Prevocational Education and Training Accreditation Survey Evidence List

Evidence number	Evidence required	Corresponding standard	Check box if attached
1	Term descriptions for all prevocational terms on the current HETI term description template.	7, 9	
2	Minutes of the five most recent General Clinical Training Committee meetings or equivalent	2, 7, 12	
3	Minutes of the five most recent Network Committee meetings.	2, 5	
4	De-identified minutes of the Assessment Review Committee.	11	
5	Terms of reference of GCTC, NCPT, Assessment review committee	2	
6	Documentation of other relevant committees terms of reference, meeting schedules and minutes.	2	
7	De-identified reports from HETI Online of training completion by JMOs.	3, 7	
8	Details of the physical amenities provided to the trainees including overnight accommodation for afterhours shifts and term accommodation for trainees on rotation.	4	
9	Any ROVER or equivalent term handover documentation is given to the trainees.	7, 8	
10	Details of the Provider's infrastructure for providing the formal and clinical term prevocational education and training programs.	2, 4	
11	Evidence that the Provider has a system for evaluation and is being used to inform and implement continuous quality improvement of the Program (in both the whole of program and in specific terms).	12	
12	Documentation of the process for providing feedback to supervisors about their term/skills as a supervisor	9	
13	Position descriptions of supervisors outline the competencies, duties, responsibilities and accountabilities of doctors' responsible for supervising prevocational trainees.	9	
14	Documentation of training opportunities provided to/and taken up by supervisors (including any College training), including evidence of completion of appropriate courses via HETI Online.	9	
15	Documentation of an appeal process for assessment and registration decisions.	11	
16	Current shift rosters for the whole hospital where prevocational trainees work.	3	

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17	Term allocations for all prevocational trainees between terms and network hospitals.	5, 10
18	Documentation of the Process for term allocations.	10
19	Documentation detailing the formal education and training program for PGY1 and PGY2	5, 6
20	Evidence of the hospital orientation program.	3, 5, 7
21	Evidence of term specific orientation.	7
22	Documentation outlining the handover processes between terms and individual responsibilities at the beginning of terms.	8
23	The Prevocational Training Provider grievance procedures.	1
24	Evidence of formal communication mechanisms/structures between the Provider and their trainees.	1, 6
25	Evidence of the support and welfare services available to trainees.	2, 5, 13
26	Process for workload monitoring including regularly reviewing patient numbers and the level of overtime (both rostered un-rostered).	2, 3
27	Evidence that the Provider has rigorous processes in place to ensure safe clinical supervision.	2, 9
28	Evidence that the Provider delivers clinical learning experiences and clinical training in each term.	5, 6, 10
29	Evidence of completed mid and end of term NSW Prevocational Assessment forms for all Prevocational Trainees. *to be supplied at the survey only	10, 11
30	Evidence of the Provider supporting trainees who have requested specific learning opportunities in addition to the term description	10
31	Documentation of the Providers process for managing trainees in difficulty. If appropriate include examples of how individual trainees have been managed (ie. Improving Performance Action Plans).	9, 11
32	Prevocational Trainee Handbook (one hard copy only).	7
33	A copy of the organisational/executive structure of the hospital (i.e. organisational chart). Including reporting lines to the GCTC and NCPT.	1
34	Evidence of any other workplace based assessments/feedback mechanisms	6, 11