



POSTGRADUATE MEDICAL COUNCIL OF VICTORIA INC.  
Annual Report for the year ended 30 June 2014

The Postgraduate Medical Council of Victoria (PMCV) is the lead organisation in Victoria that supports state and national initiatives in relation to junior medical officer (JMO) training. PMCV supports the development of a high quality junior medical workforce by providing a range of programs and services that support effective training outcomes, and promote safe patient care.

POSTGRADUATE MEDICAL COUNCIL OF VICTORIA INC. ANNUAL REPORT  
FOR THE FINANCIAL YEAR ENDED 30 JUNE 2014

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Further copies can be obtained from:  
Postgraduate Medical Council of Victoria Inc.  
PO Box 2900, St. Vincent's Hospital  
Fitzroy Victoria 3065  
Phone: +61 3 9419 1217  
Email: [pmcv@pmcv.com.au](mailto:pmcv@pmcv.com.au)

The Postgraduate Medical Council is pleased to submit its Annual Report to members.

The Report highlights the achievements of Council for the twelve-month period ending 30 June 2014. The Council's audited financial statements form part of this report.

## PRINCIPAL ACTIVITIES AND HIGHLIGHTS

The Postgraduate Medical Council of Victoria continues to work closely with all of our stakeholders to deliver our strategic directions and deliverables. The support of our chairs of committees, board and committees members, volunteers and staff have contributed to our achievements during the reporting period which include:

### Additional Training Positions

- Progressive increase in accredited intern training positions from 444 in 2007 to 761 in 2015.
- 12 month provisional accreditation of four new Rural Community Intern Training programs to commence in 2015.
- Progressive review of all new intern positions accredited for commencement in 2014.

### Symposia and Workshops

- Victoria's 13th Medical Education Symposium focussed on three themes: management of stress in the workplace, staying healthy in medicine and career decision making and progression.
- Workshops for Medical Education Officers and Medical Clinical Educators focussing on professional development and networking.
- Annual discussion forum for Survey Team Leaders was held in February 2014 and the annual accreditation workshop for new surveyors was held in March 2014.
- Workshops for Directors of Clinical Training; Input from this group into the Australian Medical Council's evaluation of the national intern assessment process.

### Accreditation

- Continued implementation of the Part-Time and Interrupted Training program; monitoring of part-time training programs during 2013 and 2014 by the Accreditation subcommittee. Funding is provided by the Victorian Department of Health.
- Accreditation team visits to 8 health services and 5 general practices completed from July to December 2013; accreditation visits to four new Rural Community Intern Training programs, 2 visits to general practices and 2 re-accreditation visits of general practices have been completed to June 2014; a further 8 site visits are planned for the second half of 2014.
- Approval of a new set of accreditation standards for health services by the Victorian Board of the Medical Board of Australia. Consultation process and presentations to health services undertaken and implemented progressively during 2014.
- The granting of initial accreditation of the Council by the Australian Medical Council as an intern training accreditation authority for Victoria.

- Accreditation of PGY2 positions continued and issues relating to PGY2 year identified and reported in annual report to the Department of Health.

### International Medical Graduates

- Delivered 7 fee-for-service *Hitting the Ground Running* centralised orientation programs for IMGs.
- Participated in the Transition to General Registration program in conjunction with the Victorian Department of Health.
- Provided input to the Department of Health, International Health Professions Victoria Review.

### Education

- Delivered *Teaching on the Run* programs for junior doctors and senior clinicians, supervisors and educators on a fee-for-service basis. External programs were also run for Deakin University and Peninsula Health on a fee-for-service basis.
- ShareMe web based portal which promotes sharing of educational resources continued to expand with 90 resources mapped to the Australian Curriculum Framework; educators in other states have been encouraged to share resources.
- Delivered the Indigenous Cultural Awareness module to Victorian health service staff.

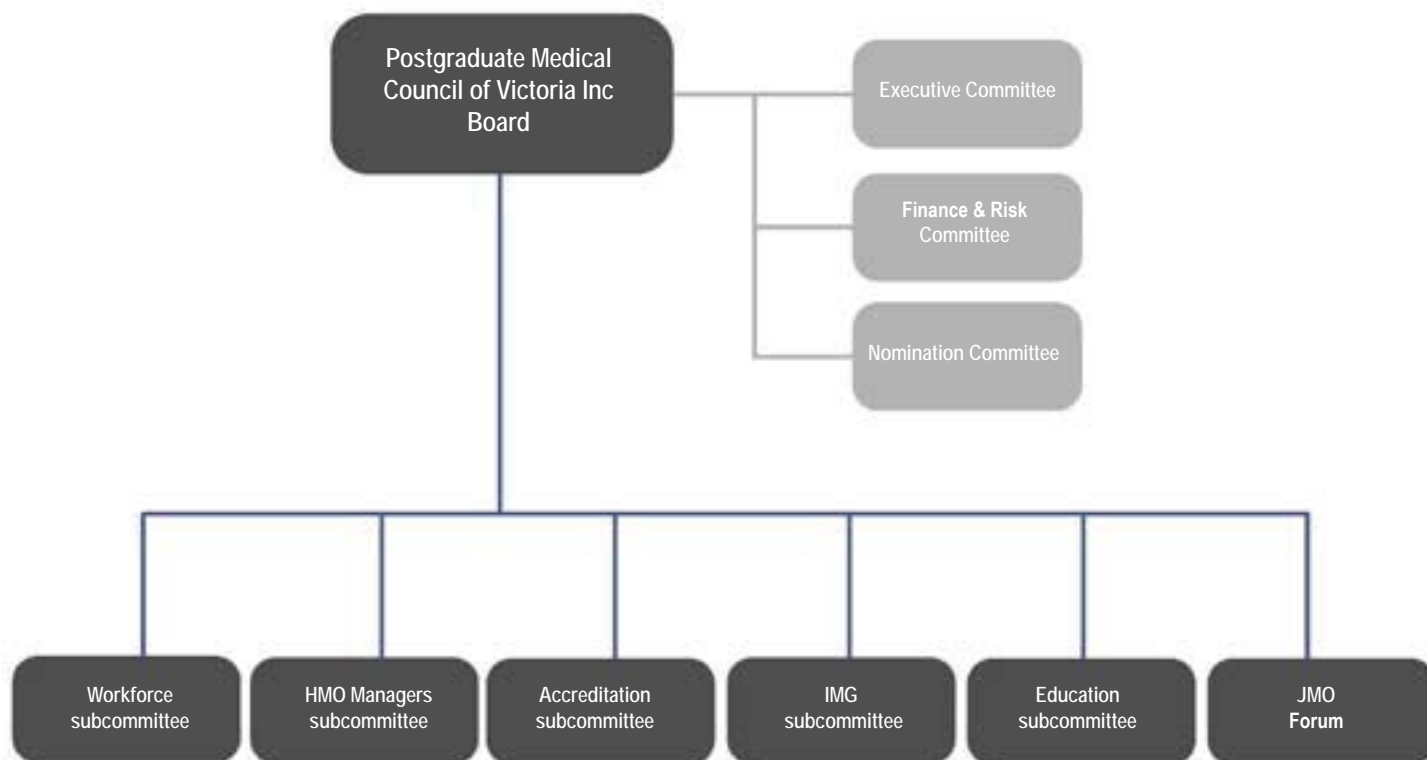
### Computer Matching Service (CMS)

- Victorian participation in the National Audit of Intern Acceptances for the 2014 Clinical Year and National Audit of Intern Applications 2014.
- Reviewed the 2013 implementation of the state-wide InternZScore to aid intern recruitment; the process continued in 2014.
- Implementation of an online CV upload function in the Intern Match following a consultation process with health services.
- Effective management in the growth of the CMS across all matches (i.e. medical, nursing and medical radiations); in total 6,788 registered candidates and 228 health services participated and 3,838 health service posts were available for filling via the matching algorithm in 2013 for 2014 commencement.
- Legal review of the Freedom of Information and Privacy policies completed and changes implemented.
- Development of a state-wide computer matching process for Radiology trainees; funding from RANZCR.

### Junior Medical Officer (JMO) Forum

- 4 meetings of the Victorian JMO Forum and involvement in education related projects (e.g. Professionalism and PHEEM).
- 7 projects in progress, including: intern mentoring, wellbeing of junior doctors, vocational training, communication strategies and paging, increasing educational opportunities and comparative international models of intern training.
- Approval of a Social Media Policy and a JMO Forum facebook page.

## ORGANISATIONAL STRUCTURE



The Postgraduate Medical Council of Victoria is governed by a Board and subcommittees established by the Board.

### Board

The Board has responsibility for managing the business and affairs of the Council and in 2013-2014 it conducted 4 face-to-face meetings: August and November 2013 and February and May 2014. Board established Committees also met: the Executive Committee met on 3 occasions, the Finance and Risk Committee met on 6 occasions and the Nomination Committee met on 3 occasions.

### Membership

#### Nominated members

PMCV sub-Rule 22.3 provides for 4 nominated members. The nominated members of the Board as at 30 June 2014 are:

#### *Victorian medical faculties*

Professor Geoff McColl  
 Director of MEU, nominee of the  
 Faculty of Medicine Dentistry and  
 Health Sciences  
 University of Melbourne



Professor Brendan Crotty  
 Pro-Vice Chancellor Health  
 nominee of the Faculty of Health  
 Deakin University



Professor Michelle Leech  
 Dep Dean MBBS, nominee of Faculty of  
 Medicine Nursing and Health Sciences  
 Monash University



## ORGANISATIONAL STRUCTURE

### Nominated members (cont...)

#### *Ministerial nominee*

Dr John (Jack) Best AO



The office bearers for 2013-14 elected at the Annual General Meeting on 12 September 2013:

Chairperson  
Professor Brendan Crotty

Deputy Chairperson  
Professor Geoff McColl

Treasurer  
Dr John (Jack) Best

The Chief Executive Officer, PMCV, Ms Carol Jordon was appointed by the Board as Secretary and Public Officer.

### Elected members

PMCV sub-Rule 22.3 provides for 7 elected members. The elected members of the Board as at 30 June 2014 are:

Name	Elected-Category	Duration of office	Start of office Term	End of term
Dr Meghan Cooney	Medical graduate <3 years (22(b)(i))	2 years!	16 November 2012	AGM 2014
Professor Rick McLean	Consultant Physician 22(b)(ii)	3 years	16 November 2012	AGM 2015
Professor Julian Smith	Consultant Surgeon 22(b)(iii)	3 years	16 November 2012	AGM 2015
A/Professor Jonathan Knott	Emergency Physician 22(b)(iv)	3 years	16 November 2012 (Re-elected AGM 2013)	AGM 2016
Dr Laurie Warfe	General Practitioner 22(b)(v)	2 years!	16 November 2012	AGM 2014
Dr Mark Garwood	Medical Manager 22(b)(vi)	3 years	16 November 2012 (Re-elected AGM 2013)	AGM 2016
Dr Peter Stevens	Medical Educator 22(b)(vii)	3 years	16 November 2012	AGM 2015

! 2 elected members to hold office until the next Annual General Meeting in the second calendar year after their year of appointment (sub-Rule 25.5)



Dr Meghan Cooney



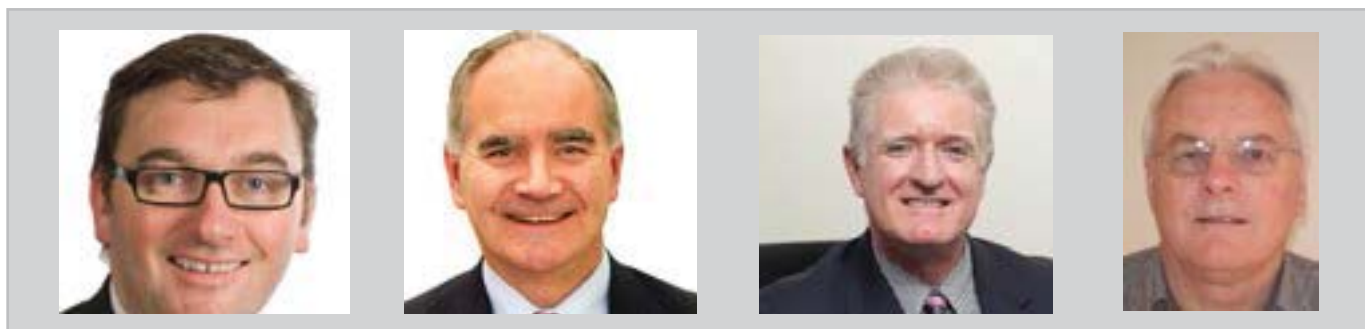
Professor Rick McLean AM



Professor Julian Smith

## ORGANISATIONAL STRUCTURE

### Elected members (cont...)



A/Professor Jonathan Knott

Dr Laurie Warfe

Dr Mark Garwood

Dr Peter Stevens OAM

### PMCV Meetings 2013-14

The work of Council is supported by many volunteer members and in particular we recognise the work of the chairs of our committees. The table below sets out the chairs, the frequency of meetings and the staff member who provides secretariat support for Council's committee/ subcommittees.

Committee	No. meetings	Chair	Supported by
Accreditation	10	Professor R McLean	Ms M Le Sueur Dr S Ahern (until Dec 2013)
Education	5	A/Professor L Irving	Ms M Bullen
IMGs and Scope of Practice	4	Dr S Fabri	Ms K Nicholls
Workforce	5	Ms K Ronan (until 31/7/2013); Mr A Hanson	Ms E Snowdon
Clinical Deans	2	Dr S Ahern (until Dec 2013); Professor B Crotty	Ms C Jordon
HMO Managers	5	Mr D Floyd	Ms E Snowdon Ms C Jordon
PMCV Board	4	Professor B Crotty	Ms C Jordon
Board - Executive Committee	3	Professor B Crotty	Ms C Jordon
Board - Finance and Risk Committee	6	Dr J Best, AO	Ms C Jordon
JMO Forum	5	Dr A Bibbo and Dr S Kunz (2013); Dr M Harvey and Dr J Lai-Kwon (2014)	Ms M Bullen Ms C Jordon Dr S Ahern (until Dec 2013)

## STAFF AND SUBCOMMITTEE CHAIRS

We acknowledge the commitment, contribution and professionalism of our staff and subcommittee chairs, all of whom very ably support the activities of Council



Chair, Education subcommittee  
A/Professor Louis Irving



Chair, Accreditation subcommittee  
Professor Rick McLean AM



Chair, IMG subcommittee  
Dr Sean Fabri



Chair, Workforce subcommittee  
Mr Andrew Hanson



Chair, HMO Managers subcommittee  
Mr Darryl Floyd



Chief Executive Officer  
Ms Carol Jordon



Medical Advisor  
Dr Joanne Brown



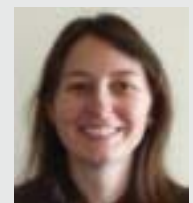
Education  
Ms Marilyn Bullen  
Manager



IMG/Project/Website  
Ms Kylie Nicholls  
Manager



Accreditation  
Ms Monique Le Sueur  
Manager



Computer Matching Service  
Ms Edwina Snowdon  
Manager



Computer Matching Service  
Ms Aileen Falzon  
Assistant Manager



Mr Anthony Biancofiore  
Administrative Officer

## KEY CHALLENGES AND OUR RESPONSE

During the reporting period we maintained our interaction with our key stakeholder groups including university medical school representatives on matters relating to medical internship, the Medical Careers Expo, standard format CV, InternZScores and support for medical students entering internship. We continued our interactions with the Regional Training Providers in relation to accreditation of general practice placements. We presented to the Victorian Board of the Medical Board of Australia and submitted a range of responses on national discussion papers. We implemented the Australian Medical Council National Intern Training Framework (NITF) and consulted with Victorian health services. Membership and terms of reference for subcommittees were reviewed to ensure representation from appropriate and relevant stakeholder groups and focus aligned to the Strategic Plan.

Key Challenges:	Our Commentary:
<b>Domain 1: Accreditation</b> Ensuring quality training for JMOs in health services and community settings that promote safe patient care, through effective accreditation processes of JMO programs.	<ul style="list-style-type: none"> <li>- Discussion forum for Survey Team Leaders conducted in February 2014.</li> <li>- Training Workshop for new surveyors conducted in March 2014.</li> <li>- Feedback on draft national intern registration and accreditation standards provided through CPMEC and direct to the Australian Medical Council.</li> <li>- Review of PMCV's accreditation standards and processes to align with the NITF; new Victorian accreditation standards approved for roll-out in 2014.</li> <li>- New policy development including <i>Guidelines for performance assessment of and feedback on performance to interns and PGY2s and Guidelines for developing term descriptions for each rotation undertaken by interns and PGY2s.</i></li> <li>- Annual review of provisionally accredited new intern posts in year of commencement completed.</li> <li>- Intern Part-Time and Interrupted Training program continued with training plans to the Accreditation subcommittee.</li> <li>- Membership of CPMEC National Accreditation Network Group.</li> <li>- Revised <i>A Guide for Interns in Victoria</i></li> </ul>
Accreditation process for PGY2 posts.	<ul style="list-style-type: none"> <li>- Funding from Department of Health continued to identify the number and distribution of PGY2 posts and for support of accreditation functions relating to PGY2 posts.</li> </ul>
<b>Domain 2: Supervisor and stakeholder professional development</b> Providing professional development opportunities for JMO supervisors and educators.	<ul style="list-style-type: none"> <li>- PMCV Annual Medical Education Symposium conducted.</li> <li>- 4 workshops for MEOs/MCEs conducted.</li> <li>- 2 workshops for DCTs/SITs conducted.</li> <li>- ShareMe web portal maintained and new resources added.</li> <li>- 2 research grants awarded.</li> <li>- Review of the Orientation Guidelines completed.</li> <li>- Delivered <i>Teaching on the Run</i> programs for JMOs and senior clinicians and supervisors/educators.</li> <li>- Delivered the <i>Professional Development Program for Registrars.</i></li> <li>- Continued to deliver the centralised orientation program, <i>Hitting the Ground Running</i> for international medical graduates (IMGs).</li> <li>- Delivered the Indigenous Cultural Awareness module.</li> </ul>
<b>Domain 3: JMO Workforce and Placement (Computer Matching)</b> Addressing issues in relation to medical workforce and advocating for ongoing process improvement.	<ul style="list-style-type: none"> <li>- Small target increase in intern numbers met.</li> <li>- Investigation of opportunities for intern placements in Emergency Medicine in settings other than in health services (e.g. GP/Small rural health setting).</li> <li>- Membership on Department of Health Committees (Medical Education Planning Group, Intern Recruitment Review Working Group).</li> <li>- Membership, National Medical Intern Data Management Working Group.</li> <li>- Participated in the National Audit of Intern Acceptances for the 2014 clinical year.</li> <li>- Participated in the National Audit of Intern Applications for the 2014 clinical year.</li> <li>- Exemption Policy for HMO Match reviewed and implemented.</li> <li>- Privacy and Freedom of Information policies reviewed.</li> <li>- Participated in the Department's Transition to General Registration (TGR) program.</li> </ul>



## KEY CHALLENGES AND OUR RESPONSE

### Domain 4: JMO welfare and professional development

Provide opportunities for JMO engagement and leadership.

- Membership of prevocational junior medical officers (JMOs) on subcommittees and work groups at state and national level.
- Victorian JMO Forum member participation in meetings and projects: 4 meetings of the JMO Forum were held, annual election of JMOs to subcommittees and project portfolios.
- Victorian JMO membership on the national Australasian JMO Committee (AJMOC).
- 13 JMOs trained as accreditation surveyors.
- JMOs trained as facilitators of *Teaching on the Run* program.

### Domain 5: Governance and stakeholder partnerships

Effective organisational leadership and strong operational partnerships.

- Bi-annual meetings with Clinical Deans.
- College representation on Accreditation, Education and PMCV Board.
- Regular meetings with the Department of Health.
- Regular health service interaction through Workforce and HMO Managers meetings.
- Collaboration evidenced by delivery of centralised orientation program for IMGs.
- Professional Development activities to support prevocational supervisors and educators.
- Membership, Confederation of Postgraduate Medical Education Councils.
- Membership, Department of Health Advisory Committees (e.g. MEPG, Intern Recruitment Review Working Group).
- Medical Director presentations to key stakeholder groups (e.g. Rural Directors/Metropolitan Directors of health services; AMA (Victoria - DiTs subdivision); Clinical Deans; Victorian JMO Forum and DCTs/SITs).

Promoting the work of the Council.

- PMCV E-Newsletters (12).
- Annual Reports to Department of Health and Victorian Board of the Medical Board of Australia submitted.
- PMCV website and Computer Matching website.

Sound operational management

- Review of process for elected Board members with two year terms.
- Subcommittee input into the development of the 2013-14 Service Plan with the Department of Health.
- Annual review of Terms of Reference and membership of subcommittees.
- Expanded membership of Board Finance and Risk committee; meetings prior to Board meetings
- Appointment of new Chair, Workforce subcommittee.
- **Office bearers and Secretary elected annually.**

Identify opportunities for additional revenue and funding sources.

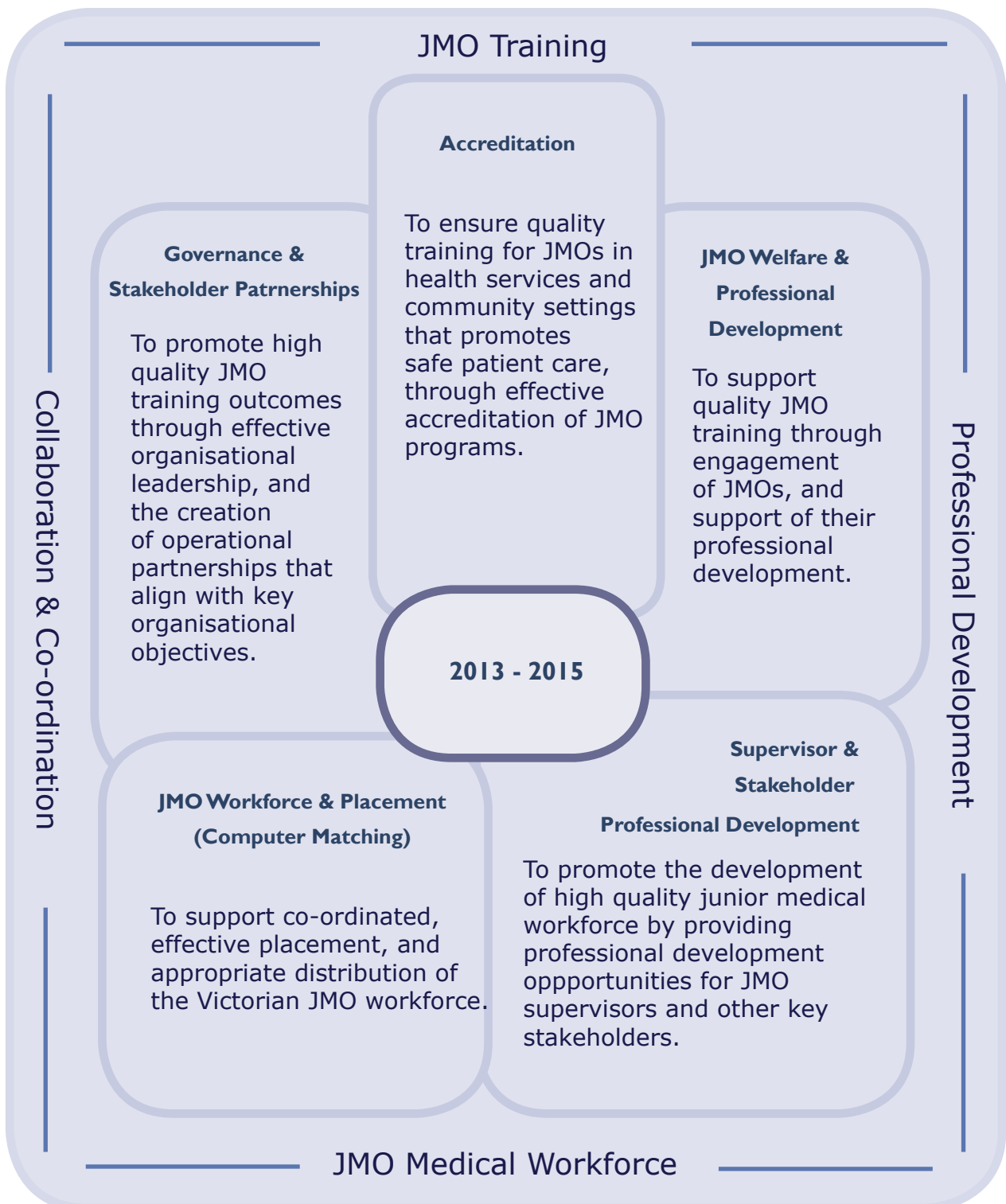
- Continuation of the fee-for-service centralised orientation program for IMGs (attracting interstate participants).
- Expansion of the *Teaching on the Run Program* for JMOs and senior clinicians and supervisors/educators on a fee-for-service basis.
- Delivery of the *Professional Development Program for Registrars* on a fee-for-service basis.
- Development and delivery of state-wide computer match for Radiology trainees funded by RANZCR.

Improving recognition of the contribution of Council's members and its staff

- Membership on Board and Principal Officers' Group of the Confederation of Postgraduate Medical Education Councils (CPMEC).
- Participation on national Medical Education Officer Committee and national Director of Clinical Training Committee, CPMEC.
- Presentations at national conferences and workshops.
- Contribution to CPMEC national submissions.
- Close working relationships with Regional Training Providers continued with further implementation of streamlining of general practice accreditation at prevocational level.

## OUR STRATEGIC DOMAINS

The Council's Strategic Plan is reflected in five domains relevant to both state and national activities: Accreditation | Supervisor and Stakeholder Professional Development | JMO Workforce and Placement (Computer Matching) | JMO Welfare and Professional Development | Governance and Stakeholder Partnerships.



## DOMAIN 1: ACCREDITATION

To ensure quality training for JMOs in health services and community settings that promotes safe patient care, through effective accreditation of JMO programs.

### Accreditation of Prevocational Medical Training Positions

Accreditation of prevocational medical training programs and posts is a quality assurance process that establishes and monitors standards for prevocational medical training to ensure high quality clinical training for junior doctors (interns and PGY2s). Accreditation assists facilities to provide the best possible environment for the training of junior doctors by ensuring they receive appropriate supervision, orientation, clinical experience, education, assessment and support to enable them to meet medical board registration requirements and their own training objectives.

This purpose is achieved primarily by ensuring prevocational medical training positions (both intern and PGY2) at health services, general practices and other medical training facilities are assessed against an agreed and robust set of supervision, education and training standards which, amongst other requirements, includes a survey visit to each training facility at least every four years in order to be accredited to offer intern and PGY2 training programs.

Council receives funding from the Medical Board of Australia for delegated functions in relation to intern training accreditation and from the Department of Health via the annual service agreement for review of PGY2 positions and data analysis and reporting.

During the reporting period, the PMCV Accreditation subcommittee reviewed and endorsed:

- The reports and recommendations of survey teams which visited 8 health services and 7 general practices and assessed four new Rural Community Intern Training programs.
- Changes to accredited intern positions which occurred between survey visits at Austin Health, Bass Coast, Bendigo Health, Central Gippsland, Echuca Health, Werribee Mercy, Royal Children's Hospital, Victorian Institute of Forensic Medicine, and Western Health.
- Reviewed and endorsed provisional accreditation of 11 additional intern positions to commence in 2015 and three new general practices.
- Streamlined accreditation of Albury Wodonga Health. PMCV liaised with NSW Health Education and Training Institute (HETI) to streamline accreditation of Albury Wodonga Health (AWH). Formerly, PMCV accredited Wodonga Hospital and HETI accredited Albury Base Hospital. In late 2013, a joint PMCV/HETI survey visit of both the Albury and Wodonga campuses was successfully conducted and PMCV will assume responsibility for accreditation of Albury Wodonga Health from 2014.

All accreditation guidelines, policies and related publications are available on the PMCV website as is a list of all health services and general practices and their accreditation duration.

### Accreditation visits to health services and general practices

The following visits were undertaken during the reporting period:

#### *Rural and Regional*

- Albury Wodonga Health (intern and PGY2 training programs)
- Barwon Health, Geelong (intern and PGY2 training programs)
- South West Healthcare, Warrnambool (intern and PGY2 training programs)

#### *Metropolitan*

- Alfred Health (intern and PGY2 training programs/ multiple sites: Alfred, Sandringham, Caulfield)
- Calvary Health Bethlehem (intern rotations from Alfred Health)
- Eastern Health (intern and PGY2 training programs/ multiple sites: Box Hill, Angliss, Maroondah, Peter James, Wantirna Health)
- Epworth Eastern, Box Hill (intern and PGY2 rotations from Eastern Health)
- Northern Health (intern and PGY2 training programs/ multiple sites: Northern, Bundoora, Broadmeadows)

#### *General practices*

- Federation Clinic, Wodonga (re-accreditation of a PGY2 post on rotation from Western Health)
- Gardens Medical Group, Albury (re-accreditation of a PGY2 post on rotation from Albury Wodonga Health)
- Korumburra Medical Centre (re-accreditation of an intern post on rotation from Northern Health)
- Leongatha Medical Clinic (re-accreditation of an intern post on rotation from Peninsula Health)
- Orbost Regional Health (a new PGY2 practice on rotation from Latrobe Regional Health from 2014)
- Heyfield Medical Centre (intern and PGY2 posts on rotation from Alfred Health and Latrobe Regional Health)
- Maffra Medical Group (intern post on rotation from Alfred Health)

All of the health services and general practices surveyed in 2013 were accredited for 3 years (which is the maximum period) with four health services required to provide progress reports on recommendations in relation to individual posts within 12 months. All of the general practices were accredited for three years with a progress report required during 2014 to assess the new PGY2 post at Orbost Regional Health.

Accreditation visits in 2014 were delayed to August to allow health services time to review the new instruments and to seek clarification of the new processes and requirements of the NITF.

## DOMAIN 1: ACCREDITATION

### *Rural Community Intern Training (RCIT) programs*

In March 2014, the Department released a paper entitled 'Rural Community Intern Training' which articulated a plan to vertically integrate medical undergraduate/ graduate, intern and PGY2 training to provide trainees with the opportunity to complete the entirety of their training in one region.

The increase in medical graduates in Victoria provides an opportunity to:

- Expand the number of medical graduates working in rural areas and particularly, primary care settings; and
- Examine the way in which intern training is provided so that the medical training system supports greater retention of medical graduates in rural Victoria to ensure patient needs are met.

A key feature of an RCIT program is the option to undertake up to 20 weeks training in a broad range of community based clinical settings and provides the opportunity to integrate intern training into a postgraduate training pathway that includes PGY2 and the rural generalist program.

The following RCIT programs were assessed against the PMCV accreditation standards for commencement in 2015 and all achieved 12 months accreditation subject to meeting recommendations and providing progress reports:

- Grampians Health Services involves rotations to Ararat, Maryborough Health Service, St John of God Ballarat Hospital and general practices at Ararat and Maryborough.
- Echuca Regional Health includes external rotations to Bendigo Health and Echuca Moama Medical Centre.
- South West Healthcare involving an expansion of the current intern program to include new intern rotations to St John of God Warrnambool Hospital.
- East Gippsland involves intern posts at Bairnsdale Regional Health Service, Central Gippsland Health Service, McLeod Street Medical Clinic in Bairnsdale and Clocktower Medical Centre in Sale.

### **National Intern Training Framework**

The PMCV accreditation standards and process were extensively reviewed and revised during 2013 as a consequence of the new Medical Board of Australia (MBA) Intern Registration Standard *Granting general registration to Australian and New Zealand medical graduates on completion of internship* and the National Intern Training Framework (NITF) coming into effect from January 2014. The purpose of the NITF is to achieve greater national consistency in intern training standards and accreditation and comprises the following documents:

- Intern training – Intern outcome statements.
- Intern training – Guidelines for terms
- Intern training – National standards for programs

- Intern training – Assessing and certifying completion
- Intern training – Term assessment form
- Intern training – Domains for assessing accreditation authorities

Following discussion and consultation with survey team leaders and other stakeholders, the PMCV Accreditation subcommittee agreed to adopt the new NITF standards. A new set of accreditation instruments was developed including a pre-visit submission document for facilities to complete, a survey report template and revision of the *Duration of Accreditation Guidelines* which were approved by the PMCV Board in November 2013. The Victorian Board of the Medical Board of Australia subsequently approved the new instruments in January 2014.

The new PMCV accreditation instruments were implemented at the beginning of 2014 for health services and in May 2014, following the piloting of the new instruments at two general practice visits in April/ May, the Accreditation subcommittee approved new accreditation templates for general practice survey visits which were re-formatted to align with the new instruments using the current standards.

An extensive communication strategy was developed to ensure stakeholders were kept informed during the whole review process. This involved correspondence directly to Directors of Medical Services, multiple presentations by the Accreditation Manager to stakeholder groups (e.g. HMO Managers, Medical Education Officers and Directors of Clinical Training) and the drafts of the revised accreditation instruments were distributed for comment to all these groups.

The *PMCV Accreditation Guide* and the *Guide for Interns in Victoria* have also been revised.

### *Assessment of intern accreditation authorities*

A new aspect to the National Intern Training Framework is the assessment of accreditation authorities. This requires PMCV to be approved as an intern accreditation authority following review by the Australian Medical Council (AMC) against the following domains:

1. Governance: The intern training accreditation authority effectively governs itself and demonstrates competence and professionalism in performing its accreditation role.
2. Independence: The intern training accreditation authority carries out independently the accreditation of intern training programs.
3. Operational management: The intern training accreditation authority effectively manages its resources to perform functions associated with accrediting intern training programs.

## DOMAIN 1: ACCREDITATION

- Processes for accreditation of intern training programs: The intern training accreditation authority applies the approved Intern training – National standards for programs in assessing whether programs will enable interns to progress to general registration in the medical profession. It has rigorous, fair and consistent processes for accrediting intern training programs.
- Stakeholder collaboration: The intern training accreditation authority works to build stakeholder support and collaborates with other intern training accreditation authorities and medical education standards bodies.

PMCV submitted an initial report to the AMC against these domains in December 2013 and the Medical Board of Australia approved PMCV as an authority to accredit intern positions in early 2014. A further progress report is due to the AMC in September 2014.

A formal review is to occur during 2015 and PMCV has commenced reviewing its processes against those of other postgraduate medical councils to identify "gaps" and develop appropriate policies and procedures prior to the AMC visit.

### Accredited intern posts 2009 - 2015

Hospital Health Service	2009	2010	2011	2012	2013	2014	2015
Albury Wodonga Health	-	2	2	2	3	10	10
Alfred Health	47	52	52	54	54	60	56
Austin (incl Northern 2008-11)	80	92	102	55	57	61	60
Ballarat Health Services	18	18	23	27	28	29	29
Bairnsdale Regional Health	-	-	-	-	-	-	2
Barwon Health	33	36	37	36	36	39	39
Bendigo Healthcare Group	13	15	18	29	28	35	34
Eastern Health	50	55	62	70	70	70	65
East Gippsland CBI	-	-	-	-	-	-	5
Echuca Regional Health	-	-	-	-	-	-	5
Goulburn Valley Health	16	21	25	30	30	30	30
Gippsland Rural Consortium (GRIT)	5	5	5	10	10	10	10
Grampians Regional Health	-	-	-	-	-	-	5
Melbourne Health	52	59	71	75	73	73	73
Mildura Base Hospital	3	3	3	3	4	4	4
Monash Health (formerly Southern Health)	66	69	75	85	85	105	103
Murray to the Mountains (M2M)	-	-	-	5	5	10	10
Mortheast Health Wangaratta	-	-	-	-	3	5	5
Northern Health	-	-	-	47	47	40	40
Peninsula Health	31	37	42	44	45	45	42
South West Healthcare, (Warrnambool)	0	0	0	5	5	5	10
St Vincent's Health	43	46	53	57	58	59	61
Western Health	51	51	55	65	64	63	63
<b>Total</b>	<b>508</b>	<b>561</b>	<b>625</b>	<b>699</b>	<b>701</b>	<b>753</b>	<b>761</b>

### Review of accreditation cycle

The PMCV Accreditation subcommittee determined to move to a four year accreditation cycle with mid-cycle progress reporting (to align with the AMC guidelines). The transition to the four year cycle occurred immediately with the objective being to align survey visits to health services linked by intern training program. For 2014, three health services (which had no major issues at their previous survey visits) were offered an extension of accreditation to 2015 which they accepted. For 2015 and 2016 similar offers will be made to ensure a balance of visits across the four year cycle.

Other changes to the accreditation process in 2014 included the introduction of a pre-visit survey team teleconference and a separate meeting of the survey team with the Supervisor of Intern Training during the visit.

All the intern and PGY2 posts which commenced in 2013 were reviewed in late 2013 with the progress reports on each post being tabled at the Accreditation subcommittee meetings in October and November 2013. Accreditation of all the posts was extended for another two years.

## DOMAIN 1: ACCREDITATION

### Expansion of intern training posts

While the expansion in intern numbers from 2012 to 2013 was low compared to previous years, there were some notable accreditation endorsements:

- Continued expansion in general practice rotations.
- The change in accreditation status of previous non-core intern posts in emergency medicine at Echuca Regional Health and Bass Coast Health to 'core emergency'.
- Accreditation of JMO posts to support redesign (non-clinical) projects in multiple health services.
- Accreditation of posts to support interns who require part-time training or have had their training interrupted. This program, supported by funding from the Department of Health (DH), allows eligible candidates to complete their internship in a supernumerary capacity. Since the program began formally in 2011, there have been 6 part-time intern programs accredited. Two interns commenced in 2011 and a 3rd intern commenced in 2012. In 2013, there are currently three additional supported intern programs in progress.

In 2013, the DH offered additional Intern Training and Development Grants for 2014. The Accreditation subcommittee accepted applications from a range of health services and provisionally accredited 54 new intern posts to commence from 2014. These posts were all filled for 2014 and will be reviewed later in 2014.

### Workshops

#### *Surveyor training workshop*

There are currently 74 active surveyors of whom 14 can perform as team leaders and seven specifically participate in general practice accreditation visits. The number of surveyors and team leaders has remained relatively stable over the last few years. PMCV appreciates the ongoing participation and commitment of the team leaders and surveyors.

The Surveyor Training workshop on 20 March 2014 attracted 21 participants. This workshop is held annually to induct new surveyors into the PMCV accreditation program. The attendees included 13 junior doctors and 8 health service staff from medical administration and education. The workshop was structured into two parts: A plenary session which outlined the role of PMCV, the accreditation process and the role and responsibilities of surveyors and an interactive session involving group discussion and a surveyor training DVD.

#### *Team leader forum*

The annual team leader discussion forum was held on 27 February 2014 with two new team leaders inducted.

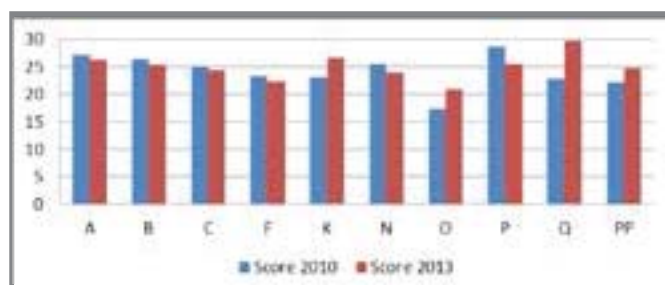
### PGY2 data collection and accreditation process

Accreditation of PGY2 posts is not mandatory for Victorian facilities, however health services, and in more recent times general practices, are increasingly willing to comply with PMCV accreditation requirements for PGY2s including applying for accreditation prior to commencement of PGY2 posts. Initial accreditation is assessed according to information provided on an application form and re-accreditation of PGY2 posts occurs concurrently with intern survey visits. During 2013, a total of 346 PGY2 positions were assessed and accredited. A complete list of the PGY2 positions reported by the health services surveyed in 2013 is in the *"Review of 2012 Postgraduate Year 2 Positions (PGY2) in Victorian Facilities"* report published in April 2014.

PGY2 posts were accredited at the following health services in 2013: Albury Wodonga Health, Alfred Health, Austin Health, Barwon Health, Eastern Health, Goulburn Valley Health, Northern Health, South West Healthcare, St John of God Bendigo (private) and St Vincent's Health. PGY2 posts were accredited at the following general practices in 2013: Gardens Medical Group, Federation Clinic and Orbost Regional Health (new).

Preliminary discussions have also occurred with rural facilities not currently accredited for PGY2 training and also with the health services seeking accreditation for internship programs under the Rural Community Intern Training program, funded by DH, to ensure that interns appointed to these programs have options for PGY2 posts in these regions in the following year.

Graph 1 compares the survey team ratings for the accreditation visits in 2013 with that of the previous survey visit which occurred in 2010 for each health service. This illustrates the change in the overall performance of the health service against the accreditation functions.



Graph 1: Comparison of survey results

## DOMAIN 1: ACCREDITATION

### Participation in State and National activities

#### *Medical Education Planning Group*

The Medical Education Planning Group (MEPG) was established by the Department of Health (DH) in Victoria in early 2013 to bring together health service and education providers to collaboratively provide advice on options to address issues in relation to capacity and quality at the different stages of the medical training pipeline in Victoria.

Dr Susannah Ahern (Medical Director until December 2013 and then Ms Carol Jordon) attended the meetings on behalf of PMCV.

PMCV contributed to the work of the group by preparing a number of papers:

- 2013 Intern Capacity Survey
- Paper - Capacity of alternative sites for core intern emergency rotations
- Drafted a survey aimed at determining final year graduates interest in rural placements (not administered)

#### *Innovative JMO rotations*

There are now a total of five redesign posts (PGY2) in Victoria located at St Vincent's Health, Barwon Health, Melbourne Health, Monash Health and Northeast Health Wangaratta. Four of the posts commenced in 2012 and the 5th at St Vincent's Health was accredited in 2013. The post at Northeast Health was re-accredited as a part-time post in 2013. The posts at Barwon Health and Melbourne Health will be assessed for re-accreditation as part of the survey visits to occur during 2014.

Other innovative posts accredited for junior doctors during the reporting period include:

- Critical care PGY2 posts at St John of God Bendigo, a rural private hospital which commenced in 2013.
- Intern posts at Royal Children's Hospital to commence from 2015.
- The assessment of new innovative community based rural internships which incorporate core terms at private and small rural public hospitals and non-core terms in addiction medicine, palliative care and other community based settings.

#### *National Prevocational Medical Accreditation Network*

PMCV continues to actively participate in the national Prevocational Medical Accreditation Network (PMAN), under the auspices of the Confederation of Postgraduate Medical Education Councils, to discuss developments and ongoing issues in the accreditation of intern and PGY2 programs and posts.

There were four meetings during the reporting period and major topics of discussion were the implications of the National Intern Training Framework and streamlining of general practice accreditation. A particular emerging issue for the PMCV is the potential reduction in access to clinical learning as JMO rostered hours continue to decline and incorporate a higher percentage of afterhours work.

### Accreditation subcommittee

The Accreditation subcommittee met ten times during the reporting period. Membership of the Accreditation subcommittee as at 30 June 2014 is:

#### Chair

Professor Rick McLean, VMO, Northeast Health Wangaratta and Echuca Regional Health

#### Victorian Board of the Medical Board of Australia

Dr Peter Dohrmann, Executive Director, Epworth Healthcare

#### Hospital Medical Officers (JMO Forum elected)

Dr Kate Gazzard, Monash Health

Dr Ophelia Wong, Monash Health

#### Medical Education

Dr Neil Cunningham, Prevocational Training Supervisor, St Vincent's Health

Ms Lynne Denby, Manager, Medical Education, Melbourne Health

Dr Anna Korin, Supervisor of Intern Training, Alfred Health

#### Metropolitan Health Services

Dr John Ferguson, Chief Medical Officer, Austin Health

Dr Anjali Dhulia, Director of Medical Services, Monash Health

#### Rural Health Services

Dr Linda Danvers, Deputy Director Medical Services, Ballarat Health Services

Dr Glenn Howlett, Director Medical Services, Echuca Regional Health

#### University

A/Professor Peter Morley, Department of Medicine, Royal Melbourne and Western Hospitals

#### Medical Colleges

Dr Neil Cunningham, nominee, Australasian College of Emergency Medicine

Dr Michael Franco, nominee, Royal Australasian College of Physicians

Ms Wanda Stelmach, nominee, Royal Australasian College of Surgeons

Dr Angelina Salamone, nominee, Royal Australian College of General Practitioners

Dr Peter Stevens, nominee, Australasian College of Rural and Remote Medicine

#### PMCV

Dr Susannah Ahern, Medical Director, PMCV (until December 2013)

#### In attendance

Ms Carol Jordon, Chief Executive Officer, PMCV

#### Secretary

Ms Monique Le Sueur, Accreditation Manager, PMCV

## DOMAIN 2: SUPERVISOR & STAKEHOLDER PROFESSIONAL DEVELOPMENT

To promote the development of a high quality junior medical workforce by providing professional development opportunities for JMO supervisors and other key stakeholders.

### Workshops for Medical Educators

Quarterly workshops for Medical Education Officers (MEOs) and Medical Clinical Educators (MCEs) incorporated joint professional development activities. A description of these professional development activities is reported below. Other workshop topics included: leadership and supervision skills; conflict resolution skills; junior doctor welfare and support; career planning for junior doctors; AMC/MBA national intern assessment form and implementation; simulation scenario development and communication skills training for interns.



Medical Education Officers and Medical Clinical Educators 2014

Date	No. of attendees	Presentation(s)
3 September 2013	17 MEOs/MCEs	Pilot of the national professional development program for medical educators <b>Presenter:</b> Dr Jagdishwar Singh, CEO, Confederation of Postgraduate Medical Education Councils (CPMEC).
2 December 2013	17 MEOs/MCEs	AMC National Assessment Form and Implementation <b>Presenter:</b> Mrs Debbie Paltridge (Chair, AMC Working Party)
5 March 2014	18 MEOs/MCEs	Workshop: Taking it further - Simulation Scenario Development <b>Presenter:</b> Mr Julian van Dijk (Director, Clinical Education and Simulation, St Vincent's Health)
25 June 2014	20 MEOs/MCEs	Presentation of findings from the PMCV survey on identification and management of workplace stress in junior doctors <b>Presenter:</b> Ms Marilyn Bullen, Education Manager (PMCV) (To be presented at the 2014 National Prevocational Medical Education Forum)

### Workshops for Directors of Clinical Training (DCTs) and Supervisors of Intern Training (SITs)

Two workshops for DCTs and SITs were conducted with topics covered including: junior doctor welfare and support; career planning for junior doctors; establishing the new AMC / MBA assessment process for interns; developing strategies for success in the DCT and SIT roles; and teaching professionalism and leadership. The DCT/SIT group provided valuable consultation for a number of policies/guidelines including: the national DCT/Supervisor Professional Development Program, and the document prepared by Siggins Miller *Options for clinical education and training governance arrangements in Victoria*.

The workshops promote collaboration and sharing of information which helps to develop solutions to common problems and is a valuable opportunity for networking with peers and the PMCV.



Combined workshop for MEOs; MCEs; DCTs and SITs 2013



## DOMAIN 2: SUPERVISOR & STAKEHOLDER PROFESSIONAL DEVELOPMENT

### Teaching on the Run (TOTR)

The PMCV conducted five one-day TOTR programs for Junior Medical Officers (JMOs) on a fee-paying basis during the reporting period; in total, 91 junior doctors participated. Three modules were presented: Clinical Bedside Teaching; Teaching a Skill; Feedback and Assessment. Ms Marilyn Bullen (Education Manager, PMCV) co-facilitated all of the programs with the following accredited TOTR facilitators: Dr Joanne Brown (Austin Health), Dr Tamsin Bryan (St Vincent's Health), Dr Craig Noonan (Monash Health). Ms Kylie Nicholls (PMCV) is being trained to be a facilitator of the program.

A one-day TOTR program for 15 junior doctors was conducted for Peninsula Health during the reporting period and received excellent evaluations.

The PMCV conducted two two-day TOTR programs for senior medical staff and educators on a fee-paying basis during the reporting period; in total, 35 senior doctors and educators participated. Six modules were presented: Clinical Bedside Teaching; Teaching a Skill; Feedback and Assessment; Planning Learning; Effective Group Teaching; and Supporting Trainees. Ms Marilyn Bullen (Education Manager, PMCV) co-facilitated all of the programs with the following accredited TOTR facilitators: Dr Joanne Brown (Austin Health), Dr Craig Noonan (Monash Health) and Dr Ruth Hew (Western Health).

Both programs received excellent evaluations with regard to participants' overall reaction to the program; the extent to which the program provided information that participants could use on the job; the presentation of the program; and participants' enjoyment of the program.

### Professional Development Programs for Registrars (PDPR) programs

The PMCV conducted three two-day PDPR programs during the reporting period. Participants were charged \$600 each to participate in the program. The programs were co-facilitated by Dr Jagdishwar Singh (CEO, Confederation of Postgraduate Medical Education Councils); Dr Sean Fabri (Western Health); Dr Debra Kiegaldie (Monash Health); Dr Ruth Hew (Western Health), and A/Professor Louis Irving (Melbourne Health).

A total of 52 registrars from metropolitan and rural health services attended the programs that included modules on: roles of the registrar & transitional issues; leadership & management; increasing self-awareness (MBTI instrument); communication; patient safety & quality; managing stress; effective time management & delegation; conflict resolution; building team skills; and giving feedback.

### The Postgraduate Hospital Educational Environment Measure (PHEEM) project

The PHEEM (Postgraduate Hospital Educational Environment Measure) instrument is a 40 item questionnaire to evaluate the clinical learning environment. It was developed in the UK in 2005 and has been used in Australia and internationally since that time.

Eleven hospitals are involved in the PMCV PHEEM project in 2014: St Vincent's Health; Northern Health; Western Health; Peter MacCallum Cancer Centre; Royal Children's Hospital; Ballarat Health Services; Latrobe Regional Health; SouthWest Healthcare; Bendigo Health; Western District Health Service; and Echuca Regional Health. A Reference Group (PHEEM Team) comprising representatives from participating hospitals, the JMO Forum, and the PMCV Education Manager has been established to oversee this project.

Since March 2013, 949 online PHEEM survey questionnaires have been completed. The PMCV PHEEM database, established in 2006, now totals over 2000 completed questionnaires.

The PMCV website includes information regarding PHEEM; PowerPoint presentations from conferences and meetings, a copy of the modified Victorian PHEEM questionnaire, guidance on the use of PHEEM and lessons learned. The information can be accessed at: <http://www.pmcv.com.au/education/pheem>



Participants from June PDPR 2014

## DOMAIN 2: SUPERVISOR & STAKEHOLDER PROFESSIONAL DEVELOPMENT

### Medical Education Symposium

The annual PMCV Symposium was held on Friday 9 May 2014 at Barwon Health. There were 81 registrants for the event.

The Symposium program was developed and coordinated by Ms Marilyn Bullen, PMCV Education Manager and sessions were facilitated by A/Professor Louis Irving, Chair, Education subcommittee and Dr Sean Fabri, Chair, IMG subcommittee.

The Symposium was preceded by the following meetings:

- MEO / JMO meeting

Topics included: Skills required for mentoring and supervising; preparing junior doctors for provision of near-peer support and supervision; and management of workplace stress throughout the prevocational phase.

- DCT / SIT workshop

Topics included: Establishing the new AMC / MBA assessment process for Interns; the DCT and SIT roles: developing strategies for success; and teaching professionalism and leadership.

The Symposium program included three plenary sessions and two concurrent workshops. The keynote address was provided by Dr Veronique Browne on the topic of challenging the traditional medical approach to managing workplace stress. Presentations from each of the project teams that received funding as part of the Research Incentive Grant in 2014 were also included in the plenary program.

Based on favourable evaluation from 2013, concurrent workshops were included in the 2014 Symposium program. Workshops were run on the topics of career decision making and progression, and staying healthy in medicine.

The Staying Healthy in Medicine interactive workshop was facilitated by Dr Veronique Browne. Subsequent to the Symposium, discussions have commenced via the Education subcommittee about the feasibility of developing an education resource around self-care and its positive impact on patient safety.

The Career decision-making and progression interactive workshop was facilitated by A/Professor Irving and relevant feedback was provided to the CPMEC Career Planning project meeting held in Melbourne in June 2014.

Overall the entire Symposium program was well evaluated by 43 respondents, particularly the keynote presentation by Dr Veronique Browne, and both afternoon workshops. The degree of stress created for junior doctors in relation to career decision making and progress was one of the major take-home messages. Other key take-home messages included: that self-care is just as important as patient care; and that the impact of medical culture impedes the identification and management of stress.



*Participants: MEO/JMO Meeting at the Symposium 2014*

### Cultural Awareness Training

The Cultural Awareness in relation to Indigenous Australians module developed in 2012 continues to be integrated into the two-day centralised IMG orientation - *Hitting the Ground Running* program. In addition, a workshop was conducted in April 2014 for Victorian health service staff with 16 participants attending. The program was coordinated by Ms Kylie Nicholls, IMG/Project Manager.

The training aims to provide cultural awareness education that:

1. includes an overview of the key issues relevant to the development of a culturally safe health service environment for Aboriginal and Torres Strait Islander people; and
2. leads to an increase in culturally safe and sensitive practice amongst health care professionals

The workshop was evaluated very highly by participants. We would like to thank Ms Emma Leehane for her support in facilitating the sessions.

## DOMAIN 2: SUPERVISOR & STAKEHOLDER PROFESSIONAL DEVELOPMENT

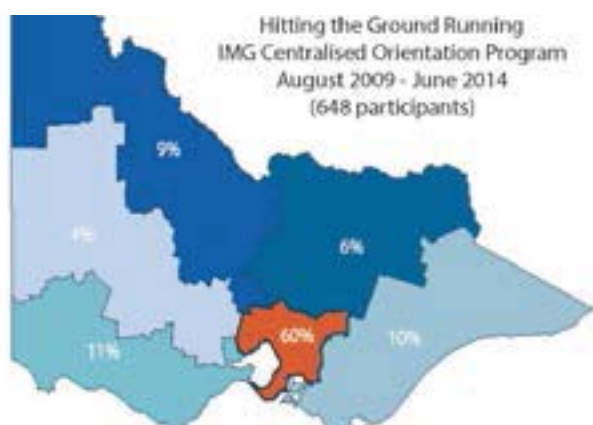
### Hitting the Ground Running - Centralised IMG Orientation program

The two-day centralised IMG orientation program – *Hitting the Ground Running* has continued successfully via a fee-for-service model of implementation. Seven programs were held between July 2013 and June 2014. The current program consists of the following sessions:

Day 1	Orientation to the Australian Healthcare System Legislation & Professional Practice
Day 2	Communication & Cultural Safety Cultural Awareness in relation to Indigenous Australians

A total of 107 participants completed the centralised orientation program during the reporting period with 65% of participants attending from metropolitan health services and 35% of participants attending from regional/rural health services.

The uptake of the program state-wide (region-based) from its inception (August 2009 – June 2014) has included 648 participants, with 60% of participants attending from metropolitan health services and 40% of participants attending from regional/rural health services.



A customised one-day IMG orientation program continues to be implemented in collaboration with the Royal Children's Hospital, Melbourne with five programs conducted during the reporting period.

### PMCV IMG Orientation Manual

The IMG Orientation Manual: *Working in Victoria's Public Hospitals - An Orientation Manual for IMGs* was updated in May 2014 (13th edition). The Manual is accessible via the PMCV website and is also distributed to participants at the centralised IMG orientation program.

### Education subcommittee

The Education subcommittee met five times during the reporting period. Membership of the Education subcommittee as at 30 June 2014 is:

#### Chair

A/Professor Louis Irving  
Director of Clinical Training, Melbourne Health

#### PMCV Board

A/Professor Jonathan Knott  
Medical Education Unit, University of Melbourne

#### Medical Education

Dr Heather Grusauskas, Director of Graduate Studies, School of Primary Health Care, Monash University  
Mr Julian van Dijk  
Director, Clinical Education and Simulation, St Vincent's Health

#### Medical Education Officers

Mr Daryll McKenna, Western Health  
Ms Sharon Humphries, Werribee Mercy Hospital

#### Directors of Clinical Training / Supervisors of Intern Training

Dr Brendan Condon  
Supervisor of Intern Training, South West Healthcare  
Dr Jenny Brookes  
Director of Postgraduate Medical Education, Eastern Health

#### Medical Clinical Educator

Vacant

#### Term /GP Supervisors

Dr Tsung Chung, nominee, ACEM  
Dr Kaye Atkinson, nominee, General Practice, RACGP  
Dr Jane Greacen, nominee, Rural and Remote Health, ACRRM

#### Junior Medical Officers (JMO Forum elected)

Dr Bob Wang, Victorian Eye & Ear Hospital  
Dr Sara de Menezes, Ballarat Health Services

#### In attendance

Dr Susannah Ahern, Medical Director, PMCV (until December 2013)  
Ms Carol Jordon, Chief Executive Officer, PMCV

#### Secretary

Ms Marilyn Bullen, Education Manager, PMCV

### DOMAIN 3: JMO WORKFORCE & PLACEMENT (COMPUTER MATCHING)

To support coordinated, effective placement, and appropriate distribution of the Victorian JMO workforce.

The Computer Matching Service (CMS) is supported by Ms Edwina Snowden, Ms Aileen Falzon and Mr Anthony Biancofiore and together this small team ensures that the range of activities associated with the Computer Matching Service for medical interns, HMOs, graduate nurses & midwives, Basic Physician trainees, and medical radiations interns occurs within the published timelines.

The online CMS rolled-out since April 2005, enables candidates and hospitals to register for access to a computer match, submit their ranking of preferences, edit preference rankings and view the results of matching. This website enables a range of information for each Computer Match to be viewed online (i.e. Schedule of Dates, Eligibility Criteria, Hospitals participating in a match). Support is provided to hospital users through the provision of online documentation produced by staff supporting this activity.

#### Intern Match

The Computer Matching Manager presented to final year medical students of Monash, Melbourne and Deakin universities and Notre Dame Melbourne based clinical school explaining how the Computer Matching System works and answered a range of questions related to the matching and the intern recruitment process.

The priority list introduced by the Department of Health for the 2011-12 Intern Match was retained for the 2013-14 Intern Match. The Department continued to support a Special Consideration Policy to enable interstate permanent resident medical students who have previously been resident in Victoria to demonstrate any exceptional reasons/compassionate grounds why they should be assigned a higher priority to undertake an internship in Victoria.

In order for the comparison of medical students across different universities to be objective, the four Victorian medical schools (Deakin University, Monash University, The University of Melbourne and the University of Notre Dame Melbourne clinical school) agreed on a common mechanism for supplying student scores to hospitals to aid intern recruitment. Victorian medical student results are provided directly to Victorian intern parent health services as an InternZScore. The InternZScore introduced in 2012-13 continued to be used in 2014-15.

A standardised CV template was introduced for the 2014 Intern Match by the Department of Health and was accepted by 21 out of the 22 health services participating in the match. Feedback from health services regarding the standardised CV has been positive. The PMCV addressed a significant number of questions from candidates in relation to the standardised CV and its completion.

#### HMO Match

The HMO Match continued to grow in registration numbers and positions available in the match.

The HMO Exemption Policy was reviewed in 2013 and its use continued in the 2013-14 HMO campaign.

#### BPT Matches

The eligibility criteria for the Basic Physician Training (BPT) matches were reviewed in consultation with the Royal Australasian College of Physicians (RACP). The criterion "IMG who has been assessed by FRACP to undertake FRACP exams" was removed from both matches as a result of this consultation. All candidates entering the BPT matches must now hold General Medical registration at the time of entering the match.

#### Graduate Nurse and Midwifery Program (GNMP) Match

PMCV attended the annual Australian College of Nursing Nurse Expo on Saturday 12 April 2014 at the Melbourne Exhibition Centre. PMCV prepared information brochures explaining the matching process and distributed these to more than 1200 attendees. PMCV also did two presentations about the GNMP Match at the Nursing Expo.

The PMCV was invited to an information session organised by the Australian Nursing Federation and presented on Friday 16 May 2014 at the MCG. This session was well attended by over 400 students.

The three presentations included a detailed explanation of how to register and use the online matching system, schedule of dates, eligibility criteria, hospital directories, candidate's priority list, hospital application process and how to access Match results. The presentations were followed by a "Question & Answer" session where students could ask further questions about the matching service.

Several enhancements were made to the GNMP Match during 2013. All candidates were required to select their course of completion as part of the registration process and a list of courses was presented to applicants for selecting from a "drop down menu" on the candidate registration form. A new function was created in 2013 which allowed all participating hospitals and health services to confirm their final number of positions for matching via the online hospital's nomination form submission process. This process was developed to minimise administrative errors when entering the number of positions for matching. There were no issues reported by hospitals in relation to this new function.

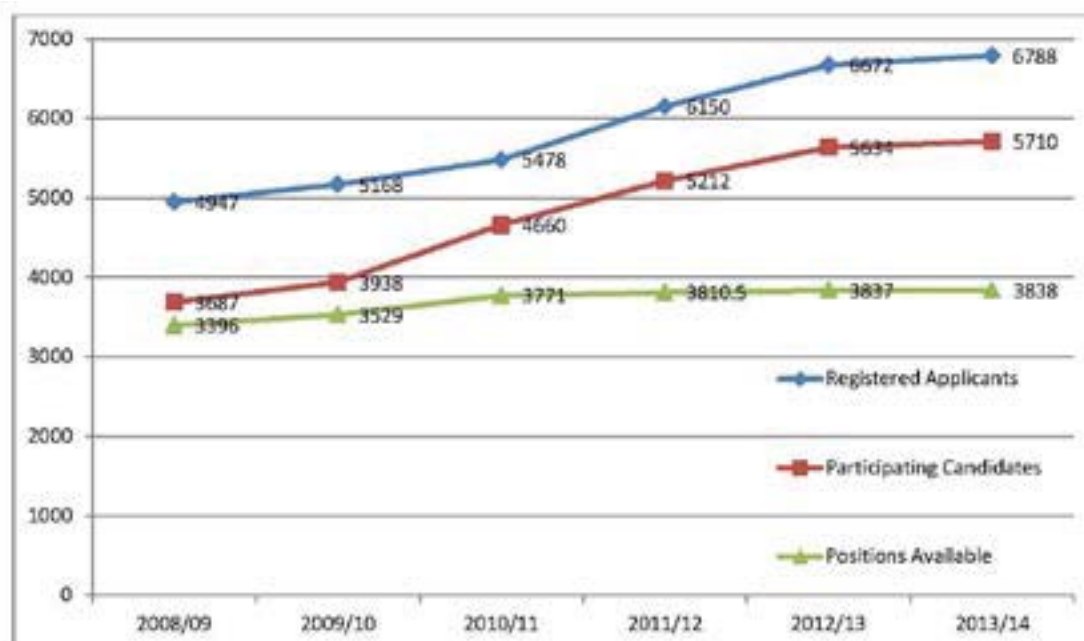
### DOMAIN 3: JMO WORKFORCE & PLACEMENT (COMPUTER MATCHING)

An overview of the participation rates of candidates and hospitals in each of the matches administered by the Computer Matching Service is set out in the table below.

Table 1: Overview of the 2013-14 Computer Matching Service

Computer Matching Service 2013-14	No. of Registered Candidates	Candidates Withdrawn / Incomplete Applications	No. of Candidates in Match	No. of Hospitals in Match	No. of Hospital Posts in Match	No. of Matched Candidates	No. of Nominated Referees
Medical Intern Match	1260	92	1165	19	707	707	2409
HMO Match	1306	178	949	15	708	689	3063
BPT2 Match	295	46	249	9	204	200	799
BPT3+ Match	316	43	273	9	216	206	875
GNP Match	3445	520	2921	148	1861	1738	n/a
Diagnostic Radiography Match	105	4	101	15	92	97	n/a
Nuclear Medicine Match	34	6	28	5	20	20	n/a
Radiation Therapy Match	27	3	24	8	30	24	n/a
<b>Total 2013-14</b>	<b>6788</b>	<b>892</b>	<b>5710</b>	<b>228</b>	<b>3838</b>	<b>3681</b>	<b>7146</b>

Graph 2: Growth in position and applicant numbers over the last 5 years (2008-09 to 2013-14)



## DOMAIN 3: JMO WORKFORCE & PLACEMENT (COMPUTER MATCHING)

### Medical Radiations Match

The Medical Radiations Match encompasses the Nuclear Medicine Match, the Radiation Therapy Match and the Diagnostic Radiography Match and has continued to expand.

Two information sessions were conducted by the PMCV to explain the matching service. The first session was on 26 September 2013 at RMIT University and the second session was on 27 September 2013 at Monash University.

Since 2013, PMCV has also administered a small a mid-year Medical Radiations Match for Monash University Master of Radiation Therapy students to allocate them to their 12 month Professional Clinical placement in Victoria. One information session was presented to those students on 9 April 2014.

All four matches are unique requiring their own set of business rules, processes, eligibility criteria, guides, and hospital directories. These matches, whilst small, offer many multiple challenges for both candidates and hospital users.

### National Medical Intern Data Management Working Group

The first National Audit of Intern Acceptances and applicant data was conducted in 2010 and has evolved over the years. The aim of the National Audit is to ensure applicants have the most equitable and timely opportunity to obtain a PGY1 position in Australia and to minimise the number of vacancies at the start of the clinical year. For intake into the 2014 clinical year, 1 audit of applications and 5 audits of acceptances were conducted.

Ms Carol Jordon and Ms Lesley Chisholm (Department of Health) were the Victorian Nominees of the National Medical Intern Data Management Working Party and Ms Edwina Snowdon was the Victorian liaison officer responsible for providing the Victorian data for the national Audit of intern applications and national Audit of Intern acceptances in Victoria. The NSW Health Education and Training Institute (HETI) continued their role as the Data Manager in 2013-14 and managed the data collection and audit processes. This National Working Group met five times in 2013 and four times in 2014 (until 30 June 2014).

At the 21 March 2014 meeting of the National Medical Intern Data Management Working Group it was agreed to undertake a survey to identify how many interns who had accepted a 2014 intern position either did not commence after accepting a position or commenced and have subsequently resigned. The PMCV coordinated the survey of Victorian health services and the report to the Working Group.

The National Working Group resolved to continue with the National Audit of Intern Applications (data provided in June 2014) and four audits have been identified for 2014 with the possibility of a fifth audit.

The National Working Group also agreed to a late vacancy management process to occur from Tuesday 25 November 2014 to Tuesday 20 February 2015 aimed at providing an opportunity for applicants who applied for an intern post but who do not hold a position to be offered an intern post if late vacancies arise.

A Medical Intern Placement Number (MIPN) was introduced in 2013 and continued to be used in 2014 as a unique identifier to assist the audit process. The Medical Intern Placement Number is a nine digit number which has been generated by the Australian Health Practitioner Regulation Agency (AHPRA) and is provided to medical schools for distribution to all final year medical students.

### Referee Request Forms

Under the *Privacy Act 1988* (Privacy Act) and the Australian Privacy Principles (APPs), candidates are entitled to access personal information that PMCV holds about them. In order to do this, candidates can submit a request for access to Referee Assessment Forms to the Computer Matching Service. Referees are advised that their report form may be accessed by the candidate under the *Privacy Act 1988* and the Australian Privacy Principles.

The following table sets out the number of requests to access referee assessment forms in the 2013-14 medical matches.

	Intern Match	HMO Match	BPT Matches
Summary of requests to access Referee Assessment Forms 2013-14	60	73	57

### DOMAIN 3: JMO WORKFORCE & PLACEMENT (COMPUTER MATCHING)

#### Medical Careers Expo 2014

The 14th Annual Medical Careers Expo was held on Saturday 17 May 2014 at St Vincent's Hospital, Fitzroy. PMCV and AMA Victoria jointly organised the event.

There was a change in format to the Career's Expo in 2014. The Career's Expo was developed as part of a suite of medical career events in 2014 and focused largely on intern recruitment for final year medical students with particular emphasis on rural and regional health services and General Practice pathways. The aim of the Expo was to provide a flexible approach for health services in how they communicate their requirements to prospective applicants and afford an opportunity for final year medical students in particular to be provided with information in a central location on a single day.



The majority of rural and regional health services offering intern programs and several metropolitan and outer metropolitan health services provided brief presentations on the day. An opportunity was provided for the new Rural Community Intern Training programs to present and be part of a panel to respond to enquiries from final year medical students. There was also a session on CV preparation.

The Expo was well supported by health services and affiliated organisations and was well attended by final year medical students in particular.

The vocational aspects of medical training and specialty decision were addressed in separate events hosted by AMA Victoria and the Colleges.

The PMCV booth was well attended throughout the Expo. The majority of enquiries related to the new standardised CV for the Intern Match. Other queries related to hospital preferences and the matching algorithm, the allocation process and priority groups and referee selection. Brochures on the Intern, HMO and BPT matches and the computer match registration process were available at the PMCV booth.



*Postgraduate Medical Council of Victoria booth - Medical Careers Expo 2014*

### DOMAIN 3: JMO WORKFORCE & PLACEMENT (COMPUTER MATCHING)

#### Workforce subcommittee

Items discussed or reviewed by the Workforce subcommittee during the reporting period included:

- Monitored the online computer matching system for all the medical matches;
- Received updates in relation to the Intern Match for 2015 internship (e.g. Reports from the Department's Medical Education Planning Group and Medical Intern Recruitment Working group; DH policy, rural community intern training programs, intern numbers);
- Received reports of the work of the National Medical Intern Data Working Group (i.e. National Audit of Applications and National Audit of Acceptances);
- Received regular reports on the registered number of candidates and posts in each of the medical matches and comparison with previous years;
- Participated in the consultation process for the Feasibility of Internships in Community Health (FITCH) Project;
- Received reports of CPMEC Strategic projects (i.e. JMO Career Planning project);
- Input into the review of the HMO Match and Exemption Policy;
- Received reports of the bi-annual meetings with clinical deans/ sub-deans of the Victorian medical schools;
- Contributed to the evaluation of the state-wide InternZScore developed by medical faculties to aid intern recruitment for the 2013-2014 Intern Match; support for the continuation of the InternZScore methodology for the 2014-2015 Intern Match;
- Reviewed the 2013 Medical Careers and monitored planning of the 2014 Medical Careers Expo;
- Received reports on Department of Health initiatives, including the Victorian Rural Medical Scholarship Scheme, Transition to General Registration Program and Victorian Rural Generalist Program.
- Received the Executive summary of the Beyondblue mental health survey for doctors and discussed current strategies of health services relating to JMO welfare and self-care;
- Reviewed the policies: Repeating Interns and Part-Time and Interrupted Training;
- Noted the Medical Board of Australia Communiqués and consultation papers in relation to medical registration standards (e.g. Continuing Professional Development, Recency of Practice);
- Received and considered national and international reports of relevance to prevocational medical education and training (i.e. Medical Training Panel Report 2014, Health Workforce Insights Newsletters, AMA Position Statement on Clinical Academic Pathways; MABEL; Medical Journal of Australia articles on medical workforce, AMC Newsletters re National Intern Training Framework).

- Consulted with the Royal Australasian College of Physicians in June 2014 regarding their draft Selection into Training Policy (early stages of development).

#### Membership Workforce subcommittee

The Workforce subcommittee met five times during the reporting period and was chaired by Mr Andrew Hanson from February 2014. Membership of the Workforce subcommittee as at 30 June 2014 is:

#### Chair

Mr Andrew Hanson, Manager, Medical Workforce, Alfred Health

#### Hospital Medical Officers (JMO Forum elected)

Vacant

#### Health Education Australia Ltd (formerly VMPF)

Ms Beverley Sutton, Chief Executive Officer

#### Metropolitan Health Services

Dr John Ferguson, Chief Medical Officer, Austin Health

Dr Mark Garwood, Chief Medical Officer, Western Health

Ms Kath Ronan, Director, Medical Workforce, Eastern Health

Mr Peter Naughton, Manager, Medical Workforce, Peninsula Health

Dr Rodney Fawcett, Director of Medical Education, Barwon Health

#### HMO Managers subcommittee

Mr Darryl Floyd, Coordinator, Medical Workforce Unit, Eastern Health (Chair)

#### Rural and Regional Health Services

Dr John Elcock, Director of Medical Services, Northeast Health

Wangaratta

Ms Pauline Parr, HMO Manager, Latrobe Regional Health Service

#### Rural Workforce

Ms Pauline Ingham, VicNet Marketing and Research Manager, RWAV

#### In attendance

Dr Susannah Ahern, Medical Director, PMCV (Until December 2013)

Ms Carol Jordon, Chief Executive Officer, PMCV

#### Secretary

Ms Edwina Snowdon, Computer Match Manager, PMCV

Changes in membership during the reporting period included: Ms Kath Ronan resigned as Chair of the Workforce subcommittee in July 2013 and the Board approved the appointment of Mr Andrew Hanson as Chair from February 2014. The JMO position on the subcommittee was not filled in 2014 pending the outcome of a review of the future role and purpose of the Workforce subcommittee.



## DOMAIN 3: JMO WORKFORCE & PLACEMENT (COMPUTER MATCHING)

### HMO Managers subcommittee

There were five HMO Managers subcommittee meetings held in the reporting period: July, October and December 2013; February and May 2014. This subcommittee comprises representatives with responsibility for medical workforce at their health service.

There were a range of issues considered by the HMO Managers / Medical Workforce coordinators subcommittee including:

- Considered the role and purpose of the subcommittee;
- Reviewed aspects of the medical matching process (i.e. CV process for intern match, special consideration process for intern match; unmatched process intern match);
- Reviewed the schedule of dates for the 2014 medical matches;
- Reviewed the outcomes of each of the 2013 medical matches;
- Contributed to planning for 2014 Medical Careers Expo and evaluation of the 2013 Expo;
- Reviewed the guidelines on the defined end of rotation day and time;
- Supported the Council's IMG Centralised orientation program, *Hitting the Ground Running*;
- Received reports of the bi-annual Clinical Deans meetings;
- Received updates regarding Victorian Rural Generalist Pathways and the Victorian Rural Medical Scholarship Scheme 2014;
- Reviewed the schedule of health service information sessions coordinated by PMCV;
- Discussed issues in relation to registration and accreditation (e.g. Guidelines on Clinical Observerships; review of medical registration standards (i.e. Regency of Practice, Continuing Professional Development));
- Received updates in relation to national developments relating to internship (i.e. National Audit of Intern Acceptances 2013, National Audit of Intern Applications 2013);
- Received and considered national and international reports of relevance to prevocational medical education and training (i.e. Medical Training Panel Report, MABEL: Medicine in Australia, Balancing Employment and Life, AMA Position Statement on Clinical Academic Pathways);
- Discussed projects of interest for submission as an abstract for the 2014 National Forum;
- Beyondblue mental health survey of doctors - discussion of strategies in health services in respect to JMO Welfare and self-care;
- Labour Market Testing and the Subclass 457 Visa;
- Implemented the nationally consistent date for commencement of registrars.

Presentations at HMO Managers meetings were received from:

- Monash Health, Online medical referee process, Ms Amy Zusack
- Department of Health, Medical Education Planning Group recommendations regarding intern recruitment for 2014-2015 (i.e. Standardised CV template),
- PMCV, National Intern Training Framework and the revised Victorian accreditation standards, Ms Carol Jordon.

HMO Managers also provided members to participate in meetings of the Clinical Dean's Group. Two meetings were held in October 2013 and April 2014 and were attended by Ms Sarah McConchie, Austin Health.

### Membership HMO Managers subcommittee

All Victorian health services that offer prevocational training posts are eligible to participate in HMO Managers meetings. Teleconferencing is offered for rural participants. Representatives from the new Rural Community Intern Training programs were invited to participate in meetings in 2014.



*Members of the HMO Managers subcommittee: Mr Darryl Floyd, Ms Colette Geaney, Ms Sarah McConchie, Ms Judith MeHarry and Ms Edwina Snowdon (PMCV)*

## DOMAIN 3: JMO WORKFORCE & PLACEMENT (COMPUTER MATCHING)

### IMG subcommittee

There were a range of matters discussed by the IMG subcommittee including:

- Reviewed and updated the IMG subcommittee Terms of Reference;
- Discussion paper prepared for inclusion in the PMCV Board review of subcommittee structure consultation process;
- Facilitation support of the Department's IMG employer information workshop in July 2013;
- Received updates on the work and activity of International Health Professions Victoria (IHPV) (e.g. Spring, TGR, recruitment);
- Provided feedback to the Health Workforce Australia (HWA) IMG Orientation and Supervision Consultation process;
- Discussed strategies to support IMGs currently working (e.g. educational, professional development);
- Received and considered relevant updates (e.g. Changes to the competent authority (CA) pathway for international medical graduates and PMCV's role as a CA pathway accredited provider).

### Transition to General Registration (TGR) program

The Transition to General Registration (TGR) program was initially launched in 2011-12 to identify and assist junior doctor IMGs to complete the required core hospital rotations in order to qualify for General Registration. To date, around 45% of all 96 candidates funded over the past 3 years have successfully achieved General Registration.

The TGR program initiative developed and funded by the Victorian Department of Health was supported by members of the IMG subcommittee in 2013 and in 2014 through provision of members to an expert panel to review applications. 45 applications were received from ten health services (91% of applications were submitted by rural/regional hospitals and 9% by metropolitan hospitals). 35 proposals have been funded to facilitate a total of 41 core rotations (20 in General Medicine, 3 in Emergency Medicine and 19 in General Surgery). To date, around 26% of TGR 2013-14 candidates have successfully transitioned to general registration.

### Membership IMG subcommittee

The IMG subcommittee met four times during the reporting period. Membership of the IMG subcommittee as at 30 June 2014 is:

#### Chair

Dr Sean Fabri, Medical Clinical Educator/Supervisor Intern Training, Western Health

#### Medical Director, PMCV

Dr Susannah Ahern, Medical Director, PMCV (until December 2013)

#### Metropolitan and Rural/Regional Health Services

Dr Sanjay Sharma, Staff Anaesthetist, Ballarat Health Services

#### IMG representative

Dr Gowrie Somarajah, Registrar, Austin Health

#### Australian Health Practitioner Regulation Agency

Ms Bronwyn Keen, Manager Medical Registration, Victoria

#### Medical Clinical Educator

Dr Joanne Brown, Austin Health

#### Medical Education Officer

Ms Wendy Tilling, West Gippsland Health Care

#### HMO Manager nominee

Ms Pauline Parr, HMO Manager, Latrobe Regional Health

#### Independent Members

Ms Beverley Sutton, CEO, Health Education Australia Limited

Ms Gillian Fawcett, Medical Education Officer/Professional Co-ordinator of IMGs, Western Health

#### In attendance

Ms Carol Jordon, Chief Executive Officer, PMCV

Ms Helen Finneran, Senior Policy Officer, International Health Professions Victoria, Department of Health

Ms Sharon Christie, Policy Officer, International Health Professions Victoria, Department of Health

#### Secretary

Ms Kylie Nicholls, IMG/Project/Website Manager, PMCV

## DOMAIN 4: JMO WELFARE & PROFESSIONAL DEVELOPMENT

To support quality JMO training through engagement of JMOs, and support of their professional development.

The Victorian Junior Medical Officer (JMO Forum) established in 2006 continues to expand state-wide. The Victorian Department of Health provided funding to support the meetings of the JMO Forum which JMOs attended in person or by teleconferencing.

The Victorian JMO Forum met five times during the reporting period. Meetings were held in August, October and December 2013 and were co-chaired by Dr Adriana Bibbo (PGY3, Alfred Health) and Dr Steven Kunze (PGY2, Northern Health) until December 2013. Dr Matthew Harvey (PGY2, Royal Children's) and Dr Julia Lai-Kwon (PGY3, St Vincent's Health) were approved by the PMCV Board as the 2014 Chair/Deputy Chair respectively and they co-chaired meetings in March and May 2014.

New JMO portfolio members were elected in April 2014. JMOs were appointed to all subcommittees with a changeover occurring in April 2014; Education subcommittee – Dr Bob Wang (PGY3, RVEEH) and Sara De Menezes (Intern, Ballarat Health); Accreditation subcommittee – Dr Ophelia Wong (Intern, Monash Health) and Dr Kate Gazzard (PGY2, Monash Health). JMOs have also been elected to the following JMO portfolios: Publications: Dr Nidhi Panicker (PGY2, RCH); Social media/website: Dr Khatijah Khalilur Rahman (PGY2, NorthEast Health); PHEEM project: Dr Annie Hung (PGY3, Western Health); Welfare: Dr Madeleine Honner (PGY2, Monash Health); Professionalism: Dr Kerry Jewell (Intern, Bendigo Health); and new for 2014, Secretary: Dr Grace Cowderoy (Intern, Monash Health).

During the reporting period the following topics were discussed by the JMO Forum:

- the AJMOC (Australasian JMO Committee auspiced by CPMEC) 2013 Resolutions;
- the annual JMO and Clinical Educator Awards;
- Community Internship (FITCH) project;
- Medical Careers Expo and JMO expectations;
- the Australian Curriculum Framework App Feasibility project (CPMEC supported project);
- Career Planning and Decision Making (CPMEC supported project);
- Social Media, JMO Facebook page;
- National Intern Training Framework (NITF);
- Criteria for the annual PMCV Research Incentive Grant 2014;
- Professionalism and Postgraduate Hospital Educational Environment Measure (PHEEM) projects;
- Beyondblue national Mental Health Survey of Doctors and Medical Students;
- JMO welfare and support issues.



*Dr Matthew Harvey  
Chair  
Victorian JMO Forum*



*Dr Julia Lai-Kwon  
Deputy Chair  
Victorian JMO Forum*

The PMCV is committed to support JMO transitions (transition to internship and transition to vocational training) and is working in several areas to facilitate this area.

The PMCV contributed a project concept around Career Planning and Decision Making to the Confederation of Postgraduate Medical Education Councils (CPMEC) which was supported in principle. The project concept arose from concerns raised by JMOs at various prevocational education fora regarding the lack of access to information to aid career decision making and was identified as a source of stress by interns participating in the 2010 Victorian JMO Welfare Study. A meeting of key stakeholders was convened by CPMEC in November 2013 and the themes identified included the kinds of information needed for effective career planning for junior doctors; the key principles that should determine the information requirements; what information was currently available, the gaps and priorities. Also considered were the ways/means that could provide a coordinated approach to career planning information for JMOs, supervisors and other key stakeholders and the governance principles that should underpin a coordinated approach to future development. At the time of this report, it is unclear if this project will be further advanced given that the functions of Health Workforce Australia (HWA) will transfer to the Department of Health and Ageing (HWA was a potential funder of the project) and cessation of funding to CPMEC after 30 June 2014.

The PMCV published a *Position Paper on the Health and Welfare of Medical students and junior medical staff* which was last revised in October 2008. The paper is in the process of being reviewed by the Education subcommittee with input of the JMO Forum and the Clinical Dean's group.

## DOMAIN 4: JMO WELFARE & PROFESSIONAL DEVELOPMENT

The PMCV has provided funding to Alfred Health to undertake a literature review on JMO welfare and support structures and the development of a tool for assessment of psychological stressors. Stage 1 of the project is expected to be completed by the end of 2014.

A Work Group established by the HMO Managers subcommittee has commenced a review of the *Best Practice Guidelines - Guidelines Improving Interactions between Medical Workforce Units and Junior Medical Staff* developed in 2010. This document includes a list of supports and services available to JMOs and links to the websites of the specialist colleges for training and education information and is currently being revised. The revised document and links will be accessible via the PMCV website/resource section.

The JMO Forum raised the idea of conducting a transition workshop for final year students prior to commencing internship. The PMCV is consulting with stakeholders about the feasibility of developing such a workshop.

Dr Joanne Brown, our recently appointed Medical Advisor, is undertaking a review of part-time internship in recognition that some commencing interns may require a part-time internship for family, health, educational or other reasons. Options will be developed and discussed with health services and the Department of Health.

### CPMEC National Awards

Each State/Territory is invited to submit a nomination to CPMEC for consideration of either the national JMO Award or the national Clinical Educator Award.

#### *Victorian JMO Award*

This award recognises the significant contribution of a PGY1 or PGY2 doctor to prevocational teaching and learning in the workplace, involvement in PMCV activities, and involvement in projects and publications. The recipient of the Victorian JMO award for 2013 was Dr Hashrul Rashid, a PGY2 doctor at Goulburn Valley Health. Dr Rashid was presented with a certificate and received support to attend the National Forum in Adelaide.

#### *Victorian Clinical Educator Award*

This award recognises the contribution of an individual to teaching, mentoring, and advocacy in relation to junior doctor education and training, their involvement in the development of innovative programs and approaches for junior doctors and of promotion of JMO well-being. The recipient of the Victorian Clinical Educator Award for 2013 was Ms Susie Sangas, Medical Education Officer, Northern Health.



*Dr Susannah Ahern presenting Dr Hashrul Rashid with the Victorian JMO Award 2013*



*Dr Susannah Ahern presenting Ms Susie Sangas with the Victorian Clinical Educator Award 2013*

## DOMAIN 5: GOVERNANCE & STAKEHOLDER PARTNERSHIPS

To promote high quality JMO training outcomes through effective organisational leadership, and the creation of operational partnerships that align with key organisational objectives.

### Communication and Interactions

Key interactions during 2013 and 2014 are outlined below:

#### State

##### Department of Health

- Interactions with Clinical Placement Networks (CPNs) (Professor Brendan Crotty) and attendance of PMCV staff at CPN Update seminars.
- Regular meetings with Department of Health (Ms Carol Jordon, Dr Susannah Ahern).
- Interactions with International Health Professionals Victoria (IHPV) (e.g. Transition to General Registration Program, review and update of resources for international medical graduates, review of IHPV).
- Ms Carol Jordon provided administrative support and funding oversight for the Department of Health Victorian Rural Scholarship Scheme.
- Dr Susannah Ahern (until December 2013) was a member of the Medical Education Planning Group (MEPG) (Ms Carol Jordon as alternate) and the Medical Intern Recruitment Review Working Group.
- Dr Susannah Ahern was the PMCV representative to the Mason Review Roundtable with the Victorian Minister of Health.
- Attendance of staff and Board members at the Department's Health Summit Awards evening.
- Dr Susannah Ahern coordinated and monitored the progress of junior doctors in the intern training support program; annual report on program submitted to the Department.
- Interactions with Nurse and Midwifery Policy Branch, Department of Health in relation to the Graduate Nurse and Midwifery Match.
- Interactions with Department of Health, in relation to the Medical Radiation matches.
- Session presented by PMCV at the Department's IMG Employer Seminar.

#### AMA Victoria

- Collaboration with AMA Victoria in the delivery and evaluation of the 2014 annual Medical Careers Expo.
- Attendance of Ms Carol Jordon and Victorian JMOs (Dr Julia Lai-Kwon and Dr Samara Radford) at the AMA and beyondblue Mental Health Roundtable.

### Victorian Board of Medical Board of Australia

- Interactions with MBA registration staff through their participation in PMCV IMG subcommittee meetings.
- Annual presentation to Victorian Board of the Medical Board of Australia.
- Quaterly reports to the Victorian Board of the Medical Board of Australia on intern accreditation recommendations and other issues of interest.

### University liaison

Two meetings were held with the University Clinical Deans; October 2013 and April 2014. The Clinical Deans group was chaired by Dr Susannah Ahern (until December 2013) and then Professor Brendan Crotty (April 2014). Secretariat support is provided by Ms Jordon. Agenda topics included: Review of the Outcomes of the 2013-2014 Intern Match, report on the national audit of intern applications and multiple acceptances, preparing for the 2014-2015 Intern Match (PMCV coordination and scheduling of university information sessions and the update of the expected medical graduate numbers for 2014/2015 Intern Match), planning for the 2014 Medical Careers Expo, review of the implementation of the InternZScore methodology, the national JMO Career Planning project, Interns as Supervisors project, implementation of the National Intern Training Framework (NITF), review of the statement on the transfer of information between a health service and a university and the new National Intern Registration Standard.

The Clinical Deans supported the review and reform of intern recruitment process and monitored the recommendations of the Medical Intern Recruitment Review Working Group established by the Department of Health.

## DOMAIN 5: GOVERNANCE & STAKEHOLDER PARTNERSHIPS

### General

- Regular meetings of the CEO and Medical Director with Professor James Angus (until September 2013)/Professor Brendan Crotty, Chair of the PMCV Board, to progress Council business.
- Continued liaison with the Clinical Deans of the Victorian medical schools through bi-annual meetings and discussion of issues in relation to intern recruitment, transition from medical student to intern and the evaluation of the state-wide InternZScore introduced in 2013 by universities to aid intern recruitment.
- Participation of Council staff and chairs in accreditation visits to health services and general practices: Dr Susannah Ahern, Professor Rick McLean, Ms Monique Le Sueur and Ms Carol Jordon.
- Ms Carol Jordon contributed to the review of the Victorian Metropolitan Alliance, Research, Evaluation and Education Development (REED) subcommittee.
- Regular interaction with Victorian Regional Training Providers in relation to general practice prevocational medical training accreditation; continuation of joint prevocational and prevocational joint GP Accreditation visits; Ms Jordon presented at Southern General Practice Training meetings.
- Participation of PMCV staff in a one day national Streamlining of Accreditation Symposium hosted by General Practice Education Australia.
- Coordinated feedback on discussion papers to the Project Manager, feasibility study into community-based internship training (FITCH project).
- Interactions with the Chief Radiologists to develop and implement a state-wide computer match for Radiology trainees in Victoria.
- Interactions continued with staff of the Australian Medical Council and the Australian Health Practitioner Regulation Agency in relation to the Pre-employment Structured Clinical Interview process.

### National

#### Confederation of Postgraduate Medical Education Councils

The Postgraduate Medical Council of Victoria is a member of the Confederation of Postgraduate Medical Education Councils (CPMEC), the peak Australasian body for State and Territory organisations with the key role of supporting and developing education and training standards and requirements for interns and hospital medical officers in prevocational years. CPMEC works closely with the Medical Board of Australia (MBA), Australian Medical Council (AMC), federal and state health departments, Medical Deans, Committee of Presidents of Medical Colleges (CPMC), junior doctor representative groups, Health Workforce Australia (HWA) and General Practice Education and Training.

PMCV involvement with CPMEC has been at a number of levels. Dr Susannah Ahern, Medical Director, was the PMCV nominated member on CPMEC Board until December 2013 and Professor Crotty is the current PMCV nominee. Ms Carol Jordon is a member of the CPMEC Principal Officers Group. PMCV representatives on the Australasian Directors of Clinical Training, JMO and Medical Education Officers Committees of CPMEC were A/ Professor Louis Irving, Dr Matthew Harvey and Dr Julia Lai-Kwon, and Ms Marilyn Bullen respectively.

CPMEC has been funded mainly through Commonwealth funding grants which have been supplemented by projects and educational programs undertaken by CPMEC and a small contribution from each of the state members including PMCV. It is extremely disappointing that the federal government has chosen to cease all grant funding to CPMEC from 1st July 2014 despite an acknowledgement by the Federal Minister for Health of the contribution that CPMEC has made to postgraduate medical education and training in Australia.

#### Accreditation

Dr Susannah Ahern, Ms Monique Le Sueur and Ms Carol Jordon attended meetings of the Prevocational Medical Accreditation Network of the CPMEC. The aim of this group is to harmonise our local accreditation standards with the national Prevocational Medical Accreditation Framework and it normally meets three to four times per year. A paper on establishing a databank of prevocational interstate surveyors is currently being developed.

## DOMAIN 5: GOVERNANCE & STAKEHOLDER PARTNERSHIPS

### Indigenous Health

CPMEC and Australian Indigenous Doctors Association formally signed a collaboration framework in Sydney in June 2012. Members of CPMEC are being asked to identify initiatives being undertaken to implement the framework in their own jurisdiction.

### Professional Development Programs

#### *Professional Development Program for Registrars*

The Confederation of Postgraduate Medical Education Councils has developed a two-day Professional Development Program for Registrars (PDPR) aimed at registrars from all medical specialties. Initially developed in Victoria, it has now become a national program that enhances the leadership and management skills of registrars. The PDPR covers topics aimed at increasing self-awareness; building skills and techniques to manage and lead others, and delivering efficient and effective patient care. Two PDPR sessions were conducted for PMCV and were attended by a total of 37 registrars from metropolitan, regional and rural hospitals. The programs were directed by Dr Jagdishwar Singh, CEO, CPMEC. The program continues to enjoy excellent ratings from participants.

#### *National DCT Program*

Following the hugely successful piloting of a professional development program for Directors of Clinical Training (DCTs) in Melbourne in May 2013, CPMEC is exploring ways of funding the ongoing delivery of this program.

#### *National MEO Program*

A pilot of a professional development program for medical education officers was piloted in Victoria in 2013 and then offered to the MEO Special Interest Group meeting at the National Forum in Adelaide in November 2013.

### JMO Career Planning Information project

Dr Ahern, Medical Director, PMCV and Dr Singh, CEO, CPMEC convened a meeting of key stakeholders in Melbourne in November 2013 to considering ways of more effectively communicating data on intentions of prevocational doctors, medical workforce needs, college training requirements, competition ratios for various vocational training programs, whilst ensuring that the career development responsibility continued to rest with the junior doctor. A project proposal was presented to the previous Health Workforce Australia whose role has since been transferred to the Commonwealth Department of Health and Ageing and discussions are continuing on possible funding of the project.

### Australian Medical Council

The Australian Medical Council issued a range of discussion documents regarding a National Intern Training and Accreditation Framework and PMCV provided responses and met with working group members. Ms Jordon attended the AMC Workshop on the National Intern Training Accreditation Framework in Adelaide, November 2013 and participated in the AMC Workshop - Accreditation Team Chairs for the Specialist Education Accreditation Committee and Prevocational Standards Accreditation Committee in Melbourne, February, 2014.

## CONTRIBUTIONS

In addition to the contribution of our PMCV Board, the work of Council is supported by many volunteer members on subcommittees, as accreditors, as contributors to workshops and symposia and as supervisors and educators. We would like to formally acknowledge our appreciation of their generosity and active interest in issues relating to prevocational medical education, which are acknowledged in this report.

There have been numerous accreditation visits to health services from July 2013 to June 2014 and we acknowledge the contribution of the following team leaders:

Dr Susannah Ahern (Eastern Health); Dr James Brown (Orbost Medical Centre and Heyfield Medical Centre); Dr Rod Fawcett (Northern Health); Dr John Ferguson (Eastern Health, South West Healthcare – RCIT); Dr Michael Franco (Barwon Health, Grampians Health Service – RCIT and East Gippsland Intern Training – RCIT); Dr Jane Geacen (Orbost Medical Centre); Dr Glenn Howlett (Southwest Healthcare); Dr Stefan Kane (Calvary Health); Professor Rick McLean (East Gippsland Intern Training program - RCIT); Dr Eldon Lyon (Leongatha Medical Clinic and Korumburra Medical Centre); Dr Robert O'Brien (Alfred Health); Dr Al Ruddock (Alfred Health and Calvary Health); Dr Susan Sdrinis (Barwon Health and Northern Health); Dr Peter Stevens (Gardens Medical Group, Federation Clinic and Maffra Medical Group).

Members of survey teams included: Dr Matilda Anderson, Dr James Brown, Dr Jennie Cui, Dr Neil Cunningham, Dr Linda Danvers, Ms Lynne Denby, Dr Anjali Dhulia, Dr Paul Eleftheriou, Ms Debbie Kiegaldie, Dr Felicia Koh, Dr Anna Korin, Dr Julia Lai-Kwon, Dr Alastair Mah, Ms Anne-Marie Mahoney, Ms Sarah McConchie, Ms Rosemary McKemmish, Professor Rick McLean, Dr Diana Mecuri, A/Professor Peter Morley, Mr Richard Nasra, Dr Louisa Ng, Dr Matthew Ng, Dr Caitlyn O'Mahony, Ms Kath Ronan, Dr James Runciman, Ms Susie Sangas, Dr John Tai, Dr Ka Chun Tse and Dr Elizabeth Walker.

Medical Education Officers (MEOs) are members of various PMCV subcommittees: Mr Darryl McKenna and Ms Sharon Humphries (Education); Wendy Tilling (IMG). Medical educators and supervisors contributed to working groups for PMCV projects: PHEEM Project Group: Mr Darryl McKenna, Ms Helen Enright, Ms Jennifer Ah-Kion, Ms Susie Sangas, Dr Karen Donald, and Ms Nikki Mangum. Dr Brendan Condon is also a very active member of this group.

Professionalism Project Group: Dr Sean Fabri, Dr Rod Fawcett, Dr Jenny Brookes, and Mr Julian van Dijk. Ms Marilyn Bullen, PMCV Education Manager, supports the project groups.

The *Teaching on the Run* and the *Professional Development Program for Registrars* continue to receive very positive evaluations.

We thank Ms Marilyn Bullen our Education Manager for facilitating these programs along with support from trained TOTR clinician facilitators, including Dr Ruth Hew (Western Health), Dr Tamsin Bryan (St Vincent's Health), Dr Phuong Pham (Mildura Hospital); Dr Joanne Brown (Austin Health) and Dr Craig Noonan (Southern Health).

The PMCV conducted the national Professional Development Program for Registrars (PDPR) programs which were facilitated by Dr Jagdishwar Singh, Chief Executive Officer, CPMEC. The following people co-facilitated the programs: Dr Sean Fabri (Western Health), Dr Ruth Hew (Western Health), Dr Craig Noonan (Southern Health), Ms Debra Kiegaldie (Southern Health), A/Professor Louis Irving (Royal Melbourne) and Ms Marilyn Bullen (PMCV). The programs continue to receive very high evaluations. PMCV also allowed facilitators from other states to attend the PDPR as observers.



*Participants in a PDPR program session*



## CONTRIBUTIONS

The contribution of junior medical staff on subcommittees, as accreditors and as members of the Victorian JMO Forum is greatly appreciated. In particular we thank Dr Adriana Bibbo and Dr Stephen Kunz for their leadership of the JMO Forum until December 2013 and thank Dr Matthew Harvey and Dr Julia Lai-Kwon for their leadership of the JMO Forum in 2014. In April 2014 we welcomed newly elected JMO Forum representatives to PMCV subcommittees: Dr Sara de Menezes and Dr Bob Wang (Education); Dr Ophelia Wong and Dr Kate Gazzard (Accreditation); Dr Madeleine Honner (Welfare); Dr Kerry Jewell (Professionalism project); Dr Annie Hung (PHEEM project); Social media/IT (Dr Khatijah Rahman). The new position of Secretary was filled by Dr Grace Cowderoy. We farewelled 2013 JMO portfolio heads in April 2013: Dr Adriana Bibbo and Anneleise Willems (Education); Dr Matthew Harvey (Workforce); Dr Angel Lee (PHEEM project). We thank Dr Adriana Bibbo and Dr Stephen Kunz for their significant investment of time in preparing for the national meeting of JMOs at the 2013 National Prevocational Medical Education Forum in Adelaide. Dr Meghan Cooney continues to be actively involved as a member of the PMCV Board.

HMO Managers/Medical Workforce Managers have contributed in various ways to the work of Council. Ms Pauline Parr, Ms Kath Ronan, Mr Andrew Hanson and Mr Peter Naughton are members of the Workforce subcommittee. The Chair of the HMO Managers Group, Mr Darryl Floyd, is a member of the Workforce subcommittee and attends meetings of the Clinical Deans Group.

We would also like to thank the following for their participation in the delivery of the centralised Orientation program for IMGs: Dr Sean Fabri, Ms Jo-Anne Mazzeo, Ms Judith Miralles, Dr Johannes Wenzel, Dr Hung Nguyen, Ms Emma Leehane and Ms Kylie Nicholls (IMG Manager, PMCV).



*Dr Adrianna Bibbo, Dr Meghan Cooney and Dr Hashrul Rashid (Members, JMO Forum)*



*Participants in a Hitting the ground running (HTGR) - IMG orientation program.*

## WEBSITE AND PUBLICATIONS

The Postgraduate Medical Council of Victoria website, with the domain name [www.pmcv.com.au](http://www.pmcv.com.au) offers an introduction to Council and provides a platform for communication about Council's key activities. Visitors can access information on the PMCV Board and each of the five subcommittees including their key responsibilities, membership and meeting dates.

### Website visits

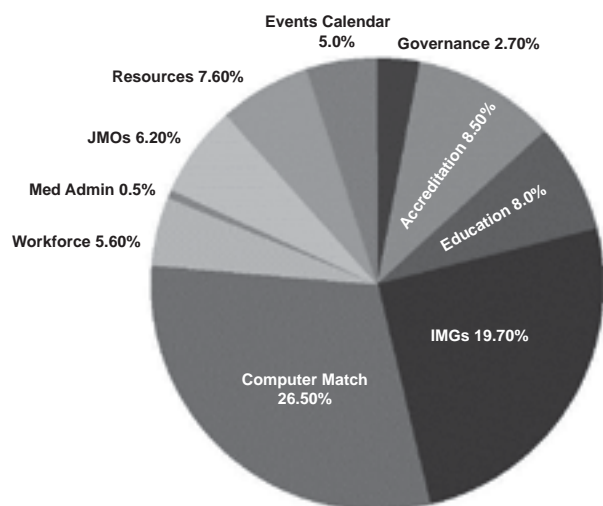
Between the period of 1 July 2013 to 30 June 2014, 62,594 visits (32,925 unique visits) were made to the PMCV website. 53% of visitors were new to the site and 47% were return visitors. The number of pages visited in this period was 142,128 averaging 390 pages visited per day. Peak periods were in July and October 2013 and May 2014.

Visitors to the PMCV website were sourced predominantly from web search engines (54%) with Google being the most widely used. Commonly searched words included, "PMCV," "Computer Match," "PHEEM" and "Teaching on the Run". Other sources of traffic included direct traffic - 16% (i.e. entry of domain name into web browser) or via referring sites - 17%. Main sites for referred traffic were the Computer Matching Service website and websites of Victorian Hospitals and Health Services.

### Content usage:

The main sections of the PMCV website include:

Governance	Education
Accreditation	Workforce
International Medical Graduates	JMOs
Medical Administrators	Resources
Computer Match	Events Calendar



% of total visits to PMCV Website

The most visited sections were the "Computer Match" (26.5%) and "IMG sections" (19.70%) which accounted for almost 50% of visits. The "Resources" and "Events" sections made up 13% of all visits. Various publications, resources and policy documents are available for download from the "Resources" section of the website, and the website Events Calendar provides a tool to communicate Council's activities to key stakeholders.

### Document Downloads

The most downloaded documents related to the Computer Matching Service. Whilst the Match has a separate website, the PMCV website document upload function is used to store matching resources. The top 5 PMCV document downloads (excluding computer match documents) were: 1. *A Guide for Interns in Victoria*; 2. IMG Orientation Manual; 3. JMO Forum Booklet; 4. CV and interview preparation for IMGs and 5. 2-day IMG orientation program.

### Reports and Publications

The PMCV *E-newsletter* is produced monthly and includes an overview of Council's events as well as articles and links to other significant activities in junior doctor welfare and education. The E-newsletter is sent out via email and has an open rate of approximately 29% each month. As at 30 June 2014 there were 929 subscribers.

### Reports:

1. Bi-monthly reports to the Victorian Board of the Medical Board of Australia
2. Annual Report to the Victorian Board of the Medical Board of Australia 1 October 2012 to 30 September 2013
3. Review of Provisionally Accredited 2013 Intern Posts, report to the Victorian Department of Health (October 2013)
4. Review of 2012 Postgraduate Year 2 Positions in Victorian Health Facilities, report to the Victorian Department of Health (April 2014)
5. Annual Report to the Victorian Department of Health 2013-14 (July 2014)

### Publications:

1. PMCV Annual Report 2012-13 (November 2013)
2. *Working in Victoria's Public Hospitals: An orientation manual for international medical graduates* (13th edition, May 2014)
3. JMO Forum booklet 2014 (7th edition, December 2013)
4. *A Guide for Interns in Victoria* (May 2014)

### Resources:

All PMCV policies, guidelines, accreditation application forms and links to relevant websites can be accessed via the Resource section of the PMCV website: <http://www.pmcv.com.au>

**POSTGRADUATE MEDICAL COUNCIL OF VICTORIA INC.**

**FINANCIAL REPORT FOR YEAR ENDED 30 JUNE 2014**

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## CHAIR'S REPORT FOR THE YEAR ENDED 30 JUNE 2014

In my first year as Chair of the Postgraduate Medical Council of Victoria I am very pleased to present the annual report which outlines another successful year for the Council.

During the past 12 months, PMCV has continued to support Victorian Department of Health objectives for growth of Victorian intern positions. We have participated in the National Intern Data Management Work Group overseeing intern application and acceptance processes in each jurisdiction. We have also supported rural interns through administration of the Victorian Rural Medical Scholarship scheme. Council is represented on the Department of Health's Victorian Clinical Placements Council (VCTC) and we have contributed to VCTC subcommittees and working groups such as the Medical Education Planning Group.

The welfare and professional development of prevocational trainees has been a major priority during the year: as a theme of PMCV's 2014 Medical Education Symposium; through our participation in the Mental Health of Doctors and Medical Students Roundtable; and in the award of a research grant to Alfred Heath for a literature review to identify resources to support health services and junior doctors. JMO Forum discussions have identified some common stressors for junior doctors and we are currently investigating a workshop before or within the first few weeks of internship to discuss strategies for managing the transition from medical student to intern. Communication with doctors in training and other stakeholders has been enhanced through development of a social media presence (LinkedIn) and via the JMO Forum Facebook page.

Discontinuation of funding for the Confederation of Postgraduate Medical Education Councils (CPMEC) and its annual Prevocational Medical Education Forum in the 2014-2015 Commonwealth budget is a major challenge for Australian prevocational medical training. PMCV is working with CPMEC and other Postgraduate Medical Councils on strategies to maintain a voice for prevocational trainees and to support continuation of the Forum.

### Strategic Plan 2013-2015

PMCV is entering the final year of the 2013-2015 Strategic Plan. Progress against the plan continues to be monitored by the Board and targets are included in the annual work plans of our subcommittees; Accreditation, Education, International Medical Graduates, Workforce and HMO Managers.

### Governance

PMCV's Board met four times during the year. An Executive Committee (Chair, Deputy Chair, Treasurer and Chief Executive Officer) met between Board meetings as required. The Board's Nomination Committee oversaw the election of two Board member positions, representing medical administrators and emergency medicine physicians. Dr Mark Garwood and Associate Professor Jonathan Knott were appointed for further 3 year terms at the 2013 Annual General Meeting. The Board commenced the election process for two other elected Board positions, representing general practitioners (to replace Dr Laurie Warfe) and recent graduates (to replace Dr Meghan Cooney). The Nomination Committee also oversaw the appointment of Dr Joanne Brown as Medical Advisor following the resignation of Dr Susannah Ahern.

A report of each Board meeting is now included in our e-newsletter and on PMCV's website.

### Financial and Risk Management

The Board's Finance and Risk Committee, chaired by Dr John (Jack) Best, also met 4 times prior to each Board meeting. The Board approved Dr Mark Garwood's appointment as Chair to replace Dr Best upon completion of his term as Ministerial nominee.

There has been some diversification of Council's revenue base beyond Department of Health and the Medical Board of Australia. Funding has been supplemented by expansion of educational programs (an orientation program for international medical graduates - Hitting the Ground Running and Teaching on the Run programs for prevocational trainees and supervisors/educators) and by a new computer matching service for Australian and New Zealand College of Radiologists trainees in Victoria. Council is exploring additional funding sources.

Financial statements presented later in this report demonstrate that Council achieved a small 2013/2014 surplus in a challenging funding environment. The surplus from ordinary activities was \$30,495, primarily due to interest income from reserves. The Finance and Risk Committee has developed a cash flow model, which includes forecasts for 2014-2016.

At the time of writing discussion with the Department of Health on the 2014-2015 service plan were underway.

Based on the Finance and Risk Committee's recommendation, the Board approved the reappointment of Accru Melbourne to provide external audit services for 2013-14.

## CHAIR'S REPORT FOR THE YEAR ENDED 30 JUNE 2013

### Events Subsequent to the end of the reporting period

In the interval between the end of the financial year and the date of this report there has not been any item, transaction or event of a material nature likely, in the opinion of the Board, to significantly affect the operations of Council, the results of its operations, or the state of affairs of the Council in subsequent financial years.

### Indemnification of Officers and Auditors

The Council has paid premiums to insure each Board and subcommittee member against liabilities, costs and expenses incurred by them in defending any legal proceedings arising from acting in their capacity as a member of Council, other than that involving a wilful breach of duty in relation to Council.

During or since the financial year the Council has not indemnified or made any agreement to indemnify an officer or auditor of the Council or any related body corporate against a liability incurred by an officer or auditor. The Council has not paid or agreed to pay a premium for a contract insuring a liability incurred by an officer or auditor.

### Accreditation

The Accreditation subcommittee had a very busy year. New Australian Medical Council (AMC) national accreditation standards were implemented in Victorian hospitals. Four new Rural Community Intern Training programs were accredited. A comprehensive submission to the AMC, requesting initial approval as an intern accreditation authority in Victoria, was successful. It is anticipated that PMCV will undergo full accreditation in 2015, including a site visit by an AMC accreditation team. I would like to acknowledge the hard work of the subcommittee, led by Professor Rick McLean and supported by Ms Monique Le Sueur, our Accreditation Manager, and Dr Susannah Ahern, the PMCV Medical Director until December 2013.

### Computer Matching

The Council administers a range of medical (intern, PGY2, basic physician trainee, radiology registrar) and non-medical (nursing and midwifery graduate year, medical radiations internship) computer matches on behalf of the Victorian Department of Health. The matching service has expanded this year, through addition of a new radiology trainee match and through growth in the numbers of training positions and applicants.

Computer matches and their underlying IT support systems are closely monitored by the Finance and Risk Management Committee through PMCV's risk management framework.

### Appreciation

I would like to take this opportunity to thank the Board, subcommittee chairs and members, accreditation teams, the Chief Executive Officer and all PMCV staff for their hard work, commitment and continuing support during the year. I would also like to acknowledge the many volunteers and doctors in training who have assisted and advised the Council; our activities are heavily dependent on your generous contributions.

Finally I would like to record Council's gratitude to three individuals who left the organisation during the year: Professor James Angus for his 10 year contribution as a Board member, including three years as Chair; Dr John (Jack) Best for his contribution as Ministerial nominee and Treasurer, and Dr Susannah Ahern, who made very significant contributions to a broad range of Council activities as Medical Director.



Professor Brendan Crotty  
Chair, PMCV Board  
Melbourne  
2 October 2014

## STATEMENT BY MEMBERS OF THE BOARD FOR THE YEAR ENDED 30 JUNE 2014

The Board has determined that the association is not a reporting entity and that this special purpose financial report should be prepared in accordance with the accounting policies outlined in Note 1 to the financial statements.

We state, that in our opinion, the financial report as set out on pages 37-48:

1. Presents a true and fair view of the financial position of Postgraduate Medical Council of Victoria Inc. as at 30 June 2014 and its performance for the year ended on that date.
2. At the date of this statement, there are reasonable grounds to believe that Postgraduate Medical Council of Victoria Inc. will be able to pay its debts as and when they fall due.

This statement is signed for and on behalf of the Board by:



Professor Brendan Crotty  
Chairman, PMCV  
2 October 2014  
Melbourne



Dr Mark Garwood  
Treasurer, PMCV  
2 October 2014  
Melbourne

## STATEMENT OF COMPREHENSIVE INCOME FOR YEAR ENDED 30 JUNE 2014

	NOTE	2014 \$	2013 \$
<b>INCOME</b>	2	1,681,493	1,342,535
<b>EXPENDITURE</b>			
Advertising and communication expenses		(2,840)	(2,493)
Catering		(48,953)	(31,769)
Chair session expenses		(2,006)	(12,329)
Consultant fees		(15,112)	(34,416)
Contractor expenses		(44,281)	(38,242)
Examiner fees		(72,236)	(47,300)
Payroll expenses		(601,617)	(755,300)
Rent expenses		(38,722)	(44,445)
Scholarship expenses		(574,334)	(150,000)
Travel expenses		(32,954)	(24,275)
Other expenses		(217,942)	(164,325)
<b>Total expenses</b>		(1,650,997)	(1,304,894)
<b>Net Surplus</b>	3	30,496	37,641
<b>TOTAL COMPREHENSIVE INCOME FOR THE FINANCIAL YEAR</b>		<b>30,496</b>	<b>37,641</b>

The accompanying notes form part of this financial report.

## STATEMENT OF FINANCIAL POSITION AS AT 30 JUNE 2014

	NOTE	2014 \$	2013 \$
<b>CURRENT ASSETS</b>			
Cash and cash equivalents	4	1,716,719	2,160,900
Trade & other receivables	5	43,929	26,145
Prepayments		-	7,768
<b>TOTAL CURRENT ASSETS</b>		<b>1,760,648</b>	<b>2,194,813</b>
<b>NON CURRENT ASSETS</b>			
Property, plant & equipment	6	27,503	31,161
<b>TOTAL NON CURRENT ASSETS</b>		<b>27,503</b>	<b>31,161</b>
<b>TOTAL ASSETS</b>		<b>1,788,151</b>	<b>2,225,974</b>
<b>CURRENT LIABILITIES</b>			
Trade & other payables	7	50,020	136,900
Accrual for unexpended grants	8	257,687	629,305
Employee provisions	9	84,384	136,698
Other provisions	10	60,153	17,660
<b>TOTAL CURRENT LIABILITIES</b>		<b>452,244</b>	<b>920,563</b>
<b>TOTAL LIABILITIES</b>		<b>452,244</b>	<b>920,563</b>
<b>NET ASSETS</b>		<b>1,335,907</b>	<b>1,305,411</b>
<b>REPRESENTED BY:</b>			
<b>ACCUMULATED FUNDS</b>			
Retained Earnings		960,687	930,191
General reserve	11	375,220	375,220
<b>TOTAL ACCUMULATED FUNDS</b>		<b>1,335,907</b>	<b>1,305,411</b>

The accompanying notes form part of this financial report.



## STATEMENT OF CHANGES IN EQUITY FOR YEAR ENDED 30 JUNE 2014

	RETAINED EARNINGS	GENERAL RESERVE	TOTAL
	\$	\$	\$
BALANCE AT 1 JULY 2012	892,550	375,220	1,267,770
Surplus attributable to members	37,641	-	37,641
BALANCE AT 30 JUNE 2013	930,191	375,220	1,305,411
Surplus attributable to members	30,496	-	30,496
<b>BALANCE AT 30 JUNE 2014</b>	<b>960,687</b>	<b>375,220</b>	<b>1,335,907</b>

The accompanying notes form part of this financial report.

## STATEMENT OF CASH FLOWS FOR YEAR ENDED 30 JUNE 2014

	NOTE	2014 \$	2013 \$
<b>CASH FLOWS FROM OPERATING ACTIVITIES</b>			
Cash receipts from customers, members and grants		1,393,662	1,658,054
Interest received		46,545	57,083
Cash payments to suppliers and employees		(1,871,659)	(1,340,824)
Interest paid		-	-
<b>Net cash provided by operating activities</b>	12 (ii)	<b>431,452</b>	<b>374,313</b>
<b>CASH FLOWS FROM INVESTING ACTIVITIES</b>			
Payments for property, plant and equipment		(12,729)	(6,411)
<b>Net cash used by investing activities</b>		<b>(12,729)</b>	<b>(6,411)</b>
Net increase/(decrease) in cash held		444,181	367,902
Cash at the beginning of period		2,160,900	1,792,998
<b>Cash at the end of the financial year</b>	12 (i)	<b>1,716,719</b>	<b>2,160,900</b>

The accompanying notes form part of this financial report.

## NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2014

### 1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

The financial report is for Postgraduate Medical Council of Victoria Inc as an individual entity. Postgraduate Medical Council of Victoria Inc is an association incorporated in Victoria under the *Associations Incorporation Reform Act 2012* (Victoria).

This financial report is a special purpose financial report prepared in order to satisfy the financial reporting requirements of the *Associations Incorporation Reform Act 2012* (Victoria). The Board has determined that the association is not a reporting entity.

The financial report has been prepared on an accruals basis and is based on historic costs and does not take into account changing money values or, except where specifically stated, current valuations of non-current assets.

The following significant accounting policies, which are consistent with the previous period unless otherwise stated, have been adopted in the preparation of this financial report.

#### a. Revenue Recognition

Grant Revenue is recognised in the Statement of Comprehensive Income when it is controlled. When there are conditions attached to grant revenue relating to the use of those grants for specific purposes it is recognised in the Statement of Financial Position as a liability until such conditions are met or services provided. Interest revenue is recognised on a proportional basis taking into account the interest rates applicable to the financial assets. Other revenue is recognised when the right to receive the revenue has been established. In accordance to the constitution of the Association, no membership fees or subscriptions are payable by members. All revenue is stated net of the amount of goods and services tax (GST).

#### Income Tax

No provision for income tax has been raised, as the entity is exempt from income tax under Division 50 of the *Income Tax Assessment Act 1997*.

#### c. Cash and cash equivalents

Cash and cash equivalents include cash on hand, deposits held at-call with banks, other short-term highly liquid investments with original maturities of three months or less, and bank overdrafts.

#### d. Goods and Services Tax

Revenues, expenses and assets are recognised net of the amount of GST, except where the amount of GST incurred is not recoverable from the Australian Tax Office. In these circumstances the GST is recognised as part of the cost of acquisition of the asset or as part of an item of the expense. Receivables and payables in the statement of financial position are shown inclusive of GST.

Cash flows are presented in the statement of cash flows on a gross basis, except for the GST component of investing and financing activities, which are disclosed as operating cash flows.

#### e. Unexpended Grants

The entity receives grant monies to fund projects either for contracted periods of time or for specific projects irrespective of the period of time required to complete those projects. It is the policy of the entity to treat grants monies as unexpended grants in the statement of financial position where the entity is contractually obliged to provide the services in a subsequent financial period to when the grant is received or in the case of specific project grants where the project has not been completed.

#### f. Property Plant & Equipment

Leasehold improvements and office equipment are carried at cost less, where applicable, any accumulated depreciation.

The depreciable amount of all fixed assets are depreciated on a diminishing value basis over the useful lives of the assets to the association commencing from the time the asset is held ready for use.

The depreciation rates used for each class of depreciable asset are:

Fixed Asset Class	Depreciation Rate
Computers & equipment	37.5%
Office furniture & equipment	5-25%

#### g. Employee Entitlements

Provision is made for the entity's liability for employee benefits arising from services rendered by employees to reporting date. Employee benefits expected to be settled within one year together with benefits arising from wages, salaries and annual leave which may be settled after one year, have been measured at the amounts expected to be paid when the liability is settled plus related on costs. Other employee benefits payable later than one year have been measured at the net present value.

Contributions are made by the entity to an employee superannuation fund and are charged as expenses when incurred.

#### h. Leases

Lease payments for operating leases, where substantially all the risks and benefits remain with the lessor, are charged as expenses in the periods in which they are incurred.

## NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2014

	2014 \$	2013 \$
<b>2. REVENUE</b>		
<b>Revenues</b>		
Grant Income DoHA	1,408,589	1,088,615
Accreditation Income – Medical Board	76,614	120,200
IMG's Orientation Income	39,077	44,029
Interest Income	42,909	57,083
Other Income	114,304	32,608
	<b>1,681,493</b>	<b>1,342,535</b>
<b>3. NET SURPLUS</b>		
Net surplus has been arrived at after charging / (crediting) the following items:		
Audit services	3,800	3,740
Accounting services	19,050	29,075
Depreciation of plant and equipment	9,806	12,097
Movements in provisions for employee entitlements	(52,313)	18,719
Loss on disposal of assets	6,581	-
Provision for office relocation	43,000	-
<b>4. CASH AND CASH EQUIVALENTS</b>		
Cash at bank – Cheque account	27,051	348,738
Cash at bank – V2 account	680,664	1,045,520
Term Deposit	1,009,004	766,642
	<b>1,716,719</b>	<b>2,160,900</b>
<b>5. TRADE &amp; OTHER RECEIVABLES</b>		
Sundry debtors	27,786	19,287
Interest receivable	3,222	6,858
GST Receivable	12,921	-
	<b>43,929</b>	<b>26,145</b>
<b>6. PROPERTY, PLANT &amp; EQUIPMENT</b>		
Computers & equipment		
At cost	51,943	72,616
Less accumulated depreciation	(35,417)	(55,756)
	<b>16,526</b>	<b>16,860</b>
Office furniture & equipment		
At cost	47,410	47,410
Less accumulated depreciation	(36,433)	(33,109)
	<b>10,977</b>	<b>14,301</b>
<b>Total property, plant &amp; equipment</b>	<b>27,503</b>	<b>31,161</b>

## NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2014

### 6. PROPERTY, PLANT & EQUIPMENT (CONTINUED)

*Movements in carrying amounts current year*

	COMPUTER EQUIPMENT \$	OFFICE FURNITURE \$	TOTAL \$
Balance 1 July 2012	18,307	18,540	(12,097)
Additions	6,411	-	6,411
Disposals	-	-	-
Depreciation expense	(7,858)	(4,239)	(15,802)
Carrying amounts 30 June 2013	16,860	14,301	31,161

*Movements in carrying amounts prior year*

	COMPUTER EQUIPMENT \$	OFFICE FURNITURE \$	TOTAL \$
Balance 1 July 2013	16,860	14,301	31,161
Additions	12,729	-	12,729
Disposals	(6,581)	-	(6,581)
Depreciation expense	(6,482)	(3,324)	(9,806)
Carrying amounts 30 June 2014	16,526	10,977	27,503

	2014 \$	2013 \$
<b>7. TRADE &amp; OTHER PAYABLES</b>		
GST payable	-	85,338
Accruals	4,507	8,449
PAYG withholding payable	7,899	21,155
Sundry Creditors	37,614	21,958
	50,020	136,900
<b>8. ACCRUAL FOR UNEXPENDED GRANTS</b>		
Accrual for unexpended grants	257,687	629,305
	257,687	629,305
<b>9. EMPLOYEE PROVISIONS</b>		
Provision for annual & conference leave	33,340	91,983
Provision for long service leave	51,044	44,715
	84,384	136,698

**NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2014**

	2014 \$	2013 \$
<b>10. OTHER PROVISIONS</b>		
Provision for Video Conferencing Services	17,153	17,660
Provision for Office Relocation	43,000	-
	<u>60,153</u>	<u>17,660</u>
<b>11. GENERAL RESERVE</b>		
Balance at the beginning of the financial year	375,220	375,220
Transfer from retained surplus	-	-
Balance at the end of the financial year	<u>375,220</u>	<u>375,220</u>
<b>12. OPERATING LEASE COMMITMENTS</b>		
Future operating lease rentals not provided for in the financial statements and payable:		
Not later than one year	10,550	18,960
Later than one year but not later than five years	-	-
Total	<u>10,550</u>	<u>18,960</u>

## NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2014

	2014 \$	2013 \$
<b>12. NOTES TO THE STATEMENT OF CASH FLOWS</b>		
<b>(i) Reconciliation of cash</b>		
For the purposes of the Statement of cash flows, cash includes cash on hand and short term deposits with banks or financial institutions.		
Cash at the end of the financial year as shown in the Statement of cash flows is reconciled to the related items in the Statement of financial position as follows:		
Cash at bank and short term deposits	1,716,719	2,160,900
	1,716,719	2,160,900
<b>(ii) Reconciliation of operating profit to net cash provided by operating activities</b>		
Net Surplus	30,496	37,641
Add/(Less) non-cash items:		
Depreciation	9,806	12,097
Loss on disposal of assets	6,581	-
<i>Net cash provided by operating activities before changes in assets and liabilities</i>	46,883	49,738
Changes in assets and liabilities:		
Decrease/(Increase) in debtors	(8,499)	(8,133)
Decrease/(Increase) in prepayments	7,768	11,454
Decrease/(Increase) in interest receivable	3,636	(1,065)
Increase/(Decrease) in other payables	2,400	30,086
Increase/(Decrease) in GST payable	(98,259)	64,713
Increase/(Decrease) in accruals	(3,942)	(10,729)
Increase/(Decrease) in unexpended grants	(371,618)	221,870
Increase/(Decrease) in provision for employee entitlements	(52,314)	18,719
Increase/(Decrease) in other provisions	42,493	(2,340)
<b>Net cash provided by operating activities</b>	<b>(431,452)</b>	<b>374,313</b>

## INDEPENDENT AUDIT REPORT TO THE MEMBERS OF POSTGRADUATE MEDICAL COUNCIL OF VICTORIA INC

### Report on the Financial Report

We have audited the accompanying financial report, being a special purpose financial report, of Postgraduate Medical Council of Victoria Inc., which comprises the statement of financial position as at 30 June 2014 and the statement of comprehensive income, statement of changes in equity and statement of cash flows for the year ended on that date, a summary of significant accounting policies, other explanatory notes and the statement by members of the Board.

#### The Board's Responsibility for the Financial Report

The Board of the association is responsible for the preparation and fair presentation of the financial report, and has determined that the basis of preparation described in Note 1 is appropriate to meet the requirements of the *Associations Incorporation Reform Act 2012* (Victoria) and is appropriate to meet the needs of the members. The Board's responsibilities also include establishing and maintaining internal control relevant to the preparation and fair presentation of the financial report that is free from material misstatement, whether due to fraud or error.

#### Auditor's Responsibility

Our responsibility is to express an opinion on the financial report based on our audit. We have conducted our audit in accordance with Australian Auditing Standards. These Auditing Standards require that we comply with relevant ethical requirements relating to audit engagements and plan and perform the audit to obtain reasonable assurance whether the financial report is free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial report. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial report, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial report in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by the committee, as well as evaluating the overall presentation of the financial report.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

#### Independence

In conducting our audit, we have complied with the independence requirements of Australian professional ethical pronouncements.

#### Auditor's Opinion

In our opinion, the financial report of Postgraduate Medical Council of Victoria Inc. presents a true and fair view of the financial position Postgraduate Medical Council of Victoria Inc. as of 30 June 2014 and of its financial performance for the year then ended in accordance with the accounting policies described in Note 1 to the financial statements, and the *Associations Incorporation Reform Act 2012* (Victoria).

#### Basis of Accounting and Restriction on Distribution

Without modifying our opinion, we draw attention to Note 1 to the financial report, which describes the basis of accounting. The financial report has been prepared to assist Postgraduate Medical Council of Victoria Inc. to meet the requirements of the *Associations Incorporation Reform Act 2012* (Victoria). As a result, the financial report may not be suitable for another purpose.



ACCRU MELBOURNE  
Chartered Accountants  
123 Camberwell Rd  
HAWTHORN EAST VIC 3123



R A LANE  
Partner

30 October 2014



## DISCLAIMER

The Revenue and Expense Statement is in accordance with the books and records of Postgraduate Medical Council of Victoria Inc. which have been subject to the auditing procedures applied in our statutory audit for the year ended 30 June 2014. It will be appreciated that our statutory audit did not cover all details of the additional financial information. Accordingly, we do not express an opinion on such financial information and no warranty of accuracy or reliability is given.

In accordance with our firm policy, we advise that neither the Firm nor any member or employee of the Firm undertakes responsibility arising in any way whatsoever to any person (other than the council) in respect of such information, including any errors or omissions therein, arising through negligence or otherwise however caused.



ACCRU MELBOURNE  
Chartered Accountants



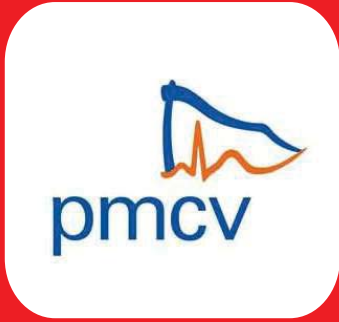
R A LANE  
Partner

30 October 2014

## REVENUE AND EXPENSE STATEMENT FOR THE FINANCIAL YEAR ENDED 30 JUNE 2014

To be read in conjunction with the accompanying disclaimer

		\$	2014	\$	2013
<b>Revenue</b>	Grant Income		1,408,589		1,088,615
	Accreditation Income		76,614		120,200
	IMGs Orientation		39,077		44,029
	Interest Income		42,909		57,083
	Other Income		114,304		32,608
	<b>Total Revenue</b>		<b>1,681,493</b>		<b>1,342,535</b>
<b>Expenses</b>	Audit Fees		3,800		3,740
	Accounting Fees		19,050		29,075
	Administration Expenses		-		(7,137)
	Advertising Expense		2,840		2,493
	Bank Charges		1,287		1,134
	Catering Expense		48,953		31,769
	Chair Session Fees		2,006		12,329
	Computer Maintenance and Support		26,385		14,519
	Conference Expenses		716		7,595
	Consultancy Fees		15,112		34,416
	Contractor Fees		44,281		38,242
	Depreciation Expense		9,806		12,097
	Fees – CPMEC		6,300		9,150
	Insurance Expense		7,768		8,068
	Legal costs		5,313		4,365
	Loss on disposal of assets		6,581		-
	Materials Development		15,563		11,804
	Payroll Tax		4,507		8,449
	Photocopy Expenses		9,043		7,942
	Postage and Courier Expense		2,456		2,929
	Printing and Publications		21,692		19,903
	Provision for Annual & Conference Leave		(58,643)		19,759
	Provision for Long Service Leave		6,329		(1,040)
	Provision for Office Relocation		43,000		-
	Participant/Team Leader fee		72,236		47,300
	Rent Expense		38,722		44,445
	Repairs & Maintenance		99		567
	Salaries and Wages		558,058		633,792
	Scholarship Expenses		574,334		150,000
	Staff Development		12,170		10,812
	Stationery and Supplies		2,489		3,178
	Sundry Expense		3,827		1,065
	Subscriptions		2,551		2,439
	Superannuation Contributions		84,126		87,985
	Telephone/Internet Expense		18,046		21,080
	Travel Expenses		32,954		24,275
	Workcover Expense		7,240		6,355
	<b>Total Expenses</b>		<b>1,650,997</b>		<b>1,304,894</b>
	<b>Operating Surplus</b>		<b>30,496</b>		<b>37,641</b>



POSTGRADUATE MEDICAL COUNCIL OF VICTORIA INC.  
ABN 11 296 600 377

PO Box 2900  
St. Vincent's Hospital  
41 Victoria Parade  
FITZROY Victoria 3065  
Phone: +61 3 9419 1217  
Facsimile: +61 3 9419 1261  
Email: [pmcv@pmcv.com.au](mailto:pmcv@pmcv.com.au)  
Website: [www.pmcv.com.au](http://www.pmcv.com.au)