

CRMEC Policy 20

Process for Responding to Concerns Policy



Scope

To outline the process for responding to a concern raised about the education and training of junior medical officers (JMOs) in the Australian Capital Territory and jurisdictions.

The Canberra Region Medical Education Council (CRMEC) may request documentation from a facility, or undertake a specific site visit, to investigate concerns that have been raised regarding the quality and safety of JMO education and training.

Definition

Concerns can manifest in a number of different guises. These include, but are not limited to, the following:

- Issues relating to the education and training provided to JMOs.
- Issues relating to patient or JMO safety, through supervision or other means.
- Issues relating to the management of the education and training program at a site.

Concerns can be reported through a number of different sources, including JMOs or their advocates, other healthcare staff at a facility and through facility management.

Concerns reported to CRMEC must be made by an identified individual. This individual's identity will be kept confidential by CRMEC. Issues reported anonymously to CRMEC may be noted and used in future visits, but will not be actioned directly. This is to reduce the likelihood of unsubstantiated claims resulting in investigation.

CRMEC Secretariat response

The CRMEC Secretariat (the Secretariat) will attempt to gain as much information as possible from the individual(s) raising the concern before taking action. This information may be gained through email exchanges, including documentation requests, telephone conversations and face-to-face meetings.

Once it has gathered information from the complainant, the Secretariat will inform the CRMEC Chair, and/or the appropriate CRMEC Committee. In conjunction with these resources, the Secretariat will determine if further investigation is required. If so, the Secretariat will contact the Director-General (DG) or Director of Medical Services (DMS) of the facility in which the concern has been raised to discuss the issue. The DG or DMS may be able to resolve the concerns at this point.

Following this discussion, the CRMEC Secretariat will meet with the Chair of the CRMEC and/or the Chair of the Accreditation Committee. This group will make a decision about whether to proceed with an investigation, keep the information for future accreditation visits, or, if the information is determined unusable, to discard the information. Information kept for future accreditation visits will be filed by CRMEC and given to the accreditation team for the relevant unit and/or facility.

Investigating a concern arising during an accreditation visit

Concerns arising during an accreditation visit will be immediately reported to the DG or DMS. The Secretariat will inform the CRMEC Chair immediately if a serious concern arises during a visit.

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The survey team will collect preliminary information about the concern. The survey team, in conjunction with the CRMEC Secretariat and CRMEC Chair will determine if the concern can be investigated within the accreditation visit (as per accreditation visit policy), or if an independent investigation should be conducted (as per procedure for investigation a concern outside an accreditation visit).

Investigating a concern outside an accreditation visit

If a decision is made to investigate a concern, it can take the following courses of action:

- Request documentation from a facility regarding the concern.
- Undertake a tele or videoconference with the facility.
- Undertake a site visit to a unit or facility.

A team will be formed to undertake the investigation on behalf of the CRMEC. This team will consist of trained CRMEC Manager CRMEC accreditation visitors. The specific composition of the team will be determined by the concern and agreed by the Council Accreditation Committee.

Documentation request

CRMEC can request documentation from a unit or facility to help investigate a concern. This documentation may be sufficient to close a concern, or it may provide further information to the investigation ahead of a tele/videoconference or visit.

Tele/videoconference

A tele/videoconference will be arranged when it is deemed necessary to speak with individuals at a site, but not necessary to visit the site in person. The CRMEC team investigating the concern will determine the individuals to be interviewed.

Site visit

A site visit will be undertaken when a tele/videoconference is deemed insufficient or inappropriate to gather the evidence required to investigate the concern. The CRMEC team investigating the concern will determine the individuals to be interviewed.

Follow up

Following its investigation, the Secretariat will produce a report, which will be brought to the Accreditation Committee. This report will contain detail regarding the concern and investigation, with specific outcomes relating to the concern. If the concern has not been resolved, the report will suggest provisos for action by the unit or facility to action within specific timescales. The Accreditation Committee will advise the Council on any further actions and/or proposed provisos.

The potential outcomes of the report for a unit or facility are as follows:

- Continued accreditation
- Conditional accreditation with provisos
- Rescinded accreditation

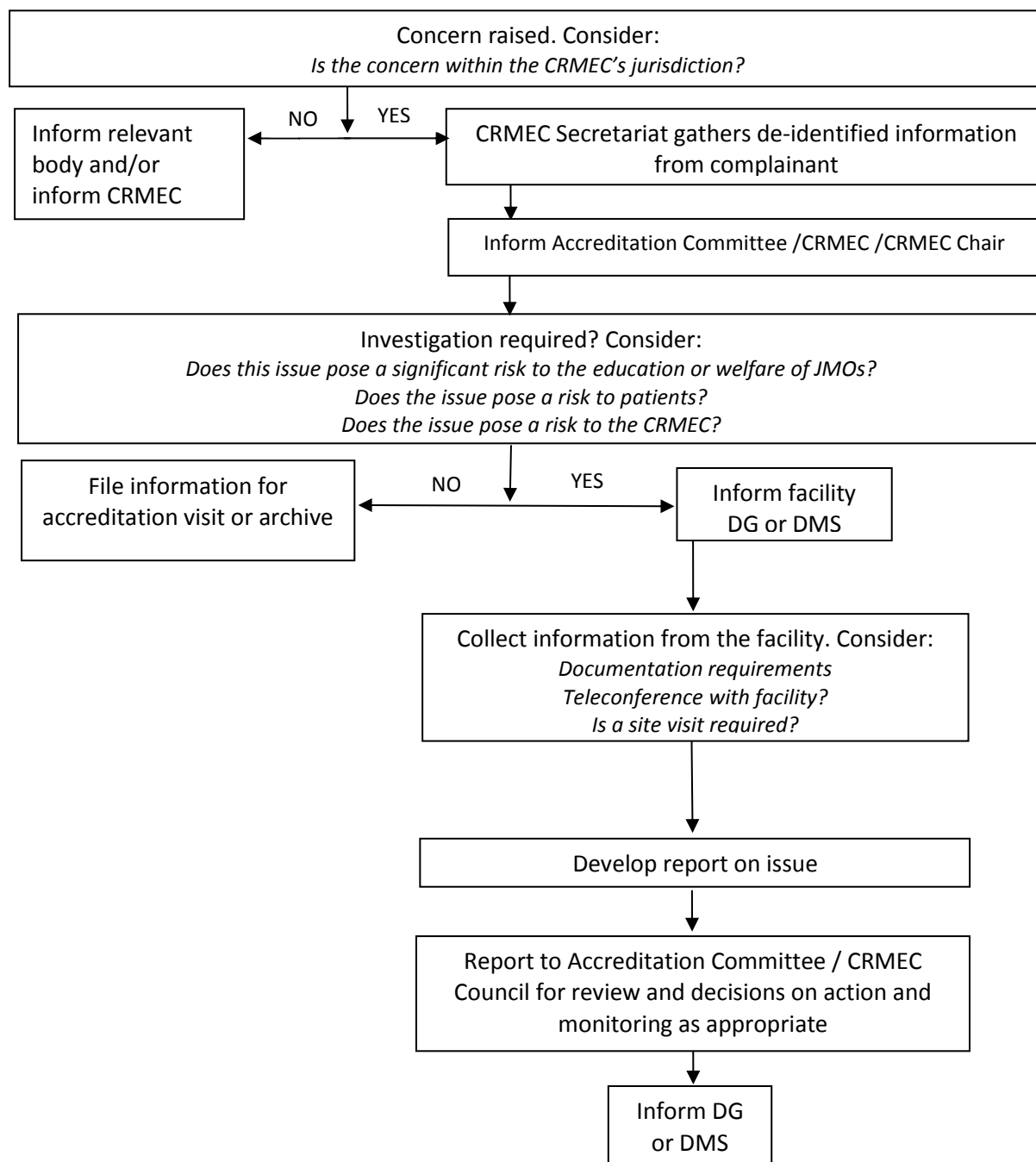
As with other accreditation reports, a unit/facility has the opportunity to appeal in line with the Appeals Policy.

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Response to Concerns Flowchart



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Related Documents

- Accreditation Policy
- Guide to Accreditation

Definition of Terms

Accreditation – Accreditation is the evaluation process used to assess the quality of prevocational medical education and training against established standards. It comprises compliance and quality improvement elements that are complementary to service delivery and training. The process ensures facilities and units offer appropriate education and training for prevocational junior medical officers and promote best practice.

Accreditation Visit Team – A group formed for the purpose of a specific accreditation survey. The composition of a team will depend on the size and role of the facility, and the training program it provides. The accreditation visit team will usually comprise three to six visitors, who may represent the following groups: Directors of Prevocational Education & Training, Clinicians, Junior Medical Officers, Medical Education Support Officers or Medical Administrators. Special expertise may be sought if particular issues have been identified prior to the accreditation visit.

Appeal – A request for review of a report made by an accreditation visit team or a recommendation of the Accreditation Committee, prior to the submission of the report to the ACTBMBA and/or Minister for Health and Wellbeing.

Appeals Committee – An independent group established by the Chair of the CRMEC (or nominee) responsible for reviewing the accreditation recommendations regarding the facility or unit making the appeal and any submissions made by the appellant.

CRMEC Accreditation Committee – the committee responsible for an efficient and effective accreditation process taking into account jurisdictional requirements, national program developments, and the needs of JMOs.

CRMEC Secretariat - Supports the functions of the CRMEC and its committees. The secretariat is committed to supporting the education and training of junior medical officers in the ACT Prevocational Network and supports the CRMEC in ensuring an open and transparent accreditation system.

Facility – The institution or clinical setting in which junior medical officers (JMO) work and train. These organisations will usually be hospitals but may be health care centres or supervised practice locations in community settings which have met accreditation requirements for JMO education and training.

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Version control

Review date	Version	Updated by	Approved by	Changes made
Feb 2015	1.0	Manager	CRMEC	
May 2015	2.0	Manager	CRMEC	Formatting
August 2017	2.1	Admin Manager	CRMEC Chair	Formatting, added information on concerns arising during a visit, minor change to flow diagram regarding when a facility will be informed of a concern
May 2019	3.0	Manager	CRMEC	Increase clarity over extent of investigation before informing DMS or DG, added items to consider when determining if investigation is warranted.