality assurance process that establishes and monitors the education and training provided for prevocational doctors to ensure high standards of clinical training. Accreditation may be granted for six months, 12 months, two years or four years.

Australian Medical Council – the Australian Medical Council's purpose is to ensure that the standards of education, training and assessment of the medical profession promote and protect the health of the Australian community.

Health Service – the Local Health Network (LHN) in which prevocational doctors work and train. LHNs comprise of single or groups of public hospitals which have a geographical or functional connection.

National Standards – health services are assessed against the Australian Medical Council's National Standards for Prevocational Training.

PGY – Postgraduate year, usually used with a number to indicate the number of years after graduation from medical school. PGY1 is the first postgraduate year, also known as internship, and PGY2 is the second postgraduate year.

Prevocational Doctor - A doctor completing generalist, work-based clinical training during the first two years after graduation. The term is sometimes used to refer to any recent medical graduate who has not commenced a vocational training program, including PGY3 and beyond.

South Australian Medical Education and Training Accreditation Committee – a Committee of the SA MET Health Advisory Council that is responsible for the efficient and effective prevocational accreditation process taking into account jurisdictional requirements, national program developments, and the needs of prevocational doctors undertaking a prevocational training program.

South Australian Medical Education and Training Health Advisory Council – established to improve the quality of education, training and welfare for Trainee Medical Officers (TMO) within the State; and make recommendations for the accreditation of TMO positions in health services.

South Australian Medical Education and Training Unit: Supports the functions of the SA MET Health Advisory Council and its Committees and Subcommittees. The SA MET Unit is committed to supporting the education and training of prevocational doctors in South Australia.

Monitoring

The SA MET Unit will review this document in December 2026.

For more information:

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Document history

Date effective	Author/Editor	Approved by	Version	Change Reference
February 2013	Project Officer, Accreditation	SA MET Health Advisory Council Accreditation Committee	V0.1	Development of process
June 2013	Project Officer, Accreditation	SA MET Health Advisory Council Accreditation Committee	V0.2	Update process
October 2014	Project Officer, Accreditation	SA MET Health Advisory Council Accreditation Committee	V0.3	Align with revised Accreditation Standards
February 2015	Project Officer, Accreditation	SA MET Senior Project Officer	V0.4	Minor formatting and wording change
December 2015	Project Officer, Accreditation	SA MET Senior Project Officer	V0.5	Updated section 'Timeframe'
August 2017	Project Officer, Accreditation	SA MET Senior Project Officer	V0.6	Updated intern post process
October 2018	Project Officer, Accreditation	Manager Education & Accreditation	V0.7	Reviewed. Minor updates
November 2020	Project Officer, Accreditation	Manager Education & Accreditation	V0.8	Reviewed. Minor updates
December 2023	SA MET Accreditation Committee	SA MET Health Advisory Council Accreditation Committee	V0.9	Reviewed to align with AMC National Framework.
August 2025	Manager, Accreditation	SA MET Accreditation Committee	V1.0	Updated process