

PMCV Assessment Review Panel Guiding Principles

The Postgraduate Medical Council of Victoria (PMCV) Accreditation Committee has developed a set of principles to guide Victorian health services in establishing an Assessment Review Panel (ARP). The following principles outline the minimum ARP requirements in Victoria, as well as the key requirements as outlined in the Australian Medical Council (AMC) National Framework for Prevocational Medical Training (NFPMT).

This document was developed based on [AMC Assessment Review Panels – A Guide for Prevocational Training Providers](#).

Establishment of Panel:

The ARP may be a newly established panel or may be an extension of an established committee. If the ARP is an extension of an established committee, the Terms of Reference may need to be revised to comply with the requirements outlined below.

Functions:

- Make recommendations on progression for all PGY1 (General Registration) and all PGY2 doctors (Certificate of Completion) based on Assessment Requirements (table 1).
- Provide advice and expertise on more complex performance improvement strategies for individual prevocational doctors who are at risk of failing to progress.
- Appeals of term assessments.
- Provide advice to the Director of Medical Services (DMS), or equivalent, on performance, conduct or significant patient safety issues.
- Identify and advise on trends emerging in aggregated performance data, at the level of both the individual prevocational doctor and the clinical unit or program. This information may assist the prevocational training provider in determining priorities for improving the overall performance of the program.
- Communication of any outcomes relating to improving performance at secondment sites i.e., unclear assessments, improvements, additional training.

Composition:

The panel must have at least three members, who should all have a sound understanding of prevocational training requirements and the operating principles identified in the previous section.

- The chair should generally be a senior doctor, not the DCT.
- Prevocational doctors should not be included as panel members.

Members may include the following roles:

- DCT
- DMS and/or Chief Medical Officer
- Director of Postgraduate Education or equivalent
- Medical Education Officer
- Medical Workforce and/or HR representative*
- Experienced term supervisor or senior clinician
- Aboriginal and/or Torres Strait Islander representation (if required)

* The role of Medical Workforce/HR is to provide advice in wellbeing and remediation discussions and on relevant matters such as support and leave options, documentation and record keeping. Note importantly that, given the panel's role in medical training assessment decisions, the HR role does not include, and should be clearly distinguished from, performance management or employment related matters.

Meeting Frequency:

The PMCV recommends that the panel meet at the end of each term at a minimum to monitor progression, especially in the instance of 15 or more Prevocational Doctors.

It is mandatory for the panel to meet at the end of each year to certify progression to the next stage of training (General Registration/Certificate of Completion).

In addition:

- There must be a process by which EPA and term assessments are monitored on a term-by-term basis to ensure concerns are identified in a timely manner. It is recommended that this is done by a member of the Medical Education Unit.
- If it has been identified that a prevocational doctor is not progressing adequately or is in Phase 2 or 3 of the [Improving Performance Process](#) (Figure 7), the panel must meet more regularly until the issue is resolved or acceptable progress occurs.

Other things to consider:

- process for identifying and managing conflicts of interest ([AMC ARP Guide](#) Page 10 -12)
- decision making – by consensus, voting processes ([AMC ARP Guide](#) Page 10 -12)
- appeals process ([AMC ARP Guide](#) Page 15)
- reporting
- meeting documentation ([AMC ARP Guide](#) Page 17)
- process for providing feedback to prevocational doctors. ([AMC ARP Guide](#) Page 11 & 16)
- Process for informing next term supervisor of any progression or improvement matters

Table 1 – Assessment Requirements

Requirement	Details
Program length	Evidence that the prevocational doctor has completed the minimum time requirement for the year.
Term requirements	Evidence that the prevocational doctor has met the requirements for clinical exposure outlined in National standards and requirements for programs and terms.
Assessment of EPAs	Evidence that a minimum of 10 EPA assessments have been completed, including one assessment of EPA 1 in each term and at least 2 assessments of EPAs 2–4. Note: The goal of prevocational training is to reach the required level of entrustability by the end of the year, therefore it is not necessary that entrustability is reached for every EPA during the year
Achievement of the prevocational outcome statements	Evidence of achieving outcomes includes: <ul style="list-style-type: none"> • mid- and end-of-term assessments • assessment of EPAs (outcome statements have been mapped to the EPAs) • documentation uploaded by prevocational doctors of other activities to achieve outcome statements (for example, attending a course or workshop or completing an online training module).
Sources of information	The panel will consider both quantitative and qualitative information, which may include other relevant information provided by the prevocational doctor, the medical education unit (however named) or other relevant person (such as a term or clinical supervisor). Accessing additional information will be especially relevant in complex decisions. Additional sources of information may include: <ul style="list-style-type: none"> • mid-term assessment forms • multisource feedback or 360° feedback • compliments • issues raised outside of the term assessment process • other direct observation data • medical record review • efficiency data (for example, the number of patients reviewed per shift in an ED compared with peers).

Version Control

Version approved along with date of next review.

Version	Amendments by	Changes	Date
1.1	Maaki Dusanovic	<ul style="list-style-type: none"> • Updated composition to include Aboriginal and/or Torres Strait Islander representation • Updated details of AMC Guide under ‘Other things to consider’) 	27 th August 2023

Approved by: Chair, Accreditation Committee

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