

Prevocational Doctor Assessment Review and Appeals Policy and Procedure

Policy Statement:

The National Framework for Prevocational Medical Training (NFPMT) requires that an Assessment Review Panel (ARP) be appointed to monitor and make decisions about the longitudinal progress of postgraduate year one (PGY1) and postgraduate year two (PGY2) doctors. This policy and procedure describes how the ARP performs its functions, including the handing of an appeal of a term assessment.

Definitions:

Prevocational doctor – for the purposes of this policy, a prevocational doctor is a PGY1 or PGY2 doctor who is not enrolled as a candidate of a specialist medical college

Personnel to which this policy applies:

ARP members and invited representatives; prevocational doctors.

Procedure:

1. The ARP will meet at the end of each clinical term to discuss the progress of every prevocational doctor
2. The ARP will consider each doctor with a level of detail depending on the issues that have been identified, e.g.
 - Routine** – High level summary of outcome assessment where all components satisfactory
 - Routine with some areas for discussion/noting** – Summary of assessment component outcomes with further detail as required
 - Complex** – Detailed presentation of all assessment components for discussion¹
3. The ARP should consider a range of information on prevocational doctor progression, including:
 - Outcomes of Entrustable Professional Activity (EPA) assessments
 - Mid and end of term assessments
 - Other learning activities, e.g. mandatory education and training activities
 - Relevant information provided by the prevocational doctor and/or term or clinical supervisors (especially for complex decisions)
 - Multisource feedback (e.g. from nursing or allied health staff)
 - Consumer feedback
 - Medical record review, including discharge summaries
 - Efficiency data (e.g. number of patients reviewed per shift in the Emergency Department compared to peers)
4. The ARP should take a longitudinal approach to assessment, such that satisfactory performance is judged on whether the prevocational doctor has attained the required standard by the end of the clinical year, rather than as a requirement to pass a specified number of EPAs or end of term assessments
5. The ARP may:
 - Request further information
 - Make a recommendation to progress without feedback to the prevocational doctor

¹ Adapted from Australian Medical Council Assessment Review Panels: A Guide for Prevocational Training Providers, Table 1, p9, available at [Assessment Review Panel - PMCV](#) (Accessed 12/04/2024)

- Make a recommendation to progress with specific feedback to the prevocational doctor
 - Make a recommendation to delay progression with specific feedback in writing to the prevocational doctor
 - Make a recommendation to refer to the Chief Medical Officer (e.g. if there are patient safety concerns)
6. Decisions will generally be arrived at by ARP member consensus. Should a vote be required, voting members will be: Chief Medical Officer; Clinical Director of Medicine (Chair); Co-Directors of Clinical Training; Director Education, Research and Training. The Chair will have a casting vote
 7. At the completion of PGY1, the Medical Board of Australia requires a Certificate of completion of an accredited internship form to be submitted, available at [Medical Board of Australia - Forms](#) (Accessed 12/04/2024)
 8. The Medical Education Officer (MEO) will electronically store all term and EAP assessment reports in an appropriately secure manner, that is accessible to ARP members
 9. Decisions and recommendations made by the ARP, acting in good faith, and following due process according to the Prevocational Doctor Assessment Review and Appeals Policy and Procedure, are not able to be negotiated²

Appeals

1. The grounds for an appeal of an outcome assessment of a prevocational doctor by the ARP will be limited to:
 - An error of law or due process
 - Relevant information not being considered
 - Irrelevant information being considered
2. A prevocational doctor seeking to appeal an outcome assessment must lodge the appeal in writing to the Chief Medical Officer within 10 working days of the decision being communicated in writing to the prevocational doctor, stating the grounds for the appeal and providing copies of any supporting evidence
3. An Appeals Panel will be convened by the Chief Medical Officer, and will comprise: a senior doctor who has not been involved in the assessment of the prevocational doctor; a Director of Clinical Training external to ERH; a representative from People and Culture
4. The Appeals Panel will consider the written appeal, the documentation associated with the original outcome assessment, and may conduct in-person interviews as required
5. The findings of the Appeals Panel will be provided to the Chief Medical Officer, who will inform the prevocational doctor of the outcome in writing
6. The outcome will be considered to be final

References

1. Australian Medical Council Assessment Review Panels: A Guide for Prevocational Training Providers, available at [Assessment Review Panel - PMCV](#) (Accessed 12/04/2024)
2. PMCV Assessment Review Panel Guiding Principles, available at [Assessment Review Panel - PMCV](#) (Accessed 12/04/2024)
3. Medical Board of Australia, Certificate of completion of an accredited internship, available at [Medical Board of Australia - Forms](#) (Accessed 12/04/2024)

² Australian Medical Council Assessment Review Panels: A Guide for Prevocational Training Providers, p15, available at [Assessment Review Panel - PMCV](#) (Accessed 12/04/2024)

Linked ERH Documents:

Prevocational Doctors Assessment Review Panel – Terms of Reference

Alternate Key Search Words:

The search engine in Prompt looks for the search word in the document titles and also the body of documents. Include words here that are not in this document that staff might use when searching.

Accreditation Framework:

PMCV Accreditation Standards

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Complete the Revision History and the "[Policy Approval Form](#)".

Return both the policy template and policy approval form to the Prompt Administrator in the Quality, Risk and Innovation Unit.

Guidance notes are to assist users preparing a policy and will not appear in final version on Prompt.