




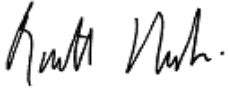
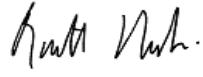
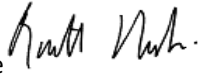

Training Accreditation Committee TOR002 Terms of Reference (TOR)	
Purpose	The purpose of NTGPE's Training Accreditation Committee 'the Committee' is to undertake accreditation of GP supervisors and training posts according to College standards, taking into account NT context.
Objectives	<p>The objectives of the Committee are:</p> <ol style="list-style-type: none"> 1. To ensure all GPs and Training Posts accredited through NTGPE are accredited with the most appropriate accreditation bodies: Australian College of Rural and Remote Medicine (ACRRM), The Royal Australian College of General Practitioners (RACGP) ('Colleges') and other accrediting bodies. 2. To facilitate these accreditations through collaboration with the training posts, GP supervisors and relevant accrediting bodies. 3. To make recommendations and decisions to and on behalf of ACRRM and RACGP according to the delegated accreditation responsibilities designated by each College. 4. To provide regular and as requested reports to the Accrediting Bodies and NTGPE Committees. 5. To discuss issues and provide advice on accreditation matters tabled by the Supervisor and Practice Accreditation Coordinator, including performance and professional development and support of training posts and GP supervisors 6. To respond to grievances or complaints about the Committee's decisions. 7. To set the required NTGPE standards for supervision and accreditation with reference to the College standards.
Key roles and responsibilities	<ol style="list-style-type: none"> 1. During the meeting the Committee will discuss new or review accreditation applications received and minute the decisions. 2. In the case of RACGP, the Committee will make the accreditation decision and notify RACGP of the outcome. 3. In the case of ACRRM, the Committee will make an accreditation recommendation and the final decision will be made by ACCRM. 4. If consensus cannot be met, the application may be referred to the Chief Executive Officer (CEO) for a decision. 5. Concerns about particular training posts or GP supervisors will be referred to the Education and Leadership Team Meeting and/or the Monitoring Review Meeting..
Decision making process	Decisions of the Committee will be by consensus of the Committee members with dissensions noted if requested.



<p>Membership</p>	<ul style="list-style-type: none"> • The Committee will consist of the following members: <ul style="list-style-type: none"> ○ Supervisor and Practice Lead Medical Educator – Chairperson ○ Director of Training (DoT) ○ Executive Manager Education and Support ○ 1 GP Registrar Program Manager ○ 1 ACCRM Specialist Medical Educator (ME) ○ 1 RACGP Specialist ME ○ 1 Supervisor Liaison Officer ○ 1 Registrar Liaison Officer ○ Representative from NT Medical Education and Training Centre (NTMETC) ○ Supervisor and Practice Accreditation Coordinator • Internal or external persons may be invited as a guest to attend meetings to provide advice and assistance where necessary at the request of the Chairperson. These guests will have no voting rights and may be requested to leave the meeting at any time by the Chairperson. In particular, when undertaking Accreditation of an Aboriginal Health Post, it will be necessary to consult NTGPE’s cultural educators. • Administrative assistance will be provided by NTGPE.
<p>Administration: Agenda, Minutes and Papers</p>	<ul style="list-style-type: none"> • NTGPE will provide an Administration Assistant to: <ul style="list-style-type: none"> ○ Prepare agendas, issue notices for meetings, and ensure all necessary documents requiring discussions or comment are attached to the agenda. ○ Distribute the agenda and paperwork via email one (1) week prior to the meeting. ○ Take notes of proceedings and prepare minutes of meetings, ensuring that the Chairperson reviews all minutes prior to distribution to the Committee members. ○ Minutes and action items will be circulated within one (1) week of each meeting occurring.
<p>Frequency</p>	<ul style="list-style-type: none"> • Meetings shall be held at least bimonthly. • An invitation will be sent out to the Committee in advance by the Administration Assistant. • Teleconference facilities will be provided for all meetings.
<p>Quorum</p>	<p>5 members (not including admin support). Where a quorum is not achieved the items of business from the meeting may be decided via written communications out of session.</p>
<p>Reporting</p>	<p>The Committee reports to the CEO and other bodies as necessary.</p>
<p>Review of TOR</p>	<p>The TOR shall be reviewed annually from the date of approval.</p>
<p>Date originally adopted</p>	<p>30 April 2012</p>
<p>TRIM</p>	<p>14/8455</p>



Approved:		
Signature:		17/11/17
Title	Stephen Pincus, CEO	Date

Year Reviewed		
2013	Comment: Updated Clause 3.5 in TOR (Membership)	
	Signature: 	15 / 07 / 2013
	Name & Title: Dr Brett Dale, CEO	Date
2014	Comment: Increased membership from 2-3 MEs to 3 and QA Manager and quorum from 2-3 to 5. Updated to new TOR format. Include RACGP and ACRRM reporting requirements	
	Signature: 	01 / 07 / 2014
	Name & Title: Dr Brett Dale, CEO	Date
2014	Comment: Decisions updated to include consensus of committee members.	
	Signature 	20 / 10 / 2014
	Name & Title: Dr Brett Dale, CEO	Date
2016	Comment: Updated terminology and reviewed membership; from 2 GP Registrar Program Managers to 1, 2 Lead MEs to 2 College specialist MEs and NT Postgraduate Medical Council is now NT METC.	
	Signature	07 / 03 / 2016
	Name & Title: Dr Brett Dale, CEO	Date
2017	Comment: General review.	
	Signature 	17/11/2017
	Name & Title: Stephen Pincus, CEO	Date