

## Te Whatu Ora – Waitematā – Progress on required actions

Te Whatu Ora – Waitematā underwent an accreditation assessment as a provider of prevocational medical training on 28 and 29 November 2023.

The overall outcome of the assessment for Waitematā’s accreditation was ‘**substantially met**’.

Te Whatu Ora – Waitematā is currently accredited for prevocational medical training until 31 March 2028, subject to satisfactorily addressing the required actions listed below.

	Required actions on accreditation	Standard	Status
1	<p>Waitematā must provide evidence of processes to ensure senior clinicians are equipped and able to enhance interns’ skills, understanding and knowledge of hauora Māori, cultural safety and cultural competency.</p> <p><i>Due to be addressed: 30 June 2026</i></p>	<p><b>The intern training programme – Programme components</b></p> <p><b>3.1.5</b> - The training provider has processes that ensure that interns receive the supervision and opportunities to:</p> <ul style="list-style-type: none"> <li>enhance their skills, understanding and knowledge of hauora Māori</li> <li>develop their cultural safety and cultural competence, and</li> <li>deliver patient care in a culturally-safe manner.</li> </ul>	
2	<p>Waitematā must ensure that all its interns complete at least one community-based attachment over the course of the two intern years. Until this is ensured Waitematā must report on the pressures that make it challenging to ensure this and provide evidence of strategies being implemented to address these pressures.</p> <p><i>Due to be addressed: 30 June 2026</i></p>	<p><b>The intern training programme – Programme components</b></p> <p><b>3.1.6</b> - The training provider, in discussion with the intern and the prevocational educational supervisor, must ensure that over the course of the two intern years each intern completes at least one community-based attachment.</p>	
3	<p>Waitematā must ensure hauora Māori, tikanga Māori, and Māori health equity, including the relationship between culture and health, are embedded across the formal education programme.</p> <p><i>Due to be addressed: 30 June 2026</i></p>	<p><b>The intern training programme – Formal education programme</b></p> <p><b>3.3.4</b> - The formal education programme provides content on hauora Māori and tikanga Māori, and Māori health equity, including the relationship between culture and health.</p>	

	Required actions on accreditation	Standard	Status
4	<p>Waitematā must ensure that a formalised orientation to each clinical attachment occurs sufficient for the needs of the interns.</p> <p><i>Due to be addressed: 30 June 2025</i></p>	<p><b>The intern training programme – Orientation</b></p> <p><b>3.4.2</b> - Orientation is provided at the start of each clinical attachment, ensuring familiarity with key staff, systems, policies, and processes relevant to that clinical attachment.</p>	
5	<p>Waitematā must provide appropriate administrative resources to assist the director of clinical training and prevocational educational supervisors.</p> <p><i>Due to be addressed: 30 June 2025</i></p>	<p><b>Assessment and supervision – Supervision – Prevocational educational supervisors</b></p> <p><b>4.2.4</b> - Administrative support is available to prevocational educational supervisors so they can carry out their roles effectively.</p>	
6	<p>Waitematā must establish a system to ensure clinical supervisors are fully informed about, and understand, their role within the intern training programme.</p> <p><i>Due to be addressed: 30 June 2025</i></p>	<p><b>Assessment and supervision – Supervision – Clinical supervisors</b></p> <p><b>4.3.1</b> - Mechanisms are in place to ensure clinical supervisors have the appropriate competencies, skills, knowledge, authority, time and resources to meet the requirements of their role.</p>	
7	<p>Waitematā must have a system to ensure clinical supervisors undertake relevant training in supervision and assessment as soon as practicable (within 12 months) after appointment as a clinical supervisor.</p> <p><i>Due to be addressed: 30 June 2025</i></p>	<p><b>Assessment and supervision – Supervision – Clinical supervisors</b></p> <p><b>4.3.3</b> - Clinical supervisors undertake relevant training in supervision and assessment as soon as practicable after beginning their supervisory role. This must be within 12 months of appointment as a clinical supervisor.</p>	
8	<p>Waitematā must ensure that systems are in place to ensure that clinical supervisors meet with interns at the beginning, middle and end of each attachment, and record these meetings in ePort in a timely manner.</p> <p><i>Due to be addressed: 30 June 2025</i></p>	<p><b>Assessment and supervision – Feedback and assessment</b></p> <p><b>4.4.1</b> - Systems are in place to ensure that regular, formal feedback is provided to interns and documented in ePort on their performance within each clinical attachment, including end of clinical attachment assessments. This should also cover the intern's progress in completing the goals in their PDP and the intern's self-reflections against the 14 learning activities.</p>	

	<b>Required actions on accreditation</b>	<b>Standard</b>	<b>Status</b>
9	<p>Waitematā must demonstrate formal mechanisms where intern, prevocational educational supervisor and clinical supervisor input is sought and clearly articulated in quality improvement strategies.</p> <p><i>Due to be addressed: 30 June 2025</i></p>	<p><b>Monitoring and evaluation of the intern training programme</b></p> <p><b>5.3</b> - There are mechanisms that allow feedback from interns and supervisors to be incorporated into quality improvement strategies for the intern training programme.</p>	
10	<p>Waitematā must routinely assess the effectiveness of both prevocational educational supervisors and clinical supervisors.</p> <p><i>Due to be addressed: 30 June 2025</i></p>	<p><b>Monitoring and evaluation of the intern training programme</b></p> <p><b>5.5</b> - The training provider routinely evaluates supervisor effectiveness taking into account feedback from interns.</p>	
11	<p>Waitematā must ensure that the process of allocation of clinical attachments is transparent and communicated effectively to interns, including for those interns whose clinical attachment preferences are not met.</p> <p><i>Due to be addressed: 30 June 2025</i></p>	<p><b>Implementing the education and training framework – Establishing and allocating accredited clinical attachments</b></p> <p><b>6.1.3</b> - The process of allocation of interns to clinical attachments is transparent and fair.</p>	
12	<p>Waitematā must review the volume of additional duties and any cross cover arrangements, both formal and informal, that are being worked by interns. This must include mechanisms to detect sustained excessive workload for the interns and RMO Unit staff.</p> <p><i>Due to be addressed: 30 June 2026</i></p>	<p><b>Implementing the education and training framework – Welfare and support</b></p> <p><b>6.2.1</b> - The duties, rostering, working hours and supervision of interns are consistent with the delivery of high-quality training and safe patient care.</p>	
13	<p>Waitematā must ensure processes are in place to ensure applications for annual leave are dealt with fairly and transparently.</p> <p><i>Due to be addressed: 30 June 2026</i></p>	<p><b>Implementing the education and training framework – Welfare and support</b></p> <p><b>6.2.7</b> - Applications for annual leave are dealt with fairly and transparently.</p>	