

APMOC Advocacy Priorities



The Australasian Prevocational Medical Officers Committee (APMOC) has identified four key advocacy priorities for 2024 to enhance the experience, support, and outcomes for prevocational doctors (PGY1 and PGY2) across Australia and New Zealand. These priorities align with the broader goals of promoting quality education, improving workplace conditions, and ensuring patient outcomes. APMOC aims to work collaboratively with stakeholders to drive positive changes in these areas.

Priority 1: Robust Educational Experience

APMOC advocates for a structured and comprehensive educational experience that prepares prevocational doctors for safe and effective clinical practice. The quality of training during PGY1 and PGY2 is foundational to the development of competent and confident doctors. APMOC believes that:

- Formal teaching programs should be **contextually relevant** to the local healthcare environment while ensuring that trainees acquire **broad, transferable skills** applicable across various clinical settings in both Australia and New Zealand.
- Hospitals and health services must adhere to the national framework standards, with clear guidance on minimum teaching content. This content should align with the AMC Prevocational Medical Education Framework, ensuring a consistent and high-quality educational experience for all trainees. APMOC recommends the creation of a **guiding national curriculum** for prevocational training.
 - The roll-out of a national curriculum should focus on key areas of professional development, clinical skills, and non-technical competencies, with an emphasis on culturally safe practice.
- Opportunities for **collaboration between educational bodies** and hospitals are critical, particularly with the inclusion of formal teaching mandates for **PGY2 trainees** under the new framework. A focus on community of practice is important moving forward **sharing innovations and successes** in medical education so that all programs can thrive.
- Education programs and time must be **protected** from service delivery obligations

By prioritizing robust educational experiences, APMOC aims to enhance the clinical readiness and long-term career satisfaction of prevocational doctors, ultimately improving patient outcomes and healthcare service delivery.

Priority 2: Wellbeing

To ensure that prevocational doctors can learn and work effectively, it is essential to prioritize their wellbeing. Supporting the wellbeing of prevocational doctors enables them to perform at their best and develop into competent and confident practitioners. However, various factors can negatively impact their wellbeing, including:

- **Workplace bullying and harassment:** A hostile work environment can severely affect the mental and emotional health of trainees, undermining their ability to learn and deliver safe patient care. All health services should take a zero tolerance approach to bullying and harassment
- **Excessive working hours:** Extended shifts, particularly when not rostered in advance or properly remunerated, contribute to fatigue and burnout, diminishing both the quality of care and the educational experience.
- **Denied or inaccessible leave:** Trainees should have the ability to take leave when needed, for personal health, wellbeing, study and career progression.
- **Insufficient support or oversight:** Working without adequate clinical supervision or mentorship leaves trainees vulnerable to errors, increases stress, and negatively impacts their professional development.
- **Insufficient facilities or resources:** to be well and execute their job, this includes safe parking, rest spaces, and working spaces

These factors not only diminish the wellbeing of prevocational doctors but also contribute to burnout, which has long-term consequences for the medical workforce in Australia and New Zealand. The wellbeing of trainee doctors is therefore critical, both for ensuring patient safety and for promoting workforce sustainability. APMOC is committed to advocating for policies that address these issues and foster a supportive, safe, and healthy work environments for all prevocational doctors.

APMOC Advocacy Priorities



Priority 3: International Medical Graduates (IMGs)

With shortages across locations and specialties, international medical graduates (IMGs) are commonly being used to meet workforce needs. IMGs working in prevocational (intern and resident) roles can come from a variety of backgrounds ranging from experienced specialists to clinicians new to clinical work. Within these cohorts, trainees face unique challenges ranging from building new professional skills to refreshing competencies not used in many years. However, common to these groups is the challenge of entering a new health system that may differ vastly from the ones they have previously worked in.

All IMG trainees need some core supports, as well as tailored supports for their unique background and skill set to prepare them to work as a safe and effective clinician. It is the belief of APMOC that this level of support can only be ensured if IMGs are placed in accredited positions with clear requirements for trainees and supervisors. The **establishment of clear requirements and accreditation for IMGs** similar to that afforded to Australasian prevocational trainees will require commitment and investment from all levels of governance. Additional recommendations to be implemented alongside the path to accreditation and regulation include;

- **Tailored Orientation Programs:** Hospitals should provide tailored orientation and induction programs that help IMGs navigate the clinical, cultural, and administrative aspects of working in Australia and New Zealand. These programs should include comprehensive introductions to local healthcare systems, clinical protocols, and communication expectations. They should also address social determinants and history relevant to First Nations health.
- **Mentorship and Support:** APMOC advocates for structured mentorship programs that pair IMGs with experienced supervisors and peers who can guide them through the transition period and address unique challenges they may face.
- **Fair Assessment:** IMGs must be assessed fairly and equitably in comparison to their locally trained peers. APMOC calls for transparent, competency-based assessment frameworks that recognize the skills and experience IMGs bring to their roles, while also ensuring they meet local practice standards.
- **Career Progression:** Ensuring that IMGs have fair and equitable access to training opportunities and career progression pathways is a key priority. APMOC will work with stakeholders to identify and address barriers to IMG advancement in the healthcare system.

The consequences of failing to provide adequate support for IMGs is a risk to patient safety, individual IMG wellbeing, as well as an impact on the workload and wellbeing of their prevocational peers working alongside them.

APMOC 2025

In 2025 APMOC will be chaired by the NSW JMO Forum Chair. The committee will again comprise representative members appointed from their state and territory health networks. The committee will continue to work alongside CPMEC at this exciting time for innovation in prevocational training to achieve the best medical education program we can for the benefit of our community's health and wellbeing.