The NSW JMO Forum held its second meeting on Friday 20 May at CETI headquarters in Gladesville with over 30 JMO representatives from around the state.

**Australasian Junior Medical Officers Committee**

This is a committee of all chairs of JMO Forums from each Australian state and New Zealand. The face-to-face meeting was held in Melbourne on Saturday 9 April. This meeting is a chance for JMO Forum Representatives to find out the projects and problems that JMOs in other places are working on and to share information.

It became quickly evident that the key issue facing us all Australia wide will be the bottleneck of advanced training. The medical student ‘tsunami’ (with double the number of medical school graduates in 2014 from 2006) has in most places been managed via expansion of new and innovative internship places in each state and a strong focus on assessing the capacity and effectiveness of supervision in the workplace.

However, as yet there is no real knowledge of how the specialist colleges will respond to the increase in residents applying for advanced training places. Health Workforce Australia is putting together a national training plan with the idea that Australia will be self-sufficient in its workforce by 2025, but at the moment there is no concrete strategy or coordinated national response as to how this will happen. I would encourage those of you who have chosen a specialty to contact the relevant college and find out what their plans are. Bear in mind that in NSW we constitute one third of all JMOs across Australia and are likely to find the competition to be keenest.

The ANZJMOC also discussed plans for the upcoming 16th Australasian Prevocational Medical Education Forum in Auckland, New Zealand. The Forum will be held on 6–9 November 2011 at SkyCity. The Forum began in 1995 and is organised by the Confederation of Postgraduate Medical Education Councils (CPMEC) in Australasia. This is the first time the Forum is being held in New Zealand.

Last year in Melbourne many NSW interns and residents attended, enjoying the talks, workgroups and of course the social events, with some even sponsored to attend by their DPET/JMO Unit. Please check out the website and enquire at your hospital about attending if you are interested. This year’s theme is ‘Bridging the Gap’ and will be looking at the issues surrounding completion of undergraduate training and progression to vocational training.

For further information, see: [www.prevocforum.org.nz](http://www.prevocforum.org.nz)

**Acute Care Taskforce Safe Clinical Handover project**

An audit and focus group occurred in most hospitals at the end of May 2011. This audit is part of the follow up by Health Services Performance Improvement Branch, NSW Health, in evaluating last year’s project to improve shift-to-shift handover between JMOs. The JMO Forum was asked to implement this evaluation on behalf of CETI and system-wide results will be reported at an aggregated system level and provided back to Local Health Networks at a Network level. The elements which were identified as necessary for effective handover were identified as:

1. A communication framework for JMOs (i.e. the ISBAR format)
2. Senior leadership (Consultant or senior registrar)
3. 24/7 shift handover (morning, afternoon or evening).
We know that handover is done variably around the state and there is always room for improvement.

For more information about JMO Handover, the website below has some information sheets which you can read and discuss at your hospital:

http://www.archi.net.au/resources/safety/clinical/nsw-handover/jmo

Team Health

Many of you will have heard the phrases ‘multidisciplinary team’ or ‘interprofessionalism’ being thrown about and in practice it is often difficult to work this way in the hospital setting. Team Health is a new CETI program with the broad aim of improving teamwork, communication and collaboration for safer patient-centered care and better staff experiences.

Two speakers from Team Health presented examples of evidence that interprofessionalism works and invited discussion around the issues in this area. JMOs had the opportunity to provide examples from their work and medical school experiences, critically examine some of the ideas presented in this program consultation and provide feedback on the credibility, usefulness and relevance of these program directions.

Information included a brief overview of the international literature and the Australian context for this program. Some of the benefits demonstrated were:

- increased staff motivation, well-being and retention
- decrease in staff turnover
- increased patient and carer satisfaction
- increased patient safety, and
- reductions in patient mortality and critical incidents.

Team Health’s suggested programs include such things as the development of e-learning packages that provide general information about the roles and responsibilities of other health professionals in particular settings and overviews of relevant policies (the Forum response was not in favour of this idea); simulated case scenarios with structured de-briefing; the use of facilitators skilled in clinical team building and debriefing, and a policy arm that seeks to align new policies with a team-based approach.

As you can imagine there was volatile debate over this program. JMO Forum members were concerned as to how these extra educational interventions would fit with an already busy workload and whether they would add any value. Others had concerns about the development of communication-based education strategies compared with the need for more applied clinical training within the medical school curriculum. Some critical discussion was had about how team-based approaches to patient care can fit with issues of medical officer responsibility for patient well-being.

Some ideas for Team Health stemmed from positive experiences JMOs have had with interdisciplinary teams or through interprofessional education. These included keeping the curriculum applied and clinical; job shadowing for a day and clinical placement activities (i.e. nurses shadowing doctors, doctors shadowing physiotherapists); occasions to learn specific clinical skills through allied health staff (e.g. plastering from physiotherapists); and the provision of role descriptions of allied health staff during Orientation Week.

Team Health was keen to follow-up with the JMO Forum to ensure that its programs are both credible and useful. If you have any
feedback you would like passed on please email Lucy Cho or Craig Bingham.

Lucy Cho: lucy.cho@sesiahs.health.nsw.gov.au
Craig Bingham: cbingham@ceti.nsw.gov.au

The NSW Prevocational Medical Education Forum

Prevocational Program Coordinator Craig Bingham presented an outline of plans for this meeting, which will be held on 11-12 August 2011. The meeting includes an opportunity for the JMO Forum to present to JMO Managers, DPETs, senior clinicians and administrators.

Assessment

Mr Craig Bingham, Dr Ros Crampton, Chair of the Prevocational Training Council, and Dr James Edwards, Director of Prevocational Education and Training at Royal Prince Alfred Hospital and member of the Prevocational Training Council, presented two options for revised prevocational assessment forms. The JMO Forum was split into two groups to test two different forms (by pretending to assess a peer) and then asked to discuss the pros and cons of each form.

CETI has long recognised the limited usefulness of the ‘below, at or above’ rating method of assessment and there has been a lot of hard work put into creating a better, more informative assessment tool, which would hopefully encourage a better dialogue between JMOs and their supervisors and identify strengths and weaknesses with better accuracy. The new forms will be piloted at RPA and more pilot sites are needed. If you think your DPET or hospital would be interested in taking part in this, please discuss this at your GCTC so that they can contact Craig Bingham at CETI.

Craig Bingham: cbingham@ceti.nsw.gov.au

Drug and Alcohol terms

In line with the need for more innovative JMO placements to keep up with the incoming number of interns, Professor Bob Batey, Chair of the Quality in Treatment Advisory Committee of the Mental Health and Drug and Alcohol Office, presented on addiction medicine and the possibilities for its inclusion as a rotation. Currently there are a few addiction medicine terms, but the possibilities for combined terms (eg, with Gastroenterology, Neurology, General Practice, Psychiatry) were discussed.

Professor Batey’s feeling was that drug and alcohol use is an issue for many of the patients we see, in any setting, and that JMO experience and understanding of dealing with the clinical issues that arise is often limited.

Working Groups

Supervision Portfolio

The 2010/2011 supervision survey of JMO supervision has closed in mid-May with over 400 replies from JMOs across the state. Thank you to all the JMOs who were part of this survey. The JMO Forum representatives are crunching the data. The results of this brief survey are expected to be the foundation of concrete benefits for NSW JMOs. We will keep you updated formally via this newsletter once the results are available.

Didn’t get a chance to contribute? Don’t worry; the JMO Forum will be conducting a follow-up survey again later in the year. Keep an eye on your inbox for details

Got Any Comments? Interested in JMO supervision?

Contact: Dr Rahil Nagpal nagpal.rahil@gmail.com

Careers Portfolio

Careers Portfolio members discussing the changes to The Doctors Compass. Left to right: Dr Melissa Davidson, Dr Aditya Vyas, Dr Erin Stalenberg and Dr Arina Bhullar.
The Careers group were consulted by CETI for input into the new-look Doctor’s Compass, which has been reworked and republished. The new guide to internship will be distributed to delegates at the AMSA Conference, and made available to new interns starting in 2012.

Meanwhile, work on the Doctor’s GPS, a follow-up guide to navigating specialty training, has been going strong and the Careers Group are aiming to have it ready for CETI publication by the end of the year. In addition, Careers is in negotiations with the CEO of the Hunter Postgraduate Medical Institute in order to gain access to the HPMI online Handbook for all JMOs – watch this space!

Contact: Dr Nicole Hersch nicapri@hotmail.com

Covers from previous and new The Doctor’s Compass publications.

Education Portfolio

The Education Portfolio has had a highly productive and motivated period since the first JMO Forum report of 2011. As prefaced then, our major project for the year is a user friendly and effective Clinical Skills Audit Tool that not only aligns with the Australian Curriculum Framework for Junior Doctors (ACF) but also assists in learning the required clinical skills for further training; a preamble to streaming into our preferred specialties.

The relevant clinical skills have been extracted from the ACF and various College documents, and the structure of the Audit Tool is already in place. We are currently working on an Excel-based application that we hope to roll out to our colleagues for appraisal and critical feedback, an important and achievable result for this year. Our goal is to develop a sophisticated and comprehensive e-resource that encourages a culture of self-audit (increasingly important in today’s medical environment), provides a valuable record of acquiring mandatory and more advanced clinical skills, and adds to a record of personal achievement (sure to impress at the all important interviews). An iPhone/Android app that can sync to an online database remains the ultimate dream, a possibility to investigate for the future.

On the topic of audits, we’re currently conducting our own: into the implementation, uptake and JMO response to the ACF-based unified state wide lecture series, which the Education Portfolio worked tirelessly to develop and disseminate across NSW last year. If you have any feedback or suggestions for us please contact your Network JMO Rep or send us your thoughts directly.

Contact: Dr Vikas Gupta vikasgup@hotmail.com

Information Technology

Goals for 2011:

1. Negotiate with Health Support Services (NSW Health IT people) to get JMO input into IT planning.

The IT Portfolio is in touch with HSS and will keep the JMO Forum and NSW JMOs informed of developments

2. Electronic Whiteboard/Task tracker - research and promote the use of a task tracker in every hospital in NSW.

Discussions are underway with Liverpool and St Vincent’s as well as Health Support Services and the IT group is looking into ways in which we can advocate for uptake of a task tracker state wide.

3. Survey and promote useful web-based and smartphone tools/apps for JMOs.

If you have any apps or software that you find helpful on a daily basis – let us know. We are trying to compile a list of helpful

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programs/tools that can assist JMOs in their work and study.

Contact: Dr Gabriel James
gabatronic@gmail.com

**Accreditation**

This group continues to review current accreditation standards. They are also looking into the issues surrounding network as opposed to hospital accreditation and the issues surrounding the differing needs of AMC graduates within hospitals and the support they receive.

Contact: Dr Negin Sedaghat
negin.sedaghat@gmail.com

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**Upcoming accreditation visits by CETI for 2011**

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<thead>
<tr>
<th>Date</th>
<th>Hospital</th>
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<tbody>
<tr>
<td>20 July</td>
<td>War Memorial Hospital</td>
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<td>26-27 July</td>
<td>Tamworth Hospital</td>
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<td>3-4 August</td>
<td>St Vincent’s Hospital</td>
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<td>29 August</td>
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<td>17-18 November</td>
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<td>Royal North Shore Hospital (unconfirmed)</td>
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<td>7 December</td>
<td>The Children’s Hospital Westmead</td>
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<tr>
<td>13-14 December</td>
<td>Manly Hospital (Unconfirmed)</td>
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