ISSUES IDENTIFIED IN THE 2003 AMC REPORT WITH IMPLICATIONS

FOR THE 2004 REPORT

Please find below the questions from the AMC in italics and our response in normal font. This information was provided in the 2003 Annual Report and should be followed up in the 2004 Annual Report.

Provide details of any changes to the education and training programmes and any significant changes planned within the next 12 months, together with a brief statement of reasons and evidence for the change. This should include changes to:

• The goals of education and training.

The College is working with a number of Federal Government departments and working groups to identify the goals of surgical education and training and the needs of particular groups of surgical trainees and specialists. Current initiatives include:

- Medical Specialist Training Taskforce is researching the educational needs, training requirements and learning environments for medical specialist training
- 2) Research into the special needs of overseas trained doctors, in particular those filling a designated Area of Need surgical position
- 3) Research into the special needs of rural surgical specialists.

<u>WE NEED TO PROVIDE INFORMATION ON THE OUTCOMES OF THESE</u> THREE INITIATIVES<mark>.</mark>

• *Content of education and training programme.*

The College is piloting the "Outer Metropolitan Specialist Training Programme". This is a federally funded programme and is designed to provide advanced surgical trainees with the opportunity to undertake training in the private sector. This programme is examining the role of the private sector as a learning environment and aims at increasing the exposure of a trainee to a broader range of surgical procedures than currently exists in the public hospital sector. This will facilitate the development of training programmes that provide trainees with a wide range of experiences required to provide services across the spectrum of health.

WE NEED TO ADVISE ON THE OUTER METRPOLITAN SPECIALIST TRAINING PROGRAMME

Provide details of any changes planned to the range of education and training programmes in sub-specialties.

The College is currently working with the Royal Australasian College of Dental Surgeons to instigate a joint Fellowship between the two Colleges in oral and maxillofacial surgery. This initiative formally recognises the synergies between these disciplines and contributes to the improvement of surgical skill and expertise in this area.

WE NEED TO ADVISE ON THE OUTCOME WITH THE RACDS

• Memorandums of Association with the Specialties.

The College has signed Memorandums of Association with all 13 of the relevant specialties and is currently finalising service contracts with those specialties. The service agreements:

1) set out the rights and responsibilities of the parties,

2) set out services and funding arrangements to be provided by each party for training and education

3) ensures that the Advanced Surgical Training programme is carried out in a transparent accountable manner.

There are only four specialty groups remaining to sign the service agreements but negotiations are well advanced.

WE NEED TO ADVISE ON THE PROGRESS OF THE REMAINING SERVICE AGREEMENTS

• The further development and specification of the College's educational programmes, including continuing professional development programmes.

In general this submission details a large number of continuing improvements in education and learning processes and outcomes for trainees and Fellows. There is more detailed information on the progression of the continuing professional development programmes in section 10.

The College has established several working parties being the:

1) Code of Conduct working party to develop a professional code of conduct for Fellows and trainees.

2) The Workforce working party which reviews AMWAC projections and workforce requirements.

3) The Skills Laboratories working party which has been established to provide advice regarding utilisation of the College skills centres.

WE NEED TO ADVISE ON THE PROGRESS AND OUTCOMES OF THE WORKING PARTIES

• Integration of the non technical aspects of surgical practice such as those set out in the CanMEDS document in training and assessment.

The College is directly addressing the CanMEDS principles under the auspices of surgical competence. Currently the College is proposing a definition of surgical competence as embodying a training programme that provides specialist surgeons with the following attributes:

- o Medical Expertise Clinical Decision Maker
- Technical Expertise
- o Communication
- o Collaboration
- o Manager
- Health Advocate
- Scholar and Teacher
- o Professional.

These attributes will be demonstrated through clinical skills, patient care and professional judgement across five domains:

- 1) Cognitive (acquisition and use of knowledge to recognise and solve real life problems),
- 2) Integrative (appraisal of investigative data against patient needs in clinical reasoning, manage complexity and uncertainty, application of scientific knowledge in practice),
- 3) Psychomotor (procedural knowledge, technical skill, manual dexterity and adaptability),
- 4) Relational (the ability to communicate effectively, accountability, works with others, consultative, resolving), and
- 5) Affective/moral/cultural (self awareness, ethical, critically reflective, responsible, healthy, safe).

It is expected that the Specialty Boards will develop specific proposals for assessment of surgical competence in light of the above definitions. These definitions have been accepted by the Chief Medical Officers Medical Specialist Taskforce as a basis for consideration in the development of a framework for training a medical specialist in the future.

WE NEED TO ADVISE ON THE PROGRESS OF THE SPECIALTY BOARDS IN REGARD TO THE ADOPTION OF THE SURGICAL COMPETENCIES

• Development of systems for programme monitoring and evaluation.

The appointment of the Evaluation Coordinator will provide the College with a significant resource for determining the effectiveness of the training programmes. The Evaluation Coordinator will cover the full range of training programmes offered by the College.

WE NEED TO ADVISE ON THE PROGRESS OF THE EVALUATION COORDINATOR

Issue 2: Further attention to the issues relating to assessment of overseas trained surgeons

The College has reviewed a number of elements in the assessment of overseas trained specialist with a view to enhancing the procedures and outcomes. Included amongst the College's recommendations to the ACCC are:

1) Duration of assessment

The College is mindful of the length of time taken to complete the College-based assessment process and will define a clear articulation of overseas qualifications that it recognises as substantially comparable to Australasian trained specialist.

This would go hand in hand with the refinement of the paper-based assessment procedures at the College. Implementation of such improvements would reduce the financial costs to the overseas trained specialist.

2) Training and Education proposals

The College has proposed a formal Overseas Trained Specialists Education and Training Programme be developed collaboratively with the College and employers. This programme would target areas where an Overseas Trained Specialist is considered deficient or requires enhancement in surgical expertise. This could be coupled with the existing College procedure of oversight and supervision.

The College has recommended that Overseas Trained Specialists avail themselves of College skills laboratories to improve their surgical competence, where appropriate. Modular programmes should be used to provide opportunities for education and self-testing, e.g. identification of risk and risk management.

3) Liaison with external organisations

The College is working with the appropriate authorities, to improve the alignment of the sequence of immigration, registration, training and assessment processes.

The College has also become involved in the assessment of the infrastructure available to Overseas Trained Specialists placed in Area of Need positions.

4) The College and the AMC

The College has suggested that a centralised body, such as the AMC, be given authority to monitor the registration of all Overseas Trained Specialists practicing in Australia and ensure that proper assessment procedures are maintained.

Also, following an assessment from the College, it has been recommended that an Overseas Trained Specialist found to be substantially comparable to Basic Surgical Training, should be granted full registration.

WE NEED TO ADVISE ON PROGRESS ON THE ABOVE 4 POINTS