



NT METC Governance Committee

Junior Medical Officer Forum (JMOf) Report

November 2019

**JUNIOR
MEDICAL OFFICER
FORUM**
NORTHERN TERRITORY

1. JMO Forum Executive / required members update

- Chair and TEHS representative
 - *Dr Hayden Cain*
- Vice-chair and CAHS representative
 - *Dr Claire Chandler*
- Secretariat
 - *Dr Elise O'Connor*
- PGY1/Intern representative
 - *Dr Cassandra Peace*
- PGY2 representative
 - *Dr Sanjay Joseph*
- IMG Representative
 - *Dr Vignesh Palanisamy*
- Medical student representative
 - *Vacant*

2. Current Projects/issues

2.1 Local

2.1.1 Term allocations:

For the 2020 RMO intake Royal Darwin Hospital implemented a new recruiting system involving a set of streamed year allocations. This process is ongoing and currently the NTJMOf is attempting to compile information from RMO's as to any issues that may have arisen. We aim to have this information available for the final 2019 forum report that will be released in January.

2.1.2 Rostering:

With a new EBA being implemented this year the NTJMOf has been attempting to compile data regarding how well this has been adhered to. At the same time we are collecting data to analyse if there are any units or areas in which pay and rostered hours plus unrostered overtime or rostered hours and actual hours do not regularly align.

2.1.3 Resident Guide app:

The NTJMOf is currently looking into a TEHS +/- CAHS personalised resident guide app. This app already exists in multiple other hospitals around Australia and has been shown to be a cost effective tool for improving hospital life and efficiency. Some of the many uses of this app will be to use

it as a centralised location for JMOs to find all unit guides, hospital policies, orientation documents and learning modules. Hospital department heads are currently interested in this idea and we are working with the medical education department in regards to implementation.

3. Future projects/issues

3.1 Local

3.1.1 Streamed Mentorship Program / Career planning:

Career planning can be a daunting prospect for JMO's due to the constantly changing requirements of speciality training colleges. Due to this JMO's can often become lost and isolated in the system unsure how to progress into their desired field. The implementation of streamed years allows JMO's to gain the clinical experience required in their field of choice however there is more to pursuing a speciality than just clinical skill. By assigning JMOs a mentor that has experience in their desired stream it would aid their career progression. This would give all JMOs access to firsthand information such as what it is like to work in that field, how to prepare for specific exams or what courses are worth completing with the added benefit of also improving/monitoring their wellbeing. Sadly we are struggling to find any funding for this and as such have been approaching outside parties for sponsorship.

3.1.2 Education and training

Continual education is a vital component for all doctors regardless of level of training. Recognising this and in line with prevocational accreditation standards Royal Darwin Hospital has recently implemented pager protected weekly teaching for RMOs. However sadly there can often be issues with attendance (that is RMOs being released or being able to attend the weekly sessions) and also finding people (clinicians/registrars/RMOs) to provide/present the teaching for these sessions. The reasons for this are varied, including but not limited to

- some specialties areas having pre-existing internal teaching programs that may cover similar learning outcomes,
- some specialities simply not having sufficient numbers of medical staff to allow the JMO/RMO to attend; and
- RMOs/JMOs being rostered off or working in other locations away from their primary rostered location.

The NTJMOF heavily encourages all specialties across NT Health services to implement and enforce relevant/appropriate regular weekly teaching programs with advanced notice of the set program/curriculum that fits with the team's weekly schedule and covers recommended learning for that term. The NTJMOF would also recommend that all Intern and RMO teaching is recorded through

available technology video/sound/PPT slides and made available online to all RMOs/JMOs who could not attend those sessions.

3.1.3 *Accreditation for all prevocational training positions:*

It is the aim of the NTJMOF/AJMOC that all currently unaccredited NT JMO roles receive accreditation with standards including but not limited to as follows:

- a) Regular interdepartmental and hospital wide teaching
- b) Designated supervisors and mentors who are accessible and qualified
- c) An adequate level of clinical exposure making the rotation meaningful and increasing skills and capacity of RMOs/Unaccredited registrars
- d) Workplace standards ensuring the health and wellbeing of all junior doctors

3.2 *National*

3.2.1 *Career progression*

The NTJMOF has been tasked by the AJMOC to collate data from each state and forum regarding current barriers to training and developing a future plan to tackle the issue of resident medical officer career stagnation and anti-competitive, restrictive and non-transparent selection process implemented by some specialist colleges.

3.2.2 *Growth of NT JMOF and increased involvement with AJMOC:*

To continue to grow the NTJMOF and use our involvement with the AJMOC to improve the education, career progression and welfare of all JMO's in the NT

Next meeting will be held Wednesday 4th of December @ 17:30, all are welcome to attend. Please email hayden.cain@nt.gov.au with any agenda items or queries.

Dr Hayden Cain
Junior Medical Officer Forum Chair
November 2019