

# Northern TerritoryJunior Doctor of the Year Award

**Nomination Form**

Each year the Confederation of Postgraduate Medical Education Councils (CPMEC) recognises junior doctors and clinical educators across Australia and New Zealand who have made valuable contributions to prevocational medical education and training.

The awards have a two tiered structure; jurisdictional winners are selected for the awards by each Postgraduate Medical Council (PMC) or equivalent and the overall winner for each award is then selected by a small judging panel. CPMEC will only accept **one** nomination for each Award from each PMC for that year.

Recipients are invited to attend the 2022 Australian and New Zealand Prevocational Medical Education Forum (ANZPMEF) hosted by the South Australian Medical Education and Training in Adelaide in November, where the national award will be presented.

Nominations are being sought for the **2022 NT Junior Doctor of the Year Award**, which has been presented annually since 2008. The award recognises junior doctors across the NT who have made significant contributions to improving prevocational medical education and training.

**The recipient of this award will be a junior doctor with satisfactory clinical performance[[1]](#endnote-1)** **who fulfils the principal criteria which can be demonstrated by at least one additional criteria listed below:**

**Principal Criteria**

1. Made a significant contribution to education and training as a prevocational trainee in their workplace settings (hospital, community placements etc.)

**Additional Criteria**

1. Demonstrated evidence of special contributions to NT prevocational education and training such as research, project work, publications, posters, etc. These may also include presentations to the International, National and State conferences; **and/or**
2. Made a significant contribution to the activities of a PMC, or any other organisation involved in the education and training of junior doctors in the NT; **and/or**
3. Evidence of improving opportunities for education and training in rural health (particularly in the NT); **and/or**
4. Evidence of improving access to quality healthcare for Aboriginal communities; **and/or**
5. Innovative use of technology to promote and support Junior Medical Officer health and wellbeing; **and/or**
6. Demonstrates commitment to the NT; **and/or**
7. Any other relevant information you wish to include.

**DETAILS OF NOMINEE\*\***

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| **FULL NAME (family name in capitals and underlined)** |  |
| **ADDRESS** |  |
| **POSITION** |  |
| **CURRENT ORGANISATION** |  |
| **YEAR OF INTERNSHIP/TRAINING** |  |
| **CONTACT NUMBER** |  |
| **EMAIL** |  |
| **PREVIOUS HONOURS AND/OR AWARDS** |  |

\*\*Please note the nominee should be a **PGY1 or PGY2 trainee**. PGY3 trainees may also be nominated but their contributions must be restricted to their contributions as PGY1 & PGY2 trainees.\*\*

**DETAILS OF PERSON MAKING THE NOMINATION**

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| **FULL NAME (family name in capitals and underlined)** |  |
| **ADDRESS** |  |
| **POSITION** |  |
| **CURRENT ORGANISATION** |  |
| **CONTACT NUMBER** |  |
| **EMAIL** |  |

**NOTES:**

* **Please ensure that nominee consent has been obtained prior to submission.**
* **All nominations will be checked by PMAS staff to confirm the nominee’s satisfactory clinical performance.**

**Please provide a description addressing the nominee’s suitability for the principal criteria and address a minimum of one of the listed additional criteria to provide supporting evidence of the nominee’s suitability.**

1. **Made a significant contribution to education and training as a prevocational trainee in their workplace settings (hospital, community placements, etc.)[[2]](#footnote-1)**

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1. **Demonstrated evidence of special contributions to NT prevocational education and training such as research, project work, publications, posters, etc. These may also include presentations to the International, National and State conferences.[[3]](#endnote-2)**

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1. **Made a significant contribution to the activities of a PMC, or any other organisation involved in the education and training of junior doctors in the NT.[[4]](#endnote-3)**

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1. **Evidence of improving opportunities for education and training in rural health (particularly in the NT).[[5]](#endnote-4)**

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1. **Evidence of improving access to quality healthcare for Aboriginal communities.[[6]](#endnote-5)**

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1. **Innovative use of technology to promote and support Junior Medical Officer Health and wellbeing.[[7]](#endnote-6)**

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1. **Demonstrates commitment to the NT.[[8]](#endnote-7)**

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1. **Any other relevant information you wish to include[[9]](#endnote-8).**

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| **Health Service MEO/DCT Name:****Contact Number:** |

**Nominations should be marked CONFIDENTIAL and forwarded by email to:** METC.THS@nt.gov.au  **with the email subject:** JMO Award – name of nominee

**NOTES TO GUIDE COMPLETION OF THE NOMINATION FORM**

1. Only junior doctors with **satisfactory clinical performance** and who fulfil the principal criteria and a minimum of one of the listed additional criteria should be nominated. A nomination must be **endorsed** by a Director of Prevocational Education and Training, or similar title, to ensure that he nominee has adequately met their clinical responsibilities and to avoid a potential, although highly unlikely, situation where this might not be the case.

Narrative addressing the **principal criteria** should be a brief description of how the nominee adequately fulfils this criteria. Further narrative under the headings, addressing a minimum of one additional criteria should provide detailed evidence to support the nominee’s suitability to meet the principal criteria. [↑](#endnote-ref-1)
2. [↑](#footnote-ref-1)
3. In this section highlight involvement in projects at state and national levels (e.g. Australasian Junior Medical Officers’ Committee; Australian Curriculum Framework for Junior Doctors project, National Intern Allocation Working Party, etc.), and presentations made to the National Prevocational Forum and similar state/territory level, or international events. Participation in relevant professional development activity could also be included here to demonstrate the commitment of the nominee. [↑](#endnote-ref-2)
4. **Significant contribution to the activities of the Postgraduate Medical Council (PMC) or any other organisation**, could include but is not limited to participation as prevocational accreditation surveyors, state JMO Forum organisers, and/or involvement in work of a PMC or other organisations. Reference could also be made to the time commitment of the nominee to these activities. The nominee could be involved in advocacy activities to improve access to quality education and training for prevocational doctors. [↑](#endnote-ref-3)
5. **Demonstrating evidence of improving opportunities for education and training especially in rural and remote areas** could include, but is not limited to development of a new program or initiative to be undertaken by his/her junior doctor colleagues. This could also include documenting cases that become case studies and can be viewed by other JMO’s to assist them with their learning with regards to the rural health environment. It may also include developing, facilitating and delivering medical education and training in rural health. [↑](#endnote-ref-4)
6. Examples of where a JMO has gone the extra mile to support and provide healthcare services to people within their local remote community. [↑](#endnote-ref-5)
7. This may include information around inclusion of JMO’s to social gatherings/meetings via technology to ensure they feel included and supported by peers while at an offsite unit. [↑](#endnote-ref-6)
8. In this section personal and professional investment to the health outcomes of the NT can be included such as career aspirations of practising within the NT including specialization. [↑](#endnote-ref-7)
9. Any other relevant information may include information about leadership roles, recognition received elsewhere (e.g. media coverage) and anything else that makes the nominee stand out from their peers. [↑](#endnote-ref-8)