

Local Health Network Accreditation Report



Northern Adelaide Local Health Network Lyell McEwin and Modbury Hospitals

Accreditation Report Details

Date of Visit:	27 & 28 August 2019
Team Leaders:	Dr Bruce Mugford Dr Caroline Phegan
Team Members:	Dr Lynne Raw Dr Isuru Sirisinghe Dr Matthew Chu Dr Tim Weir
SA MET Unit:	Miss Pagonitsa Mavromoustakis Mrs Carmen Crawford Ms Colleen Cryans
Date approved by SA MET Health Advisory Council:	27 November 2019
Expiry Date:	30 November 2022

Accreditation Decision

3 years with 20 provisos

Executive Summary

The South Australian Government recently restructured the governance of SA Health, and established 10 Local Health Networks (LHNs), each with its own Governing Board. The Chief Executive Officer (CEO) indicated that the formal NALHN Strategic Plan will be developed with the incoming Governing Board. It is unclear if this will include aspects of TMO education and training or how the Postgraduate Medical Education Unit (PMEU) fits within the NALHN Governance Committee Structure.

The CEO has overall accountability for the prevocational medical training provided across NALHN, and supports the teaching and training of TMOs through the provision of appropriate resources and facilities in line with the SA MET Medical Education and Training Principles. The NALHN PMEU has a dedicated budget that supports the ongoing functions to deliver medical education and training. In addition, PMEU staff are supported by the CEO to undertake professional development activities and attend the annual National Prevocational Medical Education Forum.

The LMH is undergoing a redevelopment with 400 square metres of new space designated as education and teaching for Nursing and Medicine. This includes learning rooms and a clinical skills training space, which provides the opportunity to observe, learn and practice various clinical techniques and procedures.

At the time of the visit, the NALHN PMEU was supported by two Directors of Clinical Training, two Medical Education Officers, a Medical Education Registrar and one Administrative Officer. A review of the structure and functions of the PMEU was undertaken early in 2019, which was reported to have presented various recommendations to improve efficiency and support the ongoing appointment of a full-time DCT.

The Education and Training Program Committee at NALHN is represented by the General Clinical Training Committee (GCTC). The GCTC is responsible for ensuring that NALHN demonstrates a commitment to the education and training of TMOs consistent with the guidelines endorsed by the SA MET Unit by; identifying issues relevant to the training and education of TMOs and recommending and managing policy and programme development relevant to TMOs.

TMOs have the opportunity to provide feedback on their education and training experience through mid and end-of-term assessments, JMO Feedback and Appraisal (JAFA) Forms, informal discussions educational sessions and other informal avenues such as sharing concerns with team members, colleagues, Term Supervisors, PMEU staff and the GCTC forum.

NALHN demonstrated a broad range of hospital wide and unit specific educational activities such as clinical meetings, journal club presentations, workshops, tutorials and simulations. There were some concerns with designated protected time within some units, however the overall feedback was positive.

TMOs reported the clinical experiences and exposure across NALHN terms was satisfactory, however with some exception across a few units where the clinical exposure was considered inadequate. There were some inconsistencies noted across some units in regards to the quality of unit specific orientation.

In the majority of terms, TMOs are well supervised at a level appropriate to their responsibilities and experiences. In most cases the term supervisor is not directly supervising the TMOs, but rather delegating to a suitable senior medical officer. NALHN TMOs are advised of assessment requirements at orientation. The PMEU also emails the assessment forms to all TMOs several weeks prior to their due date. There were some inconsistencies with assessments, however it was identified the majority of mid-term assessments are conducted as an informal process whereas the end-term assessments are formalised.

TMO welfare is a significant and critical part of the PMEU's role. The availability of PMEU support and advice is stressed at orientation and again during formal interviews and informal contact. NALHN indicated that the identification of a TMO who is not performing well will, in most instances, be made aware by the term supervisor who will inform the TMO and PMEU. Most units encourage TMOs to claim non-rostered hours, however, there were some concerns raised within numerous units where overtime was discouraged and not approved. There was no evidence of a formal sick leave, annual leave, or professional development leave policy.