# Stakeholder collaboration

### Domain

The intern training accreditation authority works to build stakeholder support and collaborates with other intern training accreditation authorities, and medical education standards authorities.

### Attributes

* 1. There are processes for engaging with stakeholders, including health departments, health services, junior doctors, doctors who supervise and assess junior doctors, the national board, professional organisations, and consumers/community.
  2. There is a communications strategy, including a website providing information about the intern training accreditation authority’s roles, functions and procedures.
  3. The intern training accreditation authority collaborates with other relevant accreditation organisations.
  4. The intern training accreditation authority works within overarching national and international structures of quality assurance/accreditation.
  5. *There are processes for engaging with stakeholders, including health departments, health services, junior doctors, doctors who supervise and assess junior doctors, the national board, professional organisations, and consumers/community.*

The wide range of stakeholders on the METC Medical Advisory Committee provides input from a number of local and national organisations to the METC and also disseminates information back to their representative groups. The medical education and training community in the NT is interested and passionate and is represented across METC committees and panels. These committee stakeholders and other stakeholders make themselves available for various, sometimes impromptu and informal discussions regarding the expectations and requirements for training in the NT.

The accreditation panel, committee and working groups are all supported by the prevocational accreditation support staff and have a variety of representation of stakeholder groups in their membership. See Appendix B for stakeholder representative groups targeted.

Where possible our survey teams have a cross section of senior clinicians, intern supervisors, junior doctor representation, health department staff involved in oversight of intern education and training, external medical education and training providers and we have utilised other jurisdictional accreditation staff to participate in NT survey events in the past.

METC does not currently have a consumer/community representative (who does not work for the DoH) as there is no established health consumer representative group in the NT to disseminate, provide advice and participate on our committees or panels. This is something that the DoH is currently working on through a Stakeholder Engagement Framework that is in the process of being implemented across the NT. METC and previously NTPMC have worked diligently to include all stakeholders in the accreditation decision making processes to ensure all stakeholders have a voice and can participate in the processes used to make good policy and deliver on programs and services.

METC has a close working relationship with NT Department of Health (DoH) as it is supported and funded by the agency. The Director of METC provides advice to NT DoH and facilities regarding training for junior doctors and supervisors as well as the role those registrars play in the supervisory structure for JMOs.

The METC Director meets regularly with the Chief Medical Officer (CMO) of the NT DoH and other senior executives of NT DoH, he has represented the DoH on the Health Workforce Principle Committee (HWPC) a number of times and participated in working parties of the HWPC e.g. National Intern Review. He is a Board Director of CPMEC, and he is a committee member of the NT Medical Program Governance Committee. The NT Medical Program has been established as a partnership with Flinders University SA and the NT Government to ‘grow our own’ medical practitioners through a bonded/return of service employment scheme after the graduates have successfully completed their medical school studies in the NT.

The METC Executive Officer/Accreditation Manager is a member of several committees with the CPMEC – Prevocational Medical Accreditation Network (PMAN), Principle Officer Committee (POC), and as a proxy to the CPMEC Board meetings when necessary. The Executive Officer is also the chair of the NT General Practice Education (NTGPE) Continuous Improvement and Education Governance Committee (CIEG) as well as a member of their general practice Accreditation Committee. This has enabled many opportunities to seek the views of this external medical education and training provider on the previous NTPMC and more recently established METC purpose and roles. This relationship has been strong and is assisting METC in building links to the rural and remote primary care environment.

The PAC has a close working relationship with the NT Board of the Medical Board of Australia, communicating accreditation survey event reports to the Board for the Board’s decision for registration purposes. The Accreditation Manager can and does contact the AHPRA Regional Director to discuss issues relating to Intern accreditation and there have been occasions when a meeting has been arranged with the Chair of the NTBMBA again to discuss concerns and issues with intern accreditation in the NT.

The accrediting authority actively supports the Medical Education Officers and Directors of Clinical Training at both sites through phone conversations both planned and unplanned as required. Face to face meetings are sometimes impromptu as a result of being in the area for another reason. Video conferencing when available and at the very least teleconferencing is used to discuss any major issues or concerns in relation to Intern education and training programs and/or accreditation of sites/posts.

Both the Accreditation panel and committee have JMO representation and the JMO forum has AMA DIT representation. During the transition from the NTPMC to the METC the JMO Forum has undergone a review requested by the JMOs themselves, METC is awaiting direction and guidance from the JMO forum Chair as to how they would like METC to support and promote the JMO forum.

Traditionally the JMO forum included representatives from both health services and included representation from the two health service RMO Societies. All junior doctors are invited to participate in the JMO Forum and the accreditation program. As METC becomes more in contact with the junior medical officers both long and short term employees the METC will be better situated to offer support and assistance to these medical practitioners. How METC may assist and support the JMO forum will be discussed as part of future agendas of METC Management Committee and as METC continues to develop its business unit’s communication strategy across all of its functions. There is opportunity for the JMO Forum to utilise a page on the METC website for publications meeting documents etc.

The PAC has several junior doctors listed as current trained surveyors and the accreditation committee is actively looking for and promoting junior doctors to become surveyors for the prevocational accreditation program. This promotion will be stepped up later this year when a Surveyor training workshop is scheduled.

Historically the accrediting authority has built a strong and close relationship with the NT DoH and its health service facilities where every opportunity is taken advantage of to discuss expectations and requirements for Intern training in the NT. There are no formal agreements in place between the accrediting authority and with any of these entities, as we are all part of the same government agency, DOH. The service agreements between the Health services and the DoH (system manager) are new to the NT health system framework and are in the process of being evaluated with refinements being made where necessary. METC has not yet entered into any research or discussions regarding these agreements and whether METC can influence if there is a place within these agreements for medical education and training. It is part of the METC future planning to follow up with the division within the DoH who coordinate and manage the service agreements for NT Health Services.

There is however, a Contract for Services between AHPRA (on behalf of MBA) and Northern Territory of Australia Care of the Department of Health (METC). This contract for services is for the Intern accreditation service provided in the NT by METC, it is in place for METC to receive a funding contribution towards the total cost of the accreditation services provided in the NT on behalf of the MBA.

Appendix AX

NOT AVAILABLE

* 1. *There is a communications strategy, including a website providing information about the intern training accreditation authority’s roles, functions and procedures.*

METCs communications and promotion plan is provided as part of this submission (Appendix AY). The evaluation of this plan’s effectiveness is included in our document and process review schedule. This evaluation drives METC’s continuous improvement process through Continuous Improvement Records (CIR) and Registers. There are two CIR registers one is for Accreditation System continuous improvement records (see Appendix S) and another that is for the management and continuous improvement of METC functions and governance (Appendix AZ-1). The METC communications and promotions plan is a document within the METC document register (Appendix AZ-2) which is separate to the accreditation system document register.

All of METC’s Roles, functions, policies and procedures can be found on the [www.ntmetc.com](http://www.ntmetc.com) website.

* 1. *The intern training accreditation authority collaborates with other relevant accreditation organisations.*

A document that is currently under discussion at the Management Committee is the DRAFT METC Collaboration and Networking model. This model document hopes to provide direction as to how METC can collaborate and network with all of its stakeholders (Appendix AAA).

Appendix AY Appendix AZ

1 2

NOT AVAILABLE NOT AVAILABLE NOT AVAILABLE

Appendix AAA



As mentioned previously the METC Director has membership on the CPMEC Board and the METC Executive Officer sits on the CPMEC PMAN. Through this membership, METC collaborates with other intern training and accreditation bodies across Australia on both national and local issues relating to prevocational training and accreditation. These connections have been particularly useful for NT being relatively new (7 years) into the Intern accreditation and training space allowing and enabling the NT to learn from other PMCs. The Postgraduate Medical Council of Queensland was when it was the accrediting authority for interns in Queensland particularly collegiate and helpful in assisting the NTPMC. Particularly in establishing the Intern Accreditation System and then guiding and advising the Executive Officer in facilitating and establishing the NT Postgraduate Medical Council and early survey events conducted in the NT where PMCQ offered and provided an independent surveyor. PMCQ also had membership on the NT Council where their advice and guidance was valued; they provided an advisory role on the NTPMC Accreditation Committee up until they ceased to be the accrediting authority for QLD. Since our initial establishment as NTPMC and now with the transition to METC with a wider brief it has been most important to maintain and grow synergies with some of the other bigger Intern training providers and accreditation authorities, and the Executive Officer regularly is in contact with the other PMCs or equivalents.

METC has built and continues to build a strong relationship with the NT Medical Program. The NT Medical Program has been established to ‘grow our own’ medical practitioners with a particular focus on increasing the number of Indigenous doctors coming through this program and staying in the NT. This program has been made possible through a funding partnership between the NT Government along with Flinders University SA and the Federal DoH. METC is now working with the Associate Dean and program staff of the NTMP on many levels regarding the graduates that saw the first cohort graduate in 2015 and commence their two year bonded employment in the NT health services (which ceases end of 2016). The Director of METC is a member of the NTMP Governance committee that meets quarterly to discuss the programs curriculum, placements and other course teaching requirements.

It is a future plan for METC to increase its interaction with specialist colleges to ensure an effective integration of the medical education and training continuum within NT.

Before the NTPMC was established and for the first NTPMC coordinated survey event conducted in October 2008 the NSW Institute of Medical Education and Training (IMET) an earlier title of Health Education and Training Institute (HETI) provided a joint accreditation service using the IMET Intern Accreditation Standards and IMET provided a trained surveyor to lead the NT survey team.

* 1. *The intern training accreditation authority works within overarching national and international structures of quality assurance/accreditation.*

The Postgraduate Medical Council Queensland (PMCQ) Accreditation Standards are the foundation of the NT Intern Accreditation system. The PMCQ in 2008/2009 offered all of their policies, processes, governance frameworks to the NTPMC as a basis to establish the PMC in the NT. The Executive Officer spent a week with PMCQ in the early months of establishment and contacted staff at PMCQ as necessary as NTPMC developed the NT accreditation system. NTPMC took confidence from the PMCQ model and methodologies as PMCQ had not long completed a full review of their system which included a global search of other international accreditation systems for comparison. The PMCQ (along with other PMCs at that time) had been instrumental in participating and informing the National Prevocational Medical Accreditation Framework (PMAF) which was one of the documents that contributed the National Accreditation Standards for Accrediting Authorities. As a result of NTPMC using the framework of PMCQs accreditation system as the foundation of the NT Accreditation System the progression to meeting the new National Intern Accrediting Authority standards was less challenging as much of the necessary documentation was either in place or being put in place. As a result any gaps found were easily resolved.

In 2014 NTPMC commenced a review and rewrite of its accreditation standards and system to include all prevocational doctors into the system documents to enable NTPMC to accredit PGY2 as well as Intern (PGY1) places and training programs. A working party was formed using representatives from each health service with a junior medical officer included in the membership. This working party also as part of the review and rewrite added the national Intern standards for those areas where there had been no coverage previously. (Appendix Z – Domain 4)

METC has a long term goal to connect and develop networks with our northern neighbors who are involved in prevocational accreditation, education and training. For the recent National Medical Education and Training Forum held in Darwin (2015) invites were sent out internationally (SE Asia, Europe, China) and to many of the other international, national and local Medical Education and Training conferences and forum organisers. The Lead Key Speaker at the Darwin hosted event, Professor Fortunato L Cristobal, Dean Ateneo De Zamboanga University, School of Medicine Zamboanga Philippines, gave the opening speech on “*The importance of context in training: contextualizing curriculum to meet the needs of the communities we serve, and the innovation borne of a tough environment”*

AMC request for further information from 2015 NT METC Progress Report:

* *“Please provide an update on the METC Director position in the 2016 submission.”*

The METC Director was selected and commenced work with the METC in early October 2015 he is Associate Professor Malcolm Johnston-Leek, MBBS MHM DipRANZCOG FACEM AFACHSM

Dr Malcolm Johnston-Leek comes with a wealth of experience as a leader and an educator. As current Medical Director at St John Ambulance NT and prior to joining METC as the Senior Clinician, prehospital at the National Critical Care and Trauma Response Centre (NCCTRC) where he has established networks within both Health Services. He brings to this role his extensive experience as an Emergency Physician, in retrieval services and in disaster response and management, including following the Port Arthur shooting, the Queensland floods, Bali bombings, Solomon Islands in response to the dengue outbreak and Vanuatu after Cyclone Pam.

Malcolm has post graduate qualifications in emergency medicine, health management, aviation medicine and retrieval medicine. Currently he is in the Army reserve with the rank of Lt Col and has been deployed four times.

Malcolm is an Associate Professor at Edith Cowan University, a senior instructor for EMST, senior instructor for EMERGO Train and senior instructor for MIMMS and instructor for ALS.

Since starting October last year Dr Johnston-Leek has been involved in a number of national and local meetings regarding medical Education and Training including the National Intern review working group and has trained as a NT METC surveyor. He has been involved in the two recent health service desktop survey event assessments – Quality Action Plan Stage 1 for ASH and Quality Action Plan Stage 2 for RDH.

*Further Information for this section:*

* *A link to authority’s website –* [*www.ntmetc.com*](http://www.ntmetc.com)
* *A list of regular meetings with stakeholders (Appendix AAB)*

*Internal*

*METC Medical Advisory Committee*

*METC Management Committee* Appendix AAB

*Intern Allocation Panel* NOT AVAILABLE

*NT JMO Forum*

*Prevocational Accreditation Committee (PAC)*

*Prevocational Accreditation Panel (PAP)*

*External*

*NT Medical Program Governance Committee*

*CPMEC Board Meetings*

*CPMEC Principal Officer Committee*

*CPMEC Prevocational Medical Accreditation Network*

*CPMEC AJMOC*

*NT General Practice Education (NTGPE) Accreditation Committee*

*NTGPE Continuous Improvement and Education Governance Committee*

*NT Board of the Medical Board of Australia (NTBMBA)*

*National Medical Intern Data Management Working Group*