



The Postgraduate Medical Council of Victoria Inc. (PMCV) is accredited by the Medical Board of Australia as an intern training accreditation authority and is authorised by the Department of Health and Human Services to review postgraduate year two posts (PGY2). The accreditation process involves a survey visit every four years and progress reports during the accreditation period to ensure junior doctor education, training and support meet the PMCV accreditation standards and promote safe patient care.

PMCV has accredited the Intern posts at ROYAL CHILDREN'S HOSPITAL as a rotation site for another health service and has approved the PGY2 Training Program and posts subject to satisfying PMCV monitoring requirements and addressing accreditation conditions.

NAME of Training Provider:	ROYAL CHILDREN'S HOSPITAL
Parent Health Service:	St Vincent's Hospital Melbourne ¹ (two intern posts)
Rotation site(s):	Ballarat Base Hospital, Bendigo Health, Peninsula Health, University Hospital Geelong, Latrobe Regional Hospital, Monash Children's Hospital, Central Gippsland Health Service, Goulburn Valley Health, Western Health - PGY2 posts
Date of PMCV visit:	10 October 2019
Facility accreditation status:	ACHS: Assessed April 2019; Accreditation until June 2022
Key data regarding training provider:	
Number of accredited ITP intern posts: ²	2 intern posts (<i>non-core</i>)
Number of approved PGY2 posts:	32 posts (across 14 units)
Management staff and supervisors interviewed:	10 medical management and medical education staff, 11 senior medical staff and 2 registrars/Chief Resident, 5 nurse managers The intern online survey had a response rate of 50% and, at the survey visit, the PMCV team met with two interns.
Junior doctor feedback:	The PGY2 online survey had a response rate of 41% and, at the survey visit, the PMCV team met with 14 PGY2s.
DURATION OF PMCV ACCREDITATION:	Four years until the end of the 2023 prevocational training programs (a survey visit to occur prior to the end of 2023)
Intern accreditation and PGY2 quality review standards summary:	PGY1: 18 Standards Met with Merit and 40 Met (97%); 1 Substantially Met PGY2: 8 Standards Met with Merit and 44 Met (93%); 3 Substantially Met

¹ Due for re-accreditation in 2020

² Accreditation details on individual intern posts are published on the PMCV website

Domain 1: The context in which training is delivered	Governance, Program management, Educational expertise, Relationships to support medical education, Reconsideration, review and appeals processes	This set of standards is MET
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Commendations for aspects of the program

- ◇ The overall culture of the organisation is very positive and there was a strong sense that Royal Children's Hospital (RCH) staff care for both junior medical staff and for each other.
- ◇ There is a clear strategic aim, 'great care, everywhere', which focuses the work of the leadership team to support this goal.
- ◇ The Chief Medical Resident Officer (CRMO) role is a strength and there is clear evidence of a high level of engagement between the CRMO and the junior medical staff.
- ◇ The medical education and workforce staff demonstrated a close working relationship and commitment in regards to prevocational medical training and junior doctor welfare.

Recommendations for improvement

- There is a Supervisor of Intern Training (SIT) to support the interns on rotation to RCH but this role is not formally highlighted in the RCH education and training structure. RCH should ensure that the SIT role is included in the medical education organisational structure.
- Funding of the Education Health Learning Precinct (HELP), the Director of Medical Education and the Medical Education coordinator roles is from the Foundation so there is a need to apply regularly for continuation of funding. Whilst this process pushes quality and innovation, there is a significant risk that these positions will not be funded under a future grant process. It is suggested that RCH investigate how these positions can be funded ongoing.

Domain 2: Organisational Purpose	Setting and promoting high standards of medical practice and junior doctor training	This standard is MET WITH MERIT
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Commendations for aspects of program

- ◇ RCH demonstrates that teaching and education of its junior medical staff is valued.

There are no conditions of accreditation or recommendations for improvement for this domain.

Domain 3: The intern/PGY2 training program	Program structure, Flexible training	This set of standards is MET
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Commendations for aspects of program

- ◇ RCH has developed a comprehensive face-to-face hospital orientation program which is formally offered in February and August to staff new to RCH. An online orientation program is offered to staff commencing outside of these dates.
- ◇ ROVERs are updated and generally used by the junior medical staff.

There are no conditions of accreditation

Recommendations for improvement

- Junior medical staff new to RCH (as interns or PGY2s) indicated that they are not always well prepared for the different patient types and complexities (i.e. dealing with very young children). RCH should consider exploring with junior doctors the perceived "gaps" with a view to developing an education package to support staff new to RCH and paediatrics.
- Whilst RCH has progressed significantly in relation to formal orientation at the health service and unit level, unit orientation for some junior medical staff who start on a unit outside of normal rotation changeovers is inconsistent.

Domain 4: The training program	Teaching and learning	This set of standards is MET WITH MERIT
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Commendations for aspects of program

- ◇ Education is available every day of the week and provides excellent coverage of paediatric topics. Junior medical staff can access the online calendar of education activities and are actively encouraged to attend the education sessions.
- ◇ An Education Hub (Health Educational Learning Precinct) is in the process of being established. Led by Medical Education, this will bring a new interdisciplinary direction to education.

Recommendations for improvement:

- Whilst the education program offers an excellent variety of educational opportunities, it can be challenging for PGY2s to attend the Thursday JRMO tutorial program.

Domain 5: Assessment of learning	Assessment approach, Feedback and performance review, Assessors training	This set of standards is MET (six standards met with merit for intern training)
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Commendations for aspects of program

- ◇ The junior medical staff recognise and highly value the training and welfare support provided by the senior medical staff.

There are no conditions of accreditation

Recommendations for improvement

- Mid - and end- term assessments for interns using the National Intern Assessment Form are collated and IPAPs are used when required. However, it would be beneficial for Royal Children's Hospital and St Vincent's Hospital Melbourne (SVHM) to develop procedures for documentation of intern performance across the internship year in case there is an appeal.

Domain 6: Monitoring and evaluation	Evaluation and regular review of intern and PGY2 training program	This set of standards is MET
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Commendations for aspects of program

- ◇ Junior medical staff report that their feedback is considered and that RCH management "listen to their concerns".

There are no conditions of accreditation

Recommendations for improvement

- Formalise the feedback process from junior medical staff to unit heads/supervisors so that they are aware of the feedback from junior medical staff in relation to their time in the unit.

Domain 7: Implementing the education and training framework - junior doctors	Appointment to program and allocation to rotation, Welfare and support, Junior doctor participation in governance of their training, Communication with junior doctors, Resolution of training problems and disputes	This set of standards is MET (two standards met with merit)
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Commendations for aspects of program

- ◇ There was very positive intern feedback regarding their intern experience at RCH across all domains.
- ◇ There was evidence of team collaboration between the Medical Workforce Unit (MWU), JMS Support and Medical Education teams to manage the interns/PGY2s and directly liaise with the individual units and secondment sites.

Condition of accreditation

Overall, the supervision and support of PGY2s after hours is inadequate and requires review. There was significant concern expressed in regards to medical support for complex surgical patients and workload of the specialty surgery nights role (reportedly there is one resident and registrar on site looking after approximately 250 patients, including all speciality medical patients), which can be exacerbated by lack of knowledge of paediatrics (especially in the first term). The role of the night Medical Lead is not clearly defined in relation to support of the medical, surgical and non-surgical patients overnight.

RCH should review overnight staffing, including roles and workload, to improve the supervision and support of PGY2s and ensure an appropriate level of patient safety (the appointment of a 2nd surgical registrar is strongly encouraged).

A report on progress in relation to this condition will be sought by Accreditation Committee by 31 March 2020.

Recommendations for improvement

- Review rostering practices and the timing of roster publication to ensure rosters are available to all junior medical staff at least two weeks prior to changeover of rotation.
- It was not clear to many junior medical staff the role of the Junior Medical Staff Committee (JMSC) and/or staff meetings in relation to how they could become involved and/or attend these meetings. RCH develop strategies to raise awareness of the JMSC and facilitate the involvement and engagement of junior medical staff.
- There is a heavy workload in Gastroenterology and Respiratory Medicine. It is recommended that RCH review workload and rosters in these units.

Domain 8: Implementing the training framework - delivery of educational resources	Supervisors and supervision, Clinical experience, Facilities	This set of standards is MET (<i>four standards met with merit for intern training</i>)
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Commendations for aspects of program

- ◇ Supervisors understand their role and their support and advice are valued by junior medical staff.
- ◇ The consent process is clearly understood by junior medical staff.

There are no conditions of accreditation or recommendations for improvement for this domain.

Response from facility/training provider

ROYAL CHILDREN'S HOSPITAL a report following the survey visit, which demonstrates that the condition IS being addressed satisfactorily and the recommendations have been accepted and will be addressed during the accreditation cycle.

Progress reports during the accreditation cycle

Implementation of the conditions will be reviewed during 2020.

A mid-cycle review, which includes junior doctor feedback and a progress report on implementation of the recommendations, will be conducted during 2021.

Mid-cycle review update

To be inserted following the mid-cycle review in 2021.

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