



## AMC Response - Royal Australasian College of Physicians 2021 Progress Report

College Name: Royal Australasian College of Physicians

Date of last AMC accreditation decision: 2020

Periodic reports since last AMC assessment: N/A

Next accreditation decision due: 31 March 2025

### Explanation of findings

Under the Health Practitioner Regulation National Law, the AMC can accredit a program of study if it is reasonably satisfied that: (a) the program of study, and the education provider that provides the program of study, meet the accreditation standard; or (b) the program of study, and the education provider that provides the program of study, substantially meet the accreditation standard and the imposition of conditions will ensure the program meets the standard within a reasonable time.

*The AMC uses the terminology of the National Law (meet/substantially meet) in making decisions about accreditation programs and providers.*

**Providers must satisfy conditions on accreditation in order to meet the relevant accreditation standard. The AMC provides feedback on the conditions using the following:**

|                        |  |
|------------------------|--|
| <b>Unsatisfactory</b>  | The College may not meet the related accreditation standard and AMC should investigate further.                          |
| <b>Not Progressing</b> | No progress or overly slow progress given the timeframe on the condition.  |
| <b>Progressing</b>     | Indicates satisfactory progress against the condition, with further reporting necessary.                                 |
| <b>Satisfied</b>       | The College has satisfied all requirements and can cease reporting against the condition. Condition is marked as closed. |

Please note that this response contains:

|               |  |
|---------------|--|
| <b>Part A</b> | <i>Summary of the overall findings relating to the College's 2021 progress report.</i>   |
| <b>Part B</b> | <i>Acknowledgement, and responses to conditions that were satisfied in 2021 and have been closed</i>   |
| <b>Part C</b> | <i>Detailed responses to information reported against the standards, including feedback to support further reporting on remaining conditions on accreditation.</i> |
| <b>Part D</b> | <i>Report on Quality Improvement Recommendations</i>   |

## Part A – Summary of the overall findings relating to the College’s 2021 progress report

| Overall Summary of Royal Australasian College of Physicians 2021 progress report   |
|--|
| <p>The College is progressing work across several different areas and portfolios. COVID-19 has disrupted and slowed progress in some areas but overall good progress has been made in most standards.</p> <p>The College has implemented the new Basic Training programs at nine early adopter sites.</p> <p>There is a phased approach to the Advanced Training curriculum review. The current planning is for implementation of six new Advanced Training curricula in 2023 but no timeframe is given for the other 32 specialities.</p> <p>The College modified delivery of the DCE in 2020 and 2021 in response to the COVID-19 pandemic and is encouraged to consider the learnings from these changes to investigate future post-pandemic innovation for exam format delivery.</p> <p>Overall the College Substantially Meets the Accreditation Standards.</p> |

| Standard   | 2020 Findings            | 2021 Findings            |
|--|--------------------------|--------------------------|
| <b>Overall</b>   | <b>Substantially Met</b> | <b>Substantially Met</b> |
| 1. The context of education and training                                 | Substantially Met        | Met                      |
| 2. The outcomes of specialist training and education                     | Substantially Met        | Substantially Met        |
| 3. The specialist medical training and education framework               | Substantially Met        | Substantially Met        |
| 4. Teaching and learning methods   | Substantially Met        | Substantially Met        |
| 5. Assessment of learning  | Substantially Met        | Substantially Met        |
| 6. Monitoring and evaluation   | Met                      | Met                      |
| 7. Issues relating to trainees   | Met                      | Met                      |
| 8. Implementing the training program – delivery of educational resources | Met                      | Met                      |
| 9. Continuing professional development, further training and remediation | Met                      | Met                      |
| 10. Assessment of specialist international medical graduates             | Met                      | Met                      |

## Part B – AMC feedback on conditions satisfied in 2021

### Standard 4: Teaching and learning methods

Areas covered by this standard: teaching and learning approach and methods

|  |                |                 |             |                           |
|--|----------------|-----------------|-------------|---------------------------|
| Condition 9  |                |                 |             | To be met by: <b>2019</b> |
| As part of the curriculum review, develop and implement a structured approach to ensure the trainee's increasing degree of independence is systematically evaluated. (Standard 4.2.6)  |                |                 |             |                           |
| Finding  | Unsatisfactory | Not progressing | Progressing | Satisfied                 |
|  |                |                 |             | X                         |
| AMC commentary   |                |                 |             |                           |
| <p>The introduction of local Progress Review Panels (PRP) provides a mechanism for the systematic review of trainees' progression and increasing independence. The Basic Training Program has been implemented at nine early adopter sites.</p> <p>Stakeholder experiences with the new program will be evaluated in stages, annually with a view to exploring the fidelity and integrity of the implementation of the new program, including how trainees' increasing independence is assessed throughout the program.</p> <p>The College is asked to comment on evaluation outcomes in the 2022 progress report.</p> |                |                 |             |                           |

### Standard 5: Assessment of learning

Areas covered by this standard: assessment approach; assessment methods; performance feedback; assessment quality

|  |                |                 |             |                           |
|--|----------------|-----------------|-------------|---------------------------|
| Condition 11   |                |                 |             | To be met by: <b>2018</b> |
| As part of the basic training curricula review, ensure that the summative assessments apply reliable and valid methodologies and are aligned to both basic training curricula. (Standards 5.1 and 5.4)   |                |                 |             |                           |
| Finding  | Unsatisfactory | Not progressing | Progressing | Satisfied                 |
|  |                |                 |             | X                         |
| AMC commentary   |                |                 |             |                           |
| <p>To ensure validity the College has blueprinted assessments to the curriculum standards. To achieve improved reliability, the College has increased the number and frequency of work-based assessment episodes. The rotation and phase progress reports, Written Examination and the Clinical Examination have been blueprinted to the Basic Training learning goals and the Written Examination is blueprinted to the new Basic Training knowledge guides</p> <p>The planned number of work-based assessment episodes is a minimum of 24 per phase at full implementation. Traditional metrics of the Written and Clinical Examinations have historically shown adequate reliability and there have been no changes to these.</p> |                |                 |             |                           |

## Part C - Detailed feedback on standards, including remaining conditions

### Standard 1: The context of training and education

Areas covered by this standard: governance of the college; program management; reconsideration, review and appeals processes; educational expertise and exchange; educational resources; interaction with the health sector; continuous renewal.

#### 1 Significant developments underway or planned that relate to the accreditation standards

##### AMC commentary – significant developments against Standard 1

The College has listed some notable developments against this standard. The Constitution Project Review is continuing. In 2021 members were asked to provide feedback on the RACP Constitution and Governance Review consultation paper, with nearly 500 responses. The new Constitution will be considered at the 2022 AGM.

Two new College Directors have been appointed since the last report. Three new Board committees were established: Member Diversity Advisory Group; Member Health and Wellbeing Committee; Information Technology and Cyber Security Committee.

Development of a three to five year strategic plan is underway and the 2022 Operational plan is being developed.

College values have been launched with staff and planning is underway to launch these with Members.

The College response to the pandemic remains guided by the COVID-19 Expert Reference Group, the COVID-19 Training and Accreditation Advisory Group and the COVID-19 Examinations Advisory Group.

The Gender Equity in Medicine Working Group (GEMWG) has been established to identify the role and actions to be undertaken by the College within gender equity and make recommendations to the Board.

In December 2020, Effective Governance completed its role, and the College was assessed as having the governance framework and secretariat competencies to implement the balance of the recommendations with quarterly progress reporting to the (Australian Charities and Not-for-profits Commission) ACNC. As at June 2021, 97 per cent of Effective Governance's 179 Board and Governance review recommendations have been implemented. The balance of remaining recommendations relates to the Constitutional Review which is due in May 2022.

#### 2 Activity against conditions

Nil remain.

#### 3 Statistics and annual updates

##### AMC commentary – statistics and annual updates against Standard 1

The College reports reconsideration requests are down by 25% and was likely due to several interim program changes made to manage the impact of the pandemic on training.

The Board Conflict of Interest Policy was updated in June 2021.

### Summary of College performance against Standard 1

Significant progress has been made on the Governance Review, with 97 per cent of Effective Governance's 179 Board and Governance review recommendations being implemented. The College is asked to provide an update on the implementation of the remaining recommendations in next year's progress report.

## Standard 2: The outcomes of specialist training and education

Areas covered by this standard: educational purpose of the educational provider; and, program and graduate outcomes

### 1 Significant developments underway or planned that relate to the accreditation standards

AMC commentary – significant developments against Standard 2

There has been no significant change to College educational purpose.

Work is being undertaken on the update of the Cultural Competence domain in the Professional Practice Framework. The outcomes of this work will inform the development of the common standard for both Basic and Advanced Training.

### 2 Activity against conditions

Condition 34 – new in 2019

To be met by: **2023**

Ensure the standards and strategies of the Professional Practice Framework are incorporated into the renewal of Advanced Training Curricula to enable the definition of consistent and clear graduate outcomes across all specialties aligned to community need (Standard 2.3.1)

| Finding | Unsatisfactory | Not progressing | Progressing | Satisfied |
|---------|----------------|-----------------|-------------|-----------|
|         |                |                 | X           |           |

AMC commentary

The common curricula standards for Advanced Training programs, approved by the College Education Committee on 28 February 2020, include competencies for each domain of professional practice, underpinning the professional standard for each domain. The common curricula standards also include 13 EPAs for use across all, or most, Advanced Training programs.

In 2020, the AMC noted that the College had not yet determined the competencies associated with the Cultural Competence Domain of the Professional Practice Framework. The College reports that work is currently progressing on a review of the Cultural Competence domain in the Professional Practice Framework with the Aboriginal and Torres Strait Islander Health Committee and Māori Health Committee. Once the review of the Professional Standard for Cultural Competence is complete, work on the common standards for Advanced Training curricula will be undertaken to ensure the Cultural Competence components align and are appropriately embedded.

Progressive implementation will occur amongst Advanced Training specialties as their respective curricula are reviewed and implemented.

The AMC notes the College's response refers to both cultural competency and cultural safety and it is unclear if these terms have been clearly defined within the College, and for trainees. In the next report, the college is asked to update the AMC on the terminology it uses in the area of Indigenous health and how this was developed with relevant stakeholders.

## **Summary of College performance against Standard 2**

The Standard continues to be Substantially Met

## **Standard 3: The specialist medical training and education framework**

Areas covered by this standard: curriculum framework; curriculum content; continuum of training, education and practice; and curriculum structure

### **1 Significant developments underway or planned that relate to the accreditation standards**

#### **AMC commentary – significant developments against Standard 3**

Implementation of the new Basic Training programs commenced at the beginning of the second training rotation in 2021. Nine early adopter settings with 108 first year Basic Trainees are involved. Both trainees and supervisors gained access to all the new online learning and assessment tools housed in Tracc, the program's supporting technology.

An audit was completed on 7 June 2021 to capture a snapshot of early adopter engagement in on-boarding and training activities, and trainee progress against the new training requirements. New resources developed to support early adopter sites include: Basic Training handbooks, Tracc platform, Basic Training Learning and Assessment Interim Guide, Progress Review Panel Guide. The College are also running dedicated training workshops for supervisors and orientation courses for trainees at early adopter sites. Early adopter sites have dedicated College staff support and detailed contingency plans to ensure trainees are not disadvantaged by changes to implementation schedules.

In 2021, the College finalised and released the common learning, teaching and assessment programs for Advanced Training curricula. These form the baseline for learning, teaching and assessment that will apply to all Advanced Training programs. Specialty groups will be able to tailor programs by adding in specialty-specific elements.

Draft products of the Advanced Training Curricula Renewal project underwent extensive consultation. All documents are publicly available on the RACP website. In the common standards consultation, 185 responses were received via the online survey and nine written submissions. 86.4% responses were from RACP members. In the common learning consultation, 187 responses were received via the online feedback form and 2 written submissions were received. 98% of responses were from RACP members.

## 2 Activity against conditions

| Condition 6 (ii)  |                | To be met by: <b>2023</b><br><i>(Previously due to be met by 2020)</i> |             |           |
|---|----------------|--|-------------|-----------|
| In relation to the advanced training curricula:<br>ii. Implement the revised advanced training curricula. (Standard 3.2)  |                |  |             |           |
| Finding   | Unsatisfactory | Not progressing  | Progressing | Satisfied |
|   |                |  | X           |           |
| AMC commentary  |                |  |             |           |
| <p>The College is undertaking a phased approach to Advanced Training curriculum review, six Curriculum Review Groups have been formed through expressions of interest processes and on-boarding workshops held for those in Wave 1. Wave 1 is running to schedule and all are at development stage. The College advises that the earliest possible implementation for the Wave 1 programs is 2023. The other 32 specialties will be developed in subsequent waves, which will be planned in more detail once Wave 1 is more advanced.</p> <p>The AMC ask the College provides greater detail on the projected timings of the subsequent waves in next year's progress report. What is the projected implementation date for the remaining 32 specialties and are there any barriers for implementation?</p> |                |  |             |           |

### Summary of College performance against Standard 3

The Standard continues to be Substantially Met.

## Standard 4: Teaching and learning methods

Areas covered by this standard: teaching and learning approach and methods

### 1 Significant developments underway or planned that relate to the accreditation standards

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|---|
| AMC commentary – significant developments against Standard 4  |
| <p>The College reports that a new annual program of lectures for Paediatrics and Child Health was delivered for the first time in 2021. The lecture list contains 78 topics that are spread across all specialties. A supplementary 24 lectures are also planned for delivery between March and June 2022, and it is anticipated that a complete list of 102 Paediatrics and Child Health lectures will be accessible on the College Learning Series (CLS) site by 30 June 2022.</p> <p>In September 2020, the CLS Committee (Paediatrics and Child Health) was established to oversee this new program. The formation of the new Committee means the Paediatrics and Child Health governance structure now reflects the same structure as the Adult Medicine series.</p> |

## 2 Activity against conditions

| Condition 32 – new in 2019  |                |                 |             | To be met by: 2020 |
|---|----------------|-----------------|-------------|--------------------|
| <p>Articulate, in partnership with the Specialty Societies, the role of College oversight in advanced training subspecialty training. (Standard 4.2.3)</p> <p>Note: <i>This condition was upgraded from a recommendation (JJ) following the 2018 follow up visit (Recommendation JJ – Clarify, in partnership with the speciality societies, the role of College oversight in post fellowship subspecialty training.)</i></p>   |                |                 |             |                    |
| Finding   | Unsatisfactory | Not progressing | Progressing | Satisfied          |
|   |                |                 | X           |                    |
| AMC commentary  |                |                 |             |                    |
| <p>The College is undertaking a Model of Collaboration process with the affiliated specialty societies. This work has been delayed due to COVID-19. A further two collaboration schedules are in the final stages of review before completion. In the next progress report the College should provide information on how many collaboration schedules have been completed and what the plans are for each of the remaining schedules.</p> <p>The College is engaging with specialty societies with the Joint Forum program. Since July 2021, all 51 College-affiliated societies have been invited to join the Joint Forum program (previously only Australian adult and paediatric societies), holding 4-5 Zoom meetings per year.</p> <p>The College works closely with Specialty Societies as part of the development of the new Advanced Training curricula. Specialty Societies from Australia and Aotearoa New Zealand continue to be engaged as content experts, specifically the specialties involved in Wave 1.</p> <p>The College has indicated that the specialty societies are content experts as the new Advanced Training Curricula are developed. However, the College has not yet articulated the role of College oversight in advanced training curricula. This must be addressed in next year's report.</p> |                |                 |             |                    |

### Summary of College performance against Standard 4

The Standard continues to be Substantially Met.

## Standard 5: Assessment of learning

Areas covered by this standard: assessment approach; assessment methods; performance feedback; assessment quality

### 1 Significant developments underway or planned that relate to the accreditation standards

| AMC commentary – significant developments against Standard 5  |
|---|
| <p>The College had to postpone the majority of 2020 examinations and some in 2021 due to the impact of COVID-19. In February 2021, the College Education Committee approved a 2+2 Short Case format for use as an emergency measure to enable significantly COVID-19 impacted exam sites to deliver the Short Case component of the 2020 Divisional Clinical Examination (DCE). For the 2020 DCE 18 Adult Medicine exam sites (largely in Victoria and New South Wales) needed to use this delivery format. For the 2021 DCE some exam sites will again need to use the 2+2 Short</p> |

Case format due to COVID-19 impacts. However, the College notes that the preferred format continues to be four short cases. Comprehensive Risk Management Plans are in place for delivery of 2021 exams.

The College transitioned to a digital examination scoring system.

In terms of the 2020 DCE Long Cases, there was variation in the volumes of Adult Medicine (65%) and Paediatrics and Child Health (46%) candidates who felt their preparation was negatively impacted by COVID-19. Higher proportions of DCE Short Case candidates reported their preparation was negatively impacted by COVID-19, with Adult Medicine candidates (83%) more commonly reporting negative impacts than Paediatrics and Child Health candidates (72%).

The College reports that overall satisfaction with the examination process, organisation of the examination on the day and COVID-safety was broadly positive.

The Australasian Faculty of Rehabilitation Medicine (AFRM) Module 1 Assessment was successfully delivered by computer-based testing (CBT) on 18 May 2021. 74 candidates sat the examination at 11 locations across Aotearoa New Zealand and Australia.

## 2 Activity against conditions

| Condition 12   |                | To be met by: <b>2022</b><br><i>(Previously due to be met by 2020)</i> |             |           |
|--|----------------|--|-------------|-----------|
| As part of the advanced training curricula review, ensure that the summative assessments apply reliable and valid methodologies and are aligned to all advanced training curricula. (Standard 5.1 and 5.4)   |                |  |             |           |
| Finding  | Unsatisfactory | Not progressing  | Progressing | Satisfied |
|  |                |  | X           |           |
| AMC commentary   |                |  |             |           |
| This is the same as condition 11 but applied to the advancing training curricula. A similar model of programmatic assessment is planned. The Advanced Training Curricula Common Learning, Teaching and Assessment programs outline the common set of assessment tools that can be used for specialty curricula development. Advanced Training programs will use the common LTA program as a baseline when they develop their specialty curricula through the curricula renewal process, and additional assessments may be included through that process. |                |  |             |           |

## 3 Statistics and annual updates

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|--|
| AMC commentary – statistics and annual updates against Standard 5  |
| Data was provided for 2020 Divisional Written and Clinical Exams in the Adult Medicine Division and Paediatrics and Child Health.  |
| Delivery of the Clinical examination for both Adult Medicine Division and Paediatric & Child Health division was altered to accommodate pandemic health directives. Delays in exams and higher than typical withdrawals of exam application may have influenced pass rates.  |
| The College is undertaking a review of Australasian Faculty of Rehabilitation Medicine (AFRM) Fellowship Clinical Examination. The exam normally delivered at one hospital site but because of COVID-19, run at three different sites. Combined 2020 and 2021 cohorts pass rate was 36%, compared to a pass rate of 53.8% in 2019 and 50.2% in 2018. Examiner feedback reported candidates consistently did not meet the standards required to pass the examination and that the |

pass rate was reflective of candidate performance rather than the design of the examination. Candidate feedback collected through post-examination surveys reported that candidates felt that COVID-19 had affected their training. A further evaluation of the exam, including the design and scoring of the questions is being undertaken.

### **Summary of College performance against Standard 5**

The College is commended for the changes it made to support delivery of the DCE during the COVID-19 pandemic. Changing to a modular format supported delivery of the exam and the College should look at the learnings from this approach to see opportunities for improvements and modifications to delivery of the DCE post pandemic.

In the next progress report the College is asked to provide an update on the evaluation of the AFRM exam.

The Standard continues to be Substantially Met.

## **Standard 6: Monitoring and evaluation**

Areas covered by this standard: program monitoring; evaluation; feedback, reporting and action

### **1 Significant developments underway or planned that relate to the accreditation standards**

#### **AMC commentary – significant developments against Standard 6**

The College ran the second Physician Training Survey in October 2020. Over 1600 trainees and 900 educators responded to the survey about their experiences of training/supervising at their setting during the period August to November 2020. The College compared the results of the MTS to the results of the Physician Training Survey and determined that the results of the two activities are largely in concordance. The College is consulting with key committees regarding the 2020 MTS results and seeking feedback on initiatives to improve trainee experiences.

In 2021, the College developed and initiated approaches to evaluating the implementation of both the new Basic Training program and new Accreditation Program. The conceptual framework for evaluation of the new Basic Training program consists of the theoretical framework of competency based medical education (CBME) that underpins the program theory and program logic of the Basic Training Program; the Basic Training Program theory of change; and the major evaluation questions that are adapted from the Royal College of Surgeons and Physicians of Canada Competence by Design evaluation framework.

### **2 Activity against conditions**

Nil remain.

### 3 Statistics and annual updates

#### AMC commentary – statistics and annual updates against Standard 6

The College has provided a summary of evaluations undertaken. The College has compared the results of the MTS to the results of its Physician Training Survey to determine that the results of the two activities are largely in concordance. The College is consulting with key committees regarding the 2020 MTS results and seeking feedback on initiatives to improve trainee experiences.

#### Summary of College performance against Standard 6

The College reports the College Education Committee is holding a strategy day in the latter half of 2021, to determine the best way to address concerns regarding burnout and bullying, harassment and discrimination. The AMC is interested in hearing the outcome of this strategy day in the 2022 progress report.

This Standard continues to be Met.

### Standard 7: Issues relating to trainees

Areas covered by this standard: admission policy and selection; trainee participation in education provider governance; communication with trainees; trainee wellbeing; resolution of training problems and disputes

### 1 Significant developments underway or planned that relate to the accreditation standards

#### AMC commentary – significant developments against Standard 7

The College reports monitoring member wellbeing through a range of surveys including the Physician Training Survey and Medical Training Survey, Pulse surveys, and Post Exam Candidate Surveys.

In April 2021, the College Education Committee approved the review of the Physicians Health and Wellbeing Strategy. The strategy has now been renamed the Member Health and Wellbeing Strategy to explicitly include trainees. The evaluation and revision of the strategy will aim to address the issues of bullying, harassment and/or discrimination in training. As part of this work, there will be a focus on the development of initiatives to support staff wellbeing and accelerate cultural change.

A Member Health and Wellbeing Committee has been established.

The College has developed a communication plan to help raise awareness about the Training Support Unit and available resources including the College's curated resources on Doctor's Health and Wellbeing.

The Training Support Policy and Pathway are currently undergoing review to update with best practice and align to the new training curricula.

The second Trainee Selection Pulse Survey will be run in late 2021. The aim is to ascertain the rate of inappropriate questioning and the use of pre-interviewing.

The Selection into Training Policy is currently undergoing review in response to the recommendations from the report Strategies for increasing Indigenous entry into training and to support the achievement of Priority 2 of the Indigenous Strategic Framework: Grow the Indigenous physician workforce.

The Situational Judgement Test (SJT) will be piloted in 2022. SJT test results will not be used to inform any shortlisting/selection decisions during the pilot year. Instead applicants will be tracked through the selection process and outcomes then compared back to how they did in the SJT to determine if any significant associations can be drawn. The SJT will be piloted at the training network level, rather than being centrally run. The College will fund the pilot year, with no costs to candidates taking the SJT. After the pilot has been evaluated, a decision will be made as to whether the SJT should be used by training networks, endorsed by the College and rolled out on a wider scale.

Due to the postponement of the Divisional Clinical Examination in 2020, the College developed the provisional Advanced Training (pAT) progression pathway. In Australia, the 2020 DCE was delivered in a modular format between November 2020 and May 2021. Of the 1154 trainees eligible for pAT, 795 (69%) took up this option, meaning that they were able to secure an appropriate Advanced Training position. 686 (86%) of these pATs successfully passed the DCE and were able to continue with Advanced Training and 88 (11%) failed and reverted to continuing Basic Training.

The College has piloted the RACP Online Community (ROC) for members. This has been developed with the aim to help foster communication between trainees, Fellows and the College.

The Trainee Voice is now a standing item on the Board agenda. The Board invites different trainees to attend and speak to the Board on a broad range of matters.

## **2 Activity against conditions**

Nil remain.

## **3 Statistics and annual updates**

### **AMC commentary – statistics and annual updates against Standard 7**

The College has provided the requested data. It is noted that Dual trainees are counted under each program they commenced/completed/registered in. The total training program commencements/completions/registrations are therefore greater than the number of unique trainees commencing.

The RACP Board approves the training fees on an annual basis. The fees are based on the guiding pricing principles of equality and cost of the service provided. The College has not changed the fees for 2021 and have not charged interruption to training fees for 2020 and 2021 due to COVID -19.

Fees are communicated to trainees via College website and emails.

### **Summary of College performance against Standard 7**

The College is commended on the ongoing work to monitor and support trainee and physician welfare and wellbeing and for the implementation of the Trainee Voice as a standing item on the Board Agenda.

The College will be piloting the Situational Judgement Test in 2022 and an update should be included in the next progress report.

This Standard continues to be Met.

## **Standard 8: Implementing the training program – delivery of educational resources**

Areas covered by this standard: supervisory and educational roles and training sites and posts

### **1 Significant developments underway or planned that relate to the accreditation standards**

#### **AMC commentary – significant developments against Standard 8**

The College requires all supervisors to complete the Supervisor Professional Development Program. All supervisors must complete one workshop by end 2021 (an extension of 12 months based on COVID-19 challenges) and the remaining two by end 2022. Due to COVID-19, these workshops are delivered virtually.

The Educational Leadership and Supervision Framework is currently undergoing review,

The College Education Committee (CEC) approved Phase 1 implementation of the new Accreditation Program which commenced January 2021. Phase 1 involves the accreditation of settings against the new Training Provider Accreditation Standards and its Basic Training programs against the Basic Training Accreditation Requirements for Adult Internal Medicine and Paediatrics & Child Health.

Since implementation of the new program, six settings have had accreditation visits against the new Standards, including two joint visits. Evaluation plans for Phase 1 of the new accreditation program have been designed. The College is asked to provide an update on how implementation has progressed, and the outcomes of Phase 1 evaluation in next year's report.

As part of the new Training Provider Accreditation program of work, the College is progressing the Capacity to Train project. The Capacity to Train Guide will be piloted with DPEs at Basic Training settings. In the 2022 progress report the College should comment on the progress of the Capacity to Train pilot.

As a result of the 2020 Physician Training Survey, 35 sites were identified as being areas of concern regarding training and/or wellbeing. The College is engaging with these sites.

In April 2021, the CEC agreed to the development of a strategy for greater participation of trainees in accreditation and a review of the terms of reference and membership of all college committees responsible for accreditation to ensure they include a trainee representative. The AMC are interested in an update on the implementation of this strategy.

### **2 Activity against conditions**

Nil remain.

### 3 Statistics and annual updates

#### AMC commentary – statistics and annual updates against Standard 8

The required data has been provided. Due to the COVID-19 pandemic, all training committees were required to:

- Extend the accreditation of all settings by 12 months
- Postpone 2020 accreditation visits to 2021
- Only consider virtual accreditation visits if a training setting requires an accreditation visit due to identified breaches/concerns. In 2020 all site visit were run virtually.

#### Summary of College performance against Standard 8

This Standard continues to be Met.

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### Standard 9: Continuing professional development, further training and remediation

Areas covered by this standard: continuing professional development; further training of individual specialists; remediation

#### 1 Significant developments underway or planned that relate to the accreditation standards

##### AMC commentary – significant developments against Standard 9

The development of a new MyCPD platform is currently underway and scheduled to launch in the second half of 2021.

The College reports it is embedding cultural safety and issues of health equity into the CPD program. The College has published a statement on Indigenous Child Health in Australia and Aotearoa New Zealand and are considering recommendations to help inform integration of cultural safety and focus on health equity into CPD.

An annual conversation template has been developed in response to the MCNZ recertification requirement that will be implemented. The annual conversation template includes a focus on cultural safety, maintaining health and wellbeing, and detailed future planning.

#### 2 Activity against conditions

Nil remain.

### 3 Statistics and annual updates

#### AMC commentary – statistics and annual updates against Standard 9

The MBA and MCNZ confirmed all medical practitioners did not have a CPD requirement for 2020 due to the impacts of COVID-19 and therefore the data on CPD completion rates were much lower than previous years.

#### Summary of College performance against Standard 9

The Standard continues to be Met.

### Standard 10: Assessment of specialist international medical graduates

Areas covered by this standard: assessment framework; assessment methods; assessment decision; communication with specialist international medical graduate applicants

#### 1 Significant developments underway or planned that relate to the accreditation standards

##### AMC commentary – significant developments against Standard 10

The College continued its Overseas Trained Physicians (OTP) assessment during 2020 with little impact from COVID-19. The interview process was moved entirely online.

An online resource for OTP interviewers is being developed. The Australian version of the interviewer training resource is due to launch in the second half of 2021 and a resource will be developed for New Zealand assessors.

The College has completed a review of their specialist assessment processes. Major process changes were not required but they introduced the preliminary summary of findings to all applicants to align with the Standards.

In 2019, an evaluation of the OTP assessment process was undertaken in Australia by surveying 200 OTPs who recently achieved Fellowship. The College had a 49% response rate to the survey. There were eight recommendations identified for process improvements which are currently being implemented.

The College has identified actions to support the integration of knowledge and understanding of Te Tiriti o Waitangi, Hauora Māori, cultural safety and health equity into the OTP application and assessment process. Initiatives include the review of the OTP application form, interview report and assessment requirements to include specific content and questions on Te Tiriti o Waitangi, Hauora Māori, cultural safety and health equity. Review of the OTP Orientation Program required for all OTPs in Australia is also planned to ensure it prioritises learnings on cultural safety, health equity and the health and wellbeing of Aboriginal and Torres Strait Islander Peoples.

## 2 Activity against conditions

Nil remain.

## 3 Statistics and annual updates

### AMC commentary – statistics and annual updates against Standard 10

The College received applications from OTPs in more than 30 countries, with assessments across 29 different specialties, and provided a total of 263 assessment decisions and recommendations in 2020. This included:

- 152 interim assessment decisions on the comparability of OTPs with Australian trained physicians.
- 111 recommendations (including preliminary and interview advice applications) to the MCNZ on the equivalence of OTP applicants with Aotearoa New Zealand trained physicians.

### Summary of College performance against Standard 10

The Standard continues to be Met.

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## Section B – Report on Quality Improvement Recommendations

The College did not comment on Quality Improvement Recommendations in this year's progress report.

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