Delivery of a safe, contemporary and sustainable healthcare system for South Australia





Context

- Medical practice training is a lengthy process primarily completed in the public health system
- Large cohorts of trainee doctors change rotations, hospitals and health networks to access these required clinical rotations
- Trainee doctors are on a steep learning curve within increasingly complex healthcare environments
- With every change in rotation, trainees must adapt to working with new teams, systems and clinical scenarios



Overview

- Australian university medical program graduates are eligible for provisional registration with the regulation authority AHPRA
- This allows access to an internship
- After internship most trainees complete between
 2-3 years in general rotations
- This time is referred to as prevocational training



Overview (continued)

- The SA MET Advisory Council has oversight of the intern and prevocational space in South Australia
- The prevocational period is still largely predicated on an apprenticeship model
- > Trainee doctors learn by doing
- Vocational training usually comes next and can take between 3-6 years
- The medical colleges have oversight of this period of training

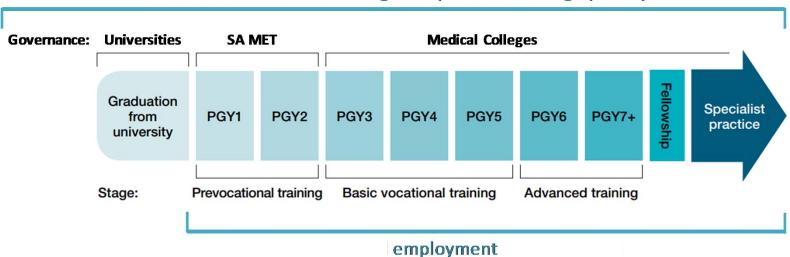


Overview (continued)

- Education and training are essential for progress and skill acquisition
- As a trainee progresses and acquires more skills, their role and responsibilities will gradually become more complex
- The following image is indicative only training pathways can vary and some doctors may choose not to specialise

Medical Training Continuum – Overview of Training Pathways

Medical Education and Training Principles – our strategic priority



Medical Training Continuum – Overview of training pathways. This image is indicative only – training pathways can vary and some doctors may choose not to specialise. For information about specific training programs, refer to the relevant medical college or postgraduate medical council website.

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Medical Education and Training Principles – Purpose

- > To demonstrate that quality outcomes in patient care stem from a skilled and knowledgeable workforce
- The Principles document:
 - Highlights the role of education and training in the workplace
 - Stresses the benefits to executives for supporting education and training
 - Emphasises the benefits to staff that the healthcare setting can have on their education and training
 - Recognises partners in this space have their own agendas and often conflicting pressure
 - Is a tool that can support discussion for resourcing, consistency and more

SA Health



Governance and Leadership:

Educational governance and leadership ensures that there is continuous improvement in the performance, effectiveness and accountability of education and training



Learning Environment and Culture:

- The culture of learning is central to the organisation
- Education and training is a valued part of the organisational culture
- Learners will have a positive educational experience and educators will be valued and there is an organisational commitment to, and support of, learning



Resourcing:

- Educators have the necessary knowledge and skills for their role, and the resources required to deliver effective education and training
- > Learners have the necessary resources to participate in education and training



Curricula Implementation:

 Curricula and assessments are developed and implemented in partnership with medical education and training provider



Final Word

- Recognise that education and training is occurring
- Those who provide education and training need recognition – particularly people who are high performers and are leaders in this area
- Reporting on education and training activities annually will assist in measuring impacts on patient outcomes



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