

# Intern Medical Accreditation

## Department of Health Standard

QH-IMP-476:2020

### 1. Statement

Prevocational Medical Accreditation Queensland (PMAQ) administers a system of accreditation, that ensures quality education and training for medical interns that enables the provision of safe patient-centered care.

Through its accreditation processes, PMAQ evaluates and monitors Intern Training Programs in Queensland and reports on accreditation activities and outcomes to regulatory authorities as required. Prevocational Medical Accreditation Queensland delivers this service on behalf of the Department of Health.

All Intern Training Programs must be accredited by PMAQ prior to the commencement of medical interns in these programs, with interns only to be allocated to approved posts.

### 2. Scope

This standard provides the basis for PMAQ's accreditation processes used to assess Intern Training Programs. It underpins PMAQ's Accreditation Policy to ensure there is a reliable, open and transparent framework in place to support Intern Training Program accreditation processes in Queensland in accordance with the Australian Medical Council (AMC) Standards.

### 3. Requirements

The Department of Health is accredited by the Medical Board of Australia (MBA) as an intern training accreditation authority and has responsibility for accrediting Intern Training Programs and the associated posts in Queensland. PMAQ is the area of the department that is responsible for prevocational accreditation. Responsibility for the accreditation of Intern Training Programs in Queensland has been delegated by the department to the PMAQ Accreditation Committee.

The Medical Board of Australia's *Registration Standard: Granting general registration as a medical practitioner to Australian and New Zealand medical graduates on completion of intern training* (Registration Standard) defines the supervised intern training requirements that must be completed for Australian and New Zealand medical graduates to be eligible for general registration. As per the Registration Standard, training terms must be accredited against approved accreditation standards for intern training. It is the Accreditation Committee's responsibility to ensure that accredited Intern Training Programs in Queensland meet the requirements of the Registration Standard.

PMAQ's accreditation process assesses and monitors the quality of intern medical education and training against established standards. It comprises compliance, quality assurance and quality improvement elements that are complementary to service delivery and training. PMAQ's process ensures facilities offer appropriate education, training, supervision and support for medical interns to enable the delivery of safe patient care.

The Department, through PMAQ provides strategic oversight of Queensland's accreditation model. The Department is also responsible for ensuring the system of accreditation is efficient, reliable and responsive to jurisdictional requirements, national program developments and the needs of medical interns.

## 4. Glossary

Training provider: the entity approved by PMAQ to deliver an accredited Intern Training Program

Facility: A health facility (facility) is any location where healthcare is provided. Health facilities range from small clinics and General Practices, rural hospitals to larger regional and metropolitan hospitals.

Intern Training Program: The 47-week training program that Australian medical graduates must successfully complete before becoming generally registered with the Medical Board of Australia.

Term: Intern Training Programs are made up of a series of terms (also known as rotations or placements) offered across a range of specialties to ensure interns have exposure to medical practice.

Post/Position: Each year Australian states and territories are allocated a specific number of intern training posts. Individuals are allocated to facilities based on their application and the number of positions available at each facility. Interns are only permitted to work in accredited intern posts, and they are not permitted to carry out any clinical work outside their allocated intern position.

## 5. Principles of accreditation

The accreditation process includes elements of professional and peer review. It is underpinned by the following Principles of Intern Accreditation. These principles are an extrapolation of the six core principles set out in the PMAQ Accreditation Policy.

- Safe and high-quality patient-centred care is the primary consideration for all accreditation standards, policies and processes.
- Accreditation standards, policies and processes will apply to all Intern Training Programs, their terms and posts.
- Accredited Intern Training Programs should meet the requirements for general registration.
- Accreditation will be based on a predetermined quality cycle that supports ongoing improvement in outcomes. This cycle should include self-assessment and regular evaluation of the accreditation system in consultation with key stakeholder groups.
- PMAQ will have the authority and independence to set standards, determine policies, implement processes and make appropriate determinations.
- PMAQ will have valid and reliable processes based on explicit standards that enable peer and professional review of Intern Training Programs.

- Accreditation standards will be clearly enunciated, defensible, practical and transparent to all stakeholders. They should incorporate process and outcome indicators based on objective criteria.
- Accreditation processes will be administered efficiently and equitably.
- Accreditation policies will aim to foster quality education, training and support for all medical interns
- Accreditation standards, policies and processes will be consistent with local, national and international best practice.
- Accreditation standards, policies and processes will operate within relevant legislation and will include an appropriate internal review mechanism based on the principles of natural justice.
- Accreditation standards, policies and processes will be designed to minimise the accreditation burden for Training Providers and PMAQ accreditation personnel. Where possible there should be coordination with other accreditation bodies.
- Accreditation of medical intern training should be supported by adequate resources and infrastructure.

## 6. Standards

The Accreditation Standards are the requirements that are to be met by facilities in the delivery of medical intern education and training. The PMAQ Accreditation Standards (the Standards) have eight domains:

1. The context in which intern training is delivered
2. Organisational purpose
3. The intern education and training program
4. The training program – teaching and learning
5. Assessment of learning
6. Monitoring and evaluation
7. Implementing the education and training framework – medical interns
8. Delivering the training – supervision and educational resources

In order to meet the PMAQ Accreditation Standards, training providers must demonstrate that the Intern Training Programs provide safe and effective education, training and support programs for medical interns. Throughout the accreditation process assessor teams will evaluate the available evidence against these Standards.

## 7. Responsibilities

Formal structures and practices have been established to manage an efficient and effective accreditation process. Responsibility for the model of accreditation delivered by PMAQ rests with the Department of Health. The Department of Health is supported by the Accreditation Committee and PMAQ.

### 7.1 Accreditation Committee

The PMAQ Accreditation Committee (the Accreditation Committee) develops, monitors and evaluates intern accreditation standards and processes, evaluates all accreditation applications and resulting reports submitted by accreditation assessor teams and is responsible for making final accreditation decisions. The Accreditation Committee receives secretariat support from PMAQ. In addition to the responsibilities summarized above, the committee:

- Approves accreditation guidelines and processes.
- Manages accreditation risks and quality improvement processes
- Provides advice to PMAQ on the interpretation and application of standards as required.
- Acts on advice provided by the policy and procedure subcommittee.
- Endorses the composition of assessor teams.
- Works in collaboration with PMAQ in the development of resources to support accreditation activities, including assessor resources and workshops.
- Reports to the Deputy Director General, Department of Health on the activity of the committee and actual or potential risks associated with these.
- Determines and oversees the accreditation schedule.
- Fulfils their responsibilities as set out in the PMAQ Accreditation Committee Terms of Reference.

## 7.2 PMAQ

PMAQ is committed to supporting providers throughout the accreditation cycle, including preparations for full accreditation assessments and in meeting conditions and recommendations. PMAQ agency staff provide oversight of the day-to-day administration of Queensland's system for the accreditation of Intern Training Programs. This includes the following activities:

- Development and publication of approved policies, guidelines and other resources to support the accreditation cycle and activities.
- Liaison with the Medical Board of Australia and Australian Medical Council on the status of Queensland's accredited Intern Training Programs and positions.
- Monitoring the providers compliance with the Standards throughout the accreditation cycle.
- Liaison with and provision of support and advice to training providers
- Coordination and provision of support to assessor teams for all accreditation activities.
- Providing Secretariat support to the Accreditation Committee.
- Development and maintenance of a team of skilled accreditation assessors.

## 7.3 Accreditation Assessor Teams

The size and composition of each assessor team varies depending on the accreditation activity being undertaken. The composition of teams is carefully considered to ensure an appropriate and diverse skill set. This may include individuals with a mix of medical administration, medical education and senior clinical expertise as well as a junior doctor and a member with expertise working in the type of facility being assessed. All assessor teams are accepted by the training provider and endorsed by the PMAQ accreditation committee prior to the commencement of an accreditation activity. Assessment teams are responsible for the following:

- Fulfil the responsibilities of the role in accordance with the PMAQ assessor responsibilities statement.
- Making recommendations on the accreditation status of Intern Training Programs to the accreditation committee

## 7.4 Junior Medical Officers

The involvement of Junior Medical Officers, in particular those in their prevocational years, is integral to the PMAQ system of accreditation. The membership of the Accreditation Committee includes Junior Medical Officer Forum Queensland (JMOFQ) representatives to ensure the perspectives of junior medical officers are considered. The JMOFQ is comprised of junior medical officers from health facilities in Queensland that train junior medical doctors and advocates for the quality and continued improvement of junior medical doctor training and education programs in Queensland. Further information on the JMOFQ can be found at [pmaq.com.au](http://pmaq.com.au).

Each PMAQ accreditation assessor team normally includes one junior medical officer. PMAQ also seeks feedback from junior medical officers as part of the assessment of every Intern Training Program. This information is collected using the data from term evaluations, confidential interviews and online surveys.

## 8. The Accreditation Process

### 8.1 Timelines

In Queensland the maximum accreditation cycle for facilities is four years. In that cycle, facilities are able to apply to have new units accredited for medical intern training and may seek approval for changes to terms.

The process of accreditation, be it for a new term or facility or for the re-accreditation of an existing one, from preparation through until notification of the outcome, may take several months. Facilities are urged to submit applications for accreditation of new medical intern posts as early as possible in each calendar year. The accreditation timeline provides a snapshot of the important dates of the accreditation process and will include due dates for initial submission, site visit date/s and dates for the presentation of the accreditation report to the accreditation committee for an accreditation decision.

A change of circumstance to an accredited unit, as defined by the Change of Circumstance Guideline, must be notified to the Accreditation Committee as soon as it is evident that the change will occur. The accreditation process documents provide a detailed step by step guide to the accreditation process including the role of providers and the Accreditation Committee and the Department of Health.

### 8.2 Applying for accreditation

PMAQ will undertake a range of accreditation activities including the re-accreditation of Intern Training Programs and the associated terms and posts; accreditation of new terms; accreditation of new programs and accreditation of a change to a program, facility or term. Training providers are encouraged to contact PMAQ to discuss the proposed activity prior to completion of the application to ensure the correct process is followed.

Processes and associated documents which must be completed to apply for accreditation are:

- **Re-accreditation of an accredited Intern Training Program**- This will normally be scheduled by PMAQ prior to the expiry of the current accreditation cycle and include analysis of evidence and formal interview with staff, interns and others involved with the Intern Training Program. This will normally occur in the year prior to expiry of accreditation. The training provider will be required to submit evidence at least three months prior to the scheduled interviews or site visit.
- **Accreditation of a new term** - The training provider is required to submit a request for this activity to PMAQ. This request will be presented to the accreditation committee for consideration of inclusion into the accreditation schedule. Once approved the facility is required to submit a written application and accompanying evidence at least three months prior to implementation of the proposed change. A site visit may occur; however, this is at the discretion of the assessor team.
- **Accreditation of a new program** - The training provider is required to contact PMAQ at least six months prior to the proposed recruitment period. The accreditation committee will consider the request for inclusion in the accreditation schedule. A written application is required and normally a site visit will occur, however the timing of this is at the discretion of the assessor team. The development and accreditation of a new Intern Training Program is a major undertaking. Given this, it is recommended that providers considering the introduction of a new program contact PMAQ as early as possible for guidance regarding the accreditation process.
- **Accreditation of a change in circumstance** – Accredited intern training providers are required to contact PMAQ to discuss the change and determine the documentation and process required to assess the change. The assessment of changes in circumstance is based on the actual or potential impact the change will have on interns and their training program.

### 8.3 Change in Circumstance

A Change in Circumstance (CiC) refers to any change that impacts the education and training of interns and links to the Standards. Changes to Intern Training Programs may occur at any time in the accreditation cycle and can include any changes to the health service, Intern Training Program or terms that may affect intern training and require assessment by PMAQ. Changes that will normally require review by PMAQ include:

- Absence of senior staff with significant roles in intern training for an extended period with no replacement (for example the Director of Medical Services or supervisor of intern training is absent, **without** a replacement for more than one month)
- Plans for significant redesign or restructure of the health service that impacts on interns (for example, a significant change to clinical services provided or a ward closure causing change to caseload and case mix for the term)
- Rostering changes that significantly alter access to supervision or exposure to educational opportunities
- Resource changes that significantly reduce administrative support, facilities or educational programs available.
- The addition, removal of or changes to existing training terms (including off-site terms) where the change will alter the intern training experience

PMAQ assessors review the evidence submitted for changes to an Intern Training Program against the standards and make recommendation to the Accreditation Committee on the outcome of the assessment.

PMAQ does not normally require notifications of changes of term or clinical supervisors as such changes are managed as part of the day-to-day administration of Intern Training Programs. Further information regarding the management of CiCs can be found in the PMAQ Change in Circumstance Guideline.

## 8.4 Accreditation Outcomes

Assessor teams are tasked with examining the available evidence against the Standards and making recommendations based on this information to the Accreditation Committee for decision. A rating is awarded to each Standard with conditions of accreditation imposed when a rating of “*partially met*” or in certain circumstances “*not met*” is determined. The Accreditation Committee may also impose “*monitoring conditions*” to any rating of “*fully met*” or “*partially met*”. Accredited providers are required to submit responses to their conditions of accreditation on an annual basis in order to demonstrate ongoing compliance with the Standards. The overall performance of the facility against the Standards is used to inform the decision on the accreditation status of a facility.

### 8.4.1 Ratings

Following evaluation of the available evidence a rating is awarded to each Standard. A three-point rating scale is used: fully met, partially met and not met.

- **Fully met** – the facility has demonstrated the standard is met
- **Partially met** – the facility has demonstrated that the standard is partially met, however some follow-up activity is required to fully adhere to the standard. When this rating is awarded, conditions will be imposed on the facilities’ accreditation status.
- **Not met** – the facility has not demonstrated they have met the standard for the domain. This rating may result in the revocation of a facility’s accreditation status or the imposition of a condition on the facility to address identified deficits.

### 8.4.2 Conditions of Accreditation

Conditions of accreditation may be imposed on a facility’s accreditation status and generally relate to compliance. Facilities must demonstrate that they are working towards the achievement of a condition or that it has been met within a specified period of time to ensure ongoing accreditation. Failure to demonstrate an attempt to meet a condition by a specified date may jeopardise the accreditation status of an Intern Training Program. There are two categories of conditions – general and monitoring conditions.

**General Conditions** – where additional activity is required to fully adhere to a Standard. Conditions are applied to specific Standards and may apply to specific elements of, or the full Intern Training Program

**Monitoring conditions** – maybe applied when a standard is awarded a rating of fully or partially met, however further information is required to monitor the progress of elements of the Intern Training Program. This may for example include evaluation data from new terms.

### 8.4.3 Quality improvement recommendations

Quality improvement recommendations provide advice to a facility on how the overall quality of the Intern Training Program may be improved. Quality improvement recommendations are not accompanied by due



dates however a response in relation to the recommendations is required as part of the monitoring process through the progress report and may be followed up by assessor teams during subsequent accreditation activities.

## 8.6 Duration of accreditation

Accreditation may be awarded for a period of up to four years. There are a number of possible outcomes for accreditation, including: four-year accreditation; one to three-year accreditation; 12-month accreditation (new term or facility); and removal/not granting of accreditation. A facility can be granted four years' accreditation with some conditions being imposed. Accreditation for a shorter period may be deemed appropriate where there was not full adherence to standards.

## 8.7 Monitoring of accredited programs and terms

PMAQ monitor's all accredited Intern Training Programs and the associated terms and posts throughout the period of accreditation through progress reports, responses to conditions of accreditation, notifications of changes in circumstance and re-accreditation assessments.

Conditions of accreditation are generally imposed during new or re-accreditation activities and require a facility to submit a specific response by a specified date. Accredited facilities are also required to submit progress reports during their period of accreditation to allow PMAQ to ensure each Intern Training Program maintains compliance with the Standards.

Responses to conditions of accreditation, CiCs and progress reports will be evaluated by assessors against the PMAQ Accreditation Standards. Recommendations on a facility's adherence to the relevant standards will be presented to the Accreditation Committee for approval.

If there are concerns regarding a program or placement the PMAQ Accreditation Committee may implement an additional monitoring process whereby regular updates are provided by the facility until such time as the Accreditation Committee is satisfied or it is determined that accreditation should be revoked.

Accredited training providers are expected to monitor intern training programs to ensure they continue to meet requirements throughout the duration of accreditation. Any concerns, issues or material changes to programs are to be notified to PMAQ.

### 8.7.1 Progress Reports

Accredited training providers are normally required to submit a progress report at the mid-point of their accreditation. The report demonstrates the performance of the accredited program against the Standards, identifying any challenges or Intern Training Program actual or planned changes that have occurred since the initial assessment. Reports will be reviewed by PMAQ assessors with recommendations made to the Accreditation Committee regarding:

- The Intern Training Program's adherence with the Standards
- The status of any outstanding conditions of accreditation
- Requirements for further information or monitoring
- Any identified risks regarding the ongoing accreditation of the Intern Training Program.



The Accreditation Committee will make a decision regarding the ongoing accreditation of the program, including any additional monitoring that is required and provide feedback to the provider.

## 8.8 Review

An intern training provider may seek for an accreditation decision that has been approved by the PMAQ Accreditation Committee to be formally reviewed by the Department of Health. Requests for Review must be received within 30 business days from receipt of written advice of the accreditation decision and are made to the Chief Health Officer and Deputy Director-General, Queensland Health. An independent Accreditation Review Committee convened by the Department of Health will be appointed to undertake a review of the accreditation decision and be responsible for making a new accreditation decision by way of a fresh hearing of the merits as set out in the PMAQ Accreditation Review Procedure. An accreditation decision, taken by a Review Committee in this way, may result in - the ratification of the previous decision; the adoption of a different accreditation decision; and/or confirmation of, or changes to, any conditions, including the imposition of new conditions.

## 9. Application Process

### 9.1 Eligibility

Public and private Queensland health care organisations that are interested in employing interns at their facility must have an accredited Intern Training Program or offer one or more accredited terms as a component of an accredited Intern Training Program prior to the placement of interns in the term or post. The overall structure and duration for intern training is set by the Medical Board of Australia through the National Framework for Medical Internship. Intern training programs are required to include all elements of this National Framework in their design and delivery.

Terms offered by secondment sites are reliant on the ongoing accreditation and support of accredited training providers to employ interns. PMAQ requires new secondment sites to contact the relevant accredited training provider in the first instance regarding the potential for new terms to be added to an existing provider's Intern Training Program.

Accredited training providers seeking accreditation of a single term or multiple terms of an existing Intern Training Program must do so through the PMAQ Change in Circumstance process. The exception to this is training providers that are seeking accreditation of new terms as part of the facility's scheduled re-accreditation assessment.

### 9.2 Application Process

The accreditation process is the same for both currently accredited programs and for programs which are applying for new accreditation. Programs seeking initial accreditation are strongly encouraged to contact PMAQ in the first instance to confirm the facility's eligibility for accreditation and to schedule the assessment of their application. The accreditation assessment process has four phases and depending on the size and complexity of the Intern Training Program may take up to six months from the date of submission of an approved application for an accreditation assessment to be completed. The four phases of the accreditation process include:

- Application submission
- Assessment (including site visit)
- Feedback and fact checking
- Accreditation Decision

PMAQ will advise providers directly regarding expected timeframes for the completion of each accreditation process.

#### 9.2.1 Application Submission

To apply for accreditation a facility must complete the PMAQ accreditation application form which can be found at <https://pmaq.com.au> or by contacting PMAQ via email [pmaq@health.qld.gov.au](mailto:pmaq@health.qld.gov.au). The accreditation application form is structured to assist providers to demonstrate that the Intern Training Program meets the Standards. The questions have been written to assist facilities in undertaking a self-

assessment and describing how the processes, systems and resources used to support the Intern Training Program contribute to good quality intern training. The length of the response to each question will be dependent on the size and context of the Intern Training Program. The analysis conducted by the provider in answering the questions will be used;

- to inform PMAQ assessor's understanding of the Intern Training Program
- as a source of evidence
- to assist in preparing for the site visit, and
- to assist assessors in understanding how the provider administers the Intern Training Program and the performance of this program, or compliance with the relevant accreditation standards.

The application questions offer an opportunity for providers to reflect on and analyse the performance of the intern training. The application stage of the accreditation process relies on a provider being open to an honest assessment of its ability to demonstrate, through evidence, performance against the Standards. The questions have been framed to be reflective, to look at what is already in place, what improvements have been or need to be made and the actual or potential impact of these. The gathering and use of empirical evidence in the process of developing an application and in monitoring program performance should be an on-going dimension of any program seeking initial accreditation or re-accreditation. It is recommended that the providers response is shared and tested with Medical Education Unit staff, supervisors, interns and other stakeholders. It is hoped that the application process will support the facility to better understand how the Intern Training Program is performing, while encouraging innovation and supporting a culture of continuous improvement.

The providers responses to the questions in the application should be focused on the delivery of the Intern Training Program and in particular how it demonstrates compliance with the PMAQ Intern Accreditation Standards through the:

- achievement of quality learning experiences for interns
- provision of appropriate supervision
- reliable and robust assessment process and
- an imbedded system of monitoring, evaluation and quality improvement.

PMAQ uses a number of strategies to inform the assessment of quality learning experiences and for reviewing the quality of the systems in place for monitoring, evaluation and quality improvement. To support the assessment of this element of Intern Training Programs it is recommended that facilities include the following in their applications:

- Program Reviews: These are a systematic, rigorous, objective and impartial examination of the governance of a program, including how effectively a program is operating. Well executed program reviews will demonstrate continuous improvement and program development. Program reviews discuss the mechanisms that are in place to capture program information, evaluate, solve problems and review effects of any program changes. A facility will need to describe how these mechanisms work to ensure quality monitoring and articulate how these existing structures and processes positively contribute to program delivery, or help facilities clarify and address deficits. It is expected that reviews will influence ongoing evaluations of program and term teaching, learning and intern outcomes over and above the mechanisms and their reporting cycles. Reviews may also be used to identify whether the program is up to date,

relevant and valid when compared against any developments in medical education, each specialty, the intern curriculum, supervision and teaching and learning pedagogy.

- Term Reports: Examine how any data received on a term has been used to inform term modifications and improvements. They include discussion of how clinical and term supervisors have been included in reviewing, designing, implementing and further reviewing proposed changes or quality improvements. These reports should also include analysis of the quality of the supervision offered to interns in each term.
- Education Reports: Are an examination of data gathered from the education program (including the annual orientation) and how this has been used to modify and inform program improvements. These reports include consideration of how Medical Education Units have engaged term supervisors, governance structures and the medical education literature to inform program implementation.

Further information regarding monitoring, evaluation and quality improvement processes that are required to ensure that Intern Training Programs meet the Standards can be found in the PMAQ Monitoring, Evaluation and Quality Improvement Guideline.

The supervision of interns is another key accreditation compliance measure. As a rule, interns are required to be supervised at all times and each term should have clear and explicit supervision arrangements. The PMAQ Intern Supervision Guideline articulates the accreditation requirements for intern supervision.

### 9.2.2 Assessment

The initial assessment is conducted by the accreditation assessor team and includes careful and thorough examination of the information and supporting evidence provided in the providers application. The assessor team's focus at this stage of the assessment process is in gaining an understanding of the Intern Training Program, its context, purpose, structure, teaching and learning practices, methods of assessment, evaluation, supervision arrangements and support available to interns. This information is then compared against the Standards and used to identify areas for further exploration with the facility.

It is common for the assessor team lead or their representative to hold a pre-site visit briefing with the facility to discuss the team's preliminary findings at this point of the assessment process. The team may also seek additional information from providers at this time.

The site visit is the second stage of the accreditation assessment process. At the site visit the assessor team will interview key personnel involved in the administration and delivery of the Intern Training Program this will include members of the training provider's Executive, medical education staff, clinical and term supervisors, interns and on occasions other junior doctors. The purpose of the visit is to collect additional evidence and test elements of the evidence already provided to allow the assessor team to form a collective judgement on the Intern Training Program's adherence to the Standards. Visits are conducted in the spirit of dialogue and communication between the provider and the assessor team. At the conclusion of the site visit the assessor team lead meets with the provider's Executive and Medical Education Unit to provide preliminary feedback. The team lead will also raise any significant concerns regarding the administration of the Intern Training Program at this point.

Following the site visit the draft accreditation report is prepared.

### 9.2.3 Feedback and Fact Check

The feedback and fact checking process affords providers the opportunity to review the draft accreditation report including the assessor team's findings and recommendations ahead of them being submitted to the Accreditation Committee for decision. Provider feedback may include identified errors of fact or any recommendations made that the provider thinks do not accurately reflect the Intern Training Program's adherence to the Standards at the time of the site visit. All feedback is provided to the assessor team prior to the accreditation report being submitted to the Accreditation Committee. This feedback is also provided to the Accreditation Committee to ensure the views of the provider are accurately reflected during the decision-making process.

### 9.2.4 Accreditation Decision

The PMAQ Accreditation Committee is responsible for all decisions regarding the accreditation of Queensland Intern Training Programs. Committee members are given a copy of the draft Intern Training Program accreditation report, facility feedback and fact check information and a presentation by the assessor team lead to assist them in determining the accreditation status of an Intern Training Program. PMAQ will notify a provider as soon as possible regarding the outcome of their accreditation.

## 9.3 Resources

A range of guidelines have been developed to assist facilities and accreditation teams to prepare for accreditation. These are available on the PMAQ website: <https://pmaq.com.au>.

## 10. Review of PMAQ as an intern accreditation authority

Under the National Registration and Accreditation Scheme, the Australian medical Council (AMC) is responsible for review and accreditation of authorities that accredit Intern Training Programs in each jurisdiction against the *Procedures for assessment and accreditation of intern training accreditation authorities*. PMAQ was granted initial accreditation as an intern training accreditation authority by the Australian Medical Council on 18 December 2018.

## Version Control

Version	Date	Comments
1.0	30 January 2020	New Standard
2.0	3 November 2020	Revisions to reflect adjustments to application process and processes for assessing and managing conditions and changes in circumstance