



SOUTH AUSTRALIAN  
MEDICAL EDUCATION & TRAINING

# A Report on the Junior Doctor Allocations in South Australia

*for positions commencing in 2015*

2015

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## **EXECUTIVE SUMMARY**

The South Australian Medical Education and Training (SA MET) Unit administers the centralised application, allocation and offer systems for intern (Postgraduate Year 1) and Postgraduate Year 2+ (PGY2+, Resident Medical Officer) positions in South Australia. This report provides an overview of statistical data, user feedback and system evaluation for the 2014 allocations.

### **Intern application, allocation and offer system**

In 2014 (for the 2015 medical internship year) there were 663 eligible medical graduate applicants for a total of 254 intern positions. These positions were allocated according to agreed categories that give priority to local, Commonwealth supported graduates. For the 2015 clinical year, South Australia's intern positions were filled by 231 local graduates and 23 interstate applicants.

### **Data Collection and Analysis**

A secondary data collection was undertaken during the application process to obtain information about preferred rotations and career pathways from applicants who accepted a position. This information is useful to Local Health Networks (LHNs) for rostering, career planning and assists with future medical workforce planning in South Australia.

### **PGY2+ application, allocation and offer system**

In 2014 (for the 2015 medical training year), there were 790 eligible applicants for 412 PGY2+ positions in South Australian LHNs that were managed through a centralised process by the SA MET Unit. These positions were offered to applicants using a merit-based process that takes into consideration applicant training program preferences, a merit based selection process, interviews (if required) and ranking by the hospital. This resulted in 395 positions being filled via the SA MET Unit process. In addition, a large number of PGY2+ positions are filled directly by LHNs independently of the SA MET Unit process.

To assist hospital units with employee selection, 2,366 referees were nominated by applicants with 90% percent of referees completing referee reports.

### **Looking to the future**

Commencing from 2015, the intern and PGY2+ application and allocation system will be facilitated through SA Health's eRecruitment system. The SA MET Unit, in partnership with the SA Health Workforce department, will undertake this transition. The method of allocating medical graduates and PGY2+ applicants to positions will not change.

## INTERNS

Applications for intern positions in South Australia were made online through [www.samet.org.au](http://www.samet.org.au) and applicants were able to select their preferred LHN to complete their medical internship.

Intern positions are offered using a computer based algorithm that considers the applicant's residency status, university, LHN preferences and the number of available intern positions. If the number of applicants exceeds the number of available intern positions, then a randomised ballot is used to allocate applicants to intern positions. Offers are made in order of applicant category (Appendix A).

Applicants are allocated to a LHN, rather than an individual hospital, although they are advised at a later stage by the SA MET Unit of their home hospital. Allocating applicants to LHNs provides a greater choice of clinical rotations and allows medical administration to match staffing demands, supervision, service requirements and training opportunities.

### Applicants

Applications for 2015 medical internship in South Australia opened on Friday 9 May 2014 and closed on Friday, 6 June 2014. The applicant closing date and the first round allocation date were agreed to by all Australian jurisdictions.

Applicants were required to provide personal and contact information, residency status and demographic data, upload requested documentation and rank their preferred LHNs. All applications were manually reviewed, cross-checked and verified by SA MET Unit staff to ensure that the eligibility criteria (Appendix B) had been met and applicants were categorised correctly. Applicants who did not meet the eligibility criteria were marked as ineligible, provided with an explanation for their ineligibility and excluded from the allocation.

A total of 779 applications were commenced, with 717 of these submitted by the specified closing date. Following the verification of all applications, 663 were determined to have completed their application and met the eligibility criteria and were marked as validated.

### Ineligible/Incomplete applications

A total of 116 applications were deemed to be incomplete at time of submission or did not meet the eligibility criteria (Table 1). Reasons for this were:

- > incomplete application: 53.4%
- > English language proficiency requirements not met: 22.5%
- > inadequate documentation: 15.5%
- > international medical graduate: 6.9%
- > not able to commence in January 2015: 1.7%

These applications were excluded from the allocation. Where there was any doubt regarding an applicant's eligibility, the applicant was provided with an opportunity to provide supporting evidence prior to being marked as ineligible.

## Allocations

Eligible applicants were allocated to available intern positions using a computer-based algorithm that took into consideration:

- > intern category (Appendix A);
- > applicants' LHN preferences; and
- > number of available positions at each LHN (Table 1).

As some LHNs received more first preference rankings than there were available positions, a computer algorithm used a randomise function to determine which applicants were offered positions.

This randomise function extracted a random list of eligible applicants from the relevant intern category, then to exclude any common groupings, a second shuffle algorithm produced a randomly ordered list of applicants. The order of this list was used to allocate individuals to their highest preference training hospital until all available positions at that hospital had been filled. This process was repeated for every offer round as declined offers were received.

Notifications to successful applicants were sent by email, with applicants required to respond online within a specified timeframe; generally within 48-72 hours. If a position was declined, that position was reallocated to an applicant from the same or next priority group who had not yet received an offer of an intern position in South Australia.

## Quality Assurance

Prior to initial offers being made, a comprehensive quality assurance analysis was undertaken to validate the allocation process. This showed that:

- > all offers were made to applicants who met the eligibility criteria;
- > published category groups were adhered to; and
- > ballot outcomes, where required, were random with no significant association between applicant surname, application submission date or application validation/verification date and allocation outcome.

## Allocation data

For the 2015 South Australian intern year there were 254 intern positions available. A total of 389 offers were made for intern positions in South Australia across Commonwealth supported and full fee paying medical graduates from South Australian universities, interstate Commonwealth supported graduates and international medical graduates from South Australian universities. A total of 206 Commonwealth supported and 3 full fee paying graduates from South Australian universities accepted their offers, 23 Commonwealth supported graduates from interstate universities accepted their offers and 22 international graduates from South Australian universities accepted their offers of internship in SA. Further data are available for review in Appendix C.

Currently South Australia has 7.8% of all Australian intern positions, in comparison to having 7.2%<sup>1</sup> of the Australian population<sup>1</sup>.

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<sup>1</sup> Population data from Australian Bureau of Statistics, 3101.0 - Australian Demographic Statistics, June 2014.

### **First preference allocation**

An analysis into the number of applicants in each category who received their first preference was undertaken. 79.9% of medical graduates who accepted an offer of internship in South Australia received their first preference. 15.0% of medical graduates accepted an offer for their second preference and 5.1% of medical graduates accepted an offer for their third preference. No offers were made for fourth preferences (Appendix C, Table 3).

### **Rotation selection**

Interns are required to undertake a variety of clinical placements during their intern year. These include core rotations in appropriate medical and surgical units and an emergency medicine department. Non-core rotations are also utilised to make up the required five terms of an intern year. Rotations available vary between the LHNs and are dependent on the health services provided in that area.

Applicants who accepted an offer were able to complete an online rotation preference form. The relevant hospital rotation list was provided for applicants to preference the rotations, provide a brief statement regarding their career pathway intentions (if known) and request any specific annual leave dates.

Preferred rotation information was collected and provided to medical administrative staff to assist with developing intern rotation rostering.

### **National Audit of Intern Acceptances**

In order to manage the significant number of applicants who accept intern positions in multiple jurisdictions before finalising their choice to one position, each year the National Medical Intern Data Management Working Group (NMIDM WG) coordinates a National Audit of Intern Acceptances (the audit).

The audit occurs annually and aims to ensure that applicants have the most equitable and timely opportunity to obtain an intern position in Australia. With increasing medical graduate numbers across Australia, the audit does not aim to prevent applicants receiving multiple offers but rather clarify and resolve which offer an applicant truly intends to accept when two or more offers have been accepted in different jurisdictions.

The audit uses data provided by the jurisdictions to identify applicants who have accepted multiple intern positions across Australia. Those applicants are contacted and given a specified timeframe to decide which position they will ultimately accept. Applicants who do not make a timely decision are withdrawn<sup>2</sup> from all accepted positions, except the first one that was offered to them.

### **PGPPP Cessation**

With the cessation of the Prevocational General Practice Placement Program (PGPPP) the number of intern positions available in South Australia declined by 23 positions.

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<sup>2</sup> *The Terms of Use that are accepted by applicants when applying for a position allow positions to be withdrawn from applicants in order ensure timely management of multiple acceptances or in the event that an applicant is subsequently found to be ineligible.*

### **South Australian International Medical Graduates**

Fourteen local international medical graduates did not receive an offer of an internship through the SA MET Unit process. SA MET Unit staff sought permission from these applicants to provide their information to the LHNs. One applicant responded confirming an offer for internship had not yet been secured in Australia. This applicant's information was forwarded to the medical administration units at all South Australian teaching hospitals to use if an intern position became available.

### **Evaluation**

Evaluation of the intern application system is undertaken annually to assist with quality improvement and ongoing development. These surveys asked respondents to rate the usability of the online application systems. 103 medical graduate applicants (16.1%) completed the survey and 95.2% found the system was easy to navigate and 94.7% indicated the system instructions were easy to understand.

## **POSTGRADUATE YEAR 2 AND BEYOND (PGY2+)**

Following the successful completion of a medical intern year, junior doctors may begin pre-specialist training or undertake general training. These subsequent training years provide junior doctors with further clinical experience, establish networks and the opportunity to explore the various medical specialties in depth prior to choosing a specialty.

Generalist training positions within hospitals provide junior doctors with further general hospital experience and clinical exposure. These positions provide rotations through a range of medical, surgical and emergency units, and are suitable for junior doctors who are yet to decide on a medical career pathway, or those who wish to gain more clinical experience prior to specialty training.

Recruitment and allocation of some PGY2+ positions in South Australia is undertaken through a centralised process administered by the SA MET Unit on behalf of SA Health. Some training programs choose to extend existing staff contracts and/or advertise positions outside of this central application and allocation process, and therefore the data presented within this report are not a complete representation of South Australia's PGY2+ workforce.

Allocation of Specialist Training Positions (is not undertaken by the SA MET Unit. Recruitment for these positions is coordinated directly by hospitals and/or specialty colleges.

### **Applications**

The SA MET Unit utilises an online application system for PGY2+ positions, which allows applicants to submit employment applications, nominate referees and select their preferred training programs. Following the close of applications, applicants are ranked on merit by the hospital-based training program administrators. The SA MET Unit then matches applicants to positions optimising applicant preferences, hospital merit ranking and available positions. The allocation of PGY2+ applicants is undertaken in rounds and is based on applicants' preferences and training program ranking.

As there are usually more applicants than positions available, the SA MET Unit undertakes a supplementary allocation process to manage any vacancies that may arise post-allocation.

### **Allocation data**

Applications for 2015 PGY2+ positions in South Australia opened on Friday, 23 May 2014 and closed at 5pm (ACST) on Monday, 30 June 2014. There were 956 applications received by the SA MET Unit for 412 positions. These included 166 applications that did not meet the eligibility criteria or were incomplete (Appendix B) and were ultimately excluded from the recruitment and allocation process. For positions commencing in 2015, there were 26 training programs across the LHNs that PGY2+ applicants could choose and select their first, second and third preferences. In 2014, for the 2015 training year, the allocation of PGY2+ positions was undertaken in three rounds; throughout these rounds three rounds applicants accept and decline offers. There were 398 positions filled in the first round and a further 46 and six positions were filled in rounds two and three respectively. A complete list of applicants and allocations for each training program is provided in under Appendix C.



### Single application code for General Training and General Practice Training

General Training and General Practice Training were combined into a single application code for each hospital. This process was introduced to resolve issues that arise when applicants are accepted into General Practice Training but do not get offered a hospital position and vice versa. It was also anticipated that this would resolve some of the timing issues, related to position offers and acceptances/refusal from college training programs.

Applicants applying for General Practice Training were required to select the General Training/General Practice Training program code, at the hospital of their choice. If applicants were accepted into a General Practice Training program with one of the Regional Training Providers (for example Adelaide to Outback or Sturt Fleurieu), the appointing hospital agreed to provide an appropriate training opportunity.

### Training program preference analysis

In order to explore the decisions behind junior doctors' preferences, a number of questions were incorporated into the application form. Completion of these was voluntary, however the majority of the eligible applicants completed the questionnaire.

Analysis of the data showed that 91.3% of applicants had a specialty training program in mind, with surgery, general practice and paediatrics being the most preferred with 15.4%, 21.1% and 9.8% of applicants intending to pursue that specialty respectively.

### Referee reports

PGY2+ applicants are required to nominate referees who can provide referee reports to the hospitals during the selection process. Applicants are to nominate at least two referees and provide their names, email addresses and phone numbers. Referee report forms are made available via an online form which is emailed to the referee once the applicant completes the referee section of their application. The referees are then able to follow a uniquely generated hyperlink to complete the referee report for the applicant. The referee form collects the following information:

- > *Supervisor's information:* relationship to the applicant, capacity of work, number of clinical encounters with applicant, period of supervision of applicant, hospital and unit location.
- > *Trainee information:* communication skills, clinical competencies, professional and personal conduct.

The referee reports are provided in confidence and copies are not provided to applicants or to any person or institution outside of the SA MET Unit's matching and allocation process. Applicants may check the status of their referee reports by logging onto their SA MET Unit account.

### Evaluation

The SA MET Unit undertakes a survey of the PGY2+ application system each year to assist with quality improvement and ongoing development. The survey cohort consists of junior doctors applying for PGY2+ positions in South Australian public hospitals commencing in January 2015.

- > *Applicant opinion:* 84 users out of 790 (10.6%) applicants completed the online survey with 92.1% finding the system easy to navigate and 93.5% indicating the system had easy to understand instructions.

### **Process for 2015 applications for 2016**

Annually the SA MET Unit undertakes an evaluation of the Intern and PGY2+ application system of which positive feedback is generally received. In 2015 these applications will be received through the SA Health eRecruitment system. The SA MET Unit will continue to monitor the applications and improve them where possible.

## APPENDIX A: INTERN CATEGORY GROUPS + ELIGIBILITY CRITERIA

SOUTH AUSTRALIAN INTERN CATEGORY GROUPS FOR 2015	
CATEGORY	CRITERIA
<b>Category 1</b>	<b>Australian Citizens, Australian Permanent Residents and New Zealand Citizens</b>
1.1*	Medical graduates from a South Australian University - Commonwealth-supported (HECS-HELP) or SA Bonded Medical Scholarship Scheme (SABMSS)
1.2	Medical graduates from a South Australian university - full-fee paying
<b>Category 2</b>	<b>Australian Citizens, Australian Permanent Residents and New Zealand Citizens</b>
2.1	Medical graduates from an interstate or New Zealand University - who completed Year 12 in South Australia
2.2	Medical graduates from an interstate or New Zealand University
<b>Category 3</b>	<b>Australian Temporary Residents and New Zealand Permanent Residents</b>
3.1	Medical Students from a South Australian University
<b>Category 4</b>	<b>Australian Temporary Residents and New Zealand Permanent Residents</b>
4.1	Medical graduates from an interstate or New Zealand University
<b>Category 5</b>	<b>Australian Temporary Residents and New Zealand Permanent Residents</b>
5.1	Medical graduates who have spent two or more semesters in an overseas campus of an Australia or New Zealand University (e.g., Monash Sunway campus, UQ New Orleans campus)
*Category 1.1 applicants – an intern place is currently guaranteed in SA under the 2006 COAG commitment	

### ELIGIBILITY CRITERIA FOR AN INTERNSHIP POSITION IN SOUTH AUSTRALIA FOR 2014

To be eligible to apply for an internship position in South Australia you must:

- > Have graduated from Medical school in an Australian or New Zealand university in the last three years and have a visa or residency status that allows you to work unrestricted in Australia for the duration of your prevocational training.
- > Be able to begin working on the January start date, which includes compulsory orientation, and fulfil the minimum 12 month contract working full time.
- > Have **not** completed an internship in Australia or NZ before.

All positions offered through this process are for a minimum of 12 months. Applications for a part-time position will be considered and are subject to negotiation with LHNs. A part-time position is not guaranteed.

#### English Language Proficiency Testing

All applicants must provide evidence that they will meet the Medical Board of Australia's (MBA) English Language Proficiency Registration Standard.

If you completed secondary school in Australia, New Zealand, Canada, UK, Ireland, USA or South Africa ('Exempt Countries') you will be required to provide a copy of a school certificate or similar document. If you completed secondary schooling in any other country you must have successfully passed an AHPRA approved English language skills test (IELTS, OETS) in the last two years, or have been continuously enrolled in study if taken more than two years ago. You will be required to provide a copy of your skills test report with your application. You should note that Foundation year programs or completing an Australian, UK or similar secondary school program outside of these countries (e.g. SACE Certificate in Malaysia) **DO NOT** count as equivalent for registration. If you are unsure you should contact the MBA for clarification.

## APPENDIX B: PGY2+ ELIGIBILITY CRITERIA

### ELIGIBILITY CRITERIA FOR A PGY2+ POSITION IN SOUTH AUSTRALIA FOR 2015

To be eligible to apply for a PGY2+ position through the SA MET Unit you must:

- > have general registration as a medical practitioner in Australia issued by the Medical Board of Australia, or
- > currently have provisional or limited registration and you will have general registration on or before the January start date, and
- > be available for a 12-month full-time contract commencing on the January start date.

Applicants seeking a part time contract or who are not able to commence on the January start date are not eligible to apply for a PGY2+ position through the SA MET Unit. You will need to negotiate employment directly with the hospital outside of the SA MET Unit's allocation process.

#### **International Medical Graduates**

To be eligible to apply as an International Medical Graduates (IMG) you must meet the following criteria:

- > Successfully completed both the Australian Medical Council MCQ and the Clinical examination or have advanced standing towards the AMC Certificate under the Competent Authority pathway (CA pathway).
- > Currently holding limited registration - Satisfied or currently completing the requirements of an Australian intern year or equivalent supervised training (core rotations) thus eligible for general medical registration with the Australian Medical Board .

You are not eligible to apply for a position through this website if you do not have, or will not have by the January start date, general registration with the Medical Board of Australia

## APPENDIX C: DATA TABLES

TABLE 1: AVAILABLE INTERN POSITIONS IN SOUTH AUSTRALIA, 2012 - 2015				
LOCAL HEALTH NETWORK (LHN)	2012	2013	2014	2015
<b>Central Adelaide LHN*</b>				
> Royal Adelaide Hospital				
> The Queen Elizabeth Hospital	131	146	148	133
<i>*Includes rotations to the Women's and Children's Hospital and Hampstead Rehabilitation Centre</i>				
<b>Southern Adelaide LHN</b>				
> Flinders Medical Centre				
> Repatriation General Hospital	68	73	74	68
> Noarlunga Health Service				
<b>Northern Adelaide LHN</b>				
> Modbury Hospital	51	51	50	48
> Lyell McEwin Hospital				
<b>Country Health SA LHN</b>				
> Mount Gambier and Districts Health Service	6	6	6	5
<b>Total</b>	<b>256</b>	<b>276</b>	<b>278</b>	<b>254</b>

TABLE 2: UNIVERSITY OF STUDY AND PRIORITY GROUP OF MEDICAL GRADUATES WHO ACCEPTED AN INTERN POSITION IN SA FOR 2014											
PRIORITY GROUP	ADELAIDE UNI	FLINDERS UNI	ACT UNI	NSW UNI	QLD UNI	TAS UNI	VIC UNI	WA UNI	NZ UNI	MONASH MALAYSIA	TOTAL
CATEGORY 1.1	132	74	-	-	-	-	-	-	-	-	206
CATEGORY 1.2	-	3	-	-	-	-	-	-	-	-	3
CATEGORY 2.1	-	-	-	1	4	-	2	-	-	-	7
CATEGORY 2.2	-	-	-	2	7	5	1	-	-	1	16
CATEGORY 3.1	12	10	-	-	-	-	-	-	-	-	22
CATEGORY 4.1	-	-	-	-	-	-	-	-	-	-	0
CATEGORY 5.1	-	-	-	-	-	-	-	-	-	-	0
<b>Total</b>	<b>144</b>	<b>87</b>	<b>0</b>	<b>3</b>	<b>11</b>	<b>5</b>	<b>3</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>254</b>

<b>TABLE 3: INTERN PREFERENCE ANALYSIS, 2014</b>					
	RECEIVED 1 <sup>ST</sup> PREF.	RECEIVED 2 <sup>ND</sup> PREF.	RECEIVED 3 <sup>RD</sup> PREF.	RECEIVED 4 <sup>TH</sup> PREF.	TOTAL
CATEGORY 1.1 AND 1.2	174	31	4	0	209
CATEGORY 2.1. AND 2.2	10	4	9	0	23
CATEGORY 3	19	3	0	0	22
<b>TOTAL</b>	203	38	13	0	254
<b>% OF TOTAL RECEIVED</b>	<b>79.9%</b>	<b>15.0%</b>	<b>5.1%</b>	<b>0.0%</b>	
<i>*first preference percentage rate will change in future allocations</i>					

<b>TABLE 4: SUMMARY OF POSTGRADUATE YEAR 2+ APPLICANTS AND ALLOCATION OFFERS, 2014</b>	
	TOTAL
TOTAL APPLICATIONS	956
ELIGIBLE APPLICATIONS	790
APPLICATIONS WITHDRAWN PRIOR TO ALLOCATION	53
REFEREES NOMINATED:	2366
REFEREE REPORTS COMPLETED:	2132
ROUND ONE OFFERS MADE	398
ROUND TWO OFFERS MADE	46
ROUND THREE OFFERS MADE	6
OFFERS MADE AFTER FIRST THREE ROUNDS USING 'UNMATCHED SYSTEM'	34

**TABLE 5: PGY2+ APPLICATIONS AND OFFERS FOR THE 2015 CLINICAL YEAR MADE BY SA MET UNIT, 2014**

LOCATION	PROGRAM	AVAILABLE POSITIONS	OFFERS	DECLINES	POSITIONS FILLED	POSITIONS UNFILLED
FLINDERS MEDICAL CENTRE (FMC)	FMC 3-100 General Training/GP Training	66	77	11	66	
	FMC 3-300 Basic Physician Training - Adult Medicine	14	15	1	14	
	FMC 3-400 Surgical RMO Rotations	16	16	0	16	
LYELL MCEWIN HOSPITAL	LMH 5-100 General Training/GP Training	39	44	5	39	
	LMH 5-300 Basic Physician Training	8	8	0	8	
	LMH 5-500 Obstetrics & Gynaecology (12 Months)	7	9	4	5	2
	LMH 5-550 Obstetrics & Gynaecology (6 Months) with Paediatrics (6 Months)	4	5	1	4	
	LMH 5-560 Paediatrics	1	1	0	1	
	LMH 5-400 Surgical RMO Rotations	4	5	1	4	
MODBURY HOSPITAL	MOD 6-100 General Training/GP Training	36	44	8	36	
	MOD 6-450 General Surgery Service Post	3	3	0	3	
	MOD 6-460 ENT Surgery Service Post	0	0	0	0	
MT GAMBIER & DISTRICTS HEALTH SERVICE	MGDHS 10-100 General Training/GP Training	4	4	0	4	
	MGDHS 10-110 DRANZCOG	1	0	0	0	1
	MGDHS 10-160 Advanced Rural Skills Anaesthetics	1	2	1	1	
	MGDHS 10-600 Emergency Medicine Advanced Specialised Training	2	2	0	2	
ROYAL ADELAIDE HOSPITAL	RAH 1-100 General Training/GP Training	62	71	9	62	
	RAH 1-300 Basic Physician Training	18	20	2	18	
	RAH 1-400 Surgical RMO Rotations	8	8	0	8	
THE QUEEN ELIZABETH HOSPITAL	TQEH 2-100 General Training/GP Training	44	50	6	44	
	TQEH 2-300 Basic Physician Training	10	11	1	10	
	TQEH 2-400 Surgical RMO Rotations	8	9	1	8	
WOMEN'S & CHILDREN'S HOSPITAL	WCH 4-100 General Training/GP Training	15	15	0	15	
	WCH 4-500 Obstetrics and Gynaecology	6	9	3	6	
	MHS 7-700 Mental Health Services	22	8	0	8	14
	PDN 9-800 Paediatric Basic Training	13	14	1	13	
	<b>Total</b>	<b>412</b>	<b>450</b>	<b>55</b>	<b>395</b>	<b>17</b>

\*reflects positions that were not filled via SA MET. Hospital units employ staff outside the SA MET process to capacity.