



E_dit

The AMA's National Doctors-in-Training Publication

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AMA Council of Doctors-in-Training (AMACDT) - The AMACDT is a national AMA group that represents junior doctors through a hospital and State-based representative structure. The AMACDT held its most recent quarterly formal meeting in Sydney on 7-8 May 2005. Some of the issues discussed at this meeting, along with relevant updates are set out below.

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AMC Puts Spotlight on Trainee Representation

In a welcome move, the Australian Medical Council (AMC) has recognised concerns raised by the AMA Council of Doctors in Training over trainee representation within Medical Colleges. Some Colleges have very good representative structures for trainees, whereas others have been dragging their feet on the issue.

The AMACDT firmly believes that formal trainee representation should be an essential part of College governance structures. Trainees in many Colleges feel disenfranchised from decisions that affect them directly and recent history shows inadequate consultation will often put trainees and their College in direct conflict. Changes to surgical and dermatology training are just two examples that come to mind.

The AMC has now formed a working party to review the standards for College accreditation relating to College mechanisms and processes to support trainees. According to the AMC, a key issue for the working party will be the development of accreditation standards concerning trainee advocacy and trainee involvement in College policy development and decision-making processes.

The AMC has also identified other key issues that have emerged during the accreditation of Colleges to date. The AMC working party will also consider:

- College communication with trainees
- Trainee feedback/evaluation
- Policies for part time and flexible training
- Dispute resolution and mediation
- Mechanisms for appeal

The first meeting of the working party will be in July 2005 and a draft "document" will be prepared by November 2005. The AMACDT has been invited to nominate a junior doctor to participate on the working party, which will be chaired by Professor Roger Allison, Dean, Faculty of Radiation Oncology, Royal Australian and New Zealand College of Radiologists.

Clinical Teaching AMA National Conference Calls for Action

One of the sessions featuring at the May 2005 AMA National Conference in Darwin was Clinical Teaching for our Doctors in the 21st Century. This session was put together with significant AMACDT involvement and was co-chaired by Dr David Hewett and the AMA's newly elected Treasurer, Dr Rosanna Capolingua.

Speakers included:

- Mr Dror Maor – President, Australian Medical Students Association
- Professor Ian Puddey - Dean of the Faculty of Medicine and Dentistry, University of Western Australia
- Dr Andrew Dent - Director Emergency Medicine, St. Vincent's Hospital, Melbourne
- Mr Philip Davies – Deputy Secretary, Commonwealth Department of Health and Ageing
- Dr Stephen Parnis - Emergency Medicine Registrar, St Vincent's Hospital, Melbourne

Professor Bernard Pearn-Rowe from the University of Notre Dame Medical School also joined the speakers during the panel session that followed the formal presentations.

The session painted a worrying picture of an already stressed clinical training environment. Philip Davies was unable to address concerns expressed by other panel members and the audience alike, that state/territory and federal governments did not have any clear and cohesive plans to properly resource and support clinical training at a time when the output from medical schools is likely to increase by 80% by the end of this decade.

National Conference passed resolutions that supported the Government's efforts to increase medical school places, but expressed overwhelming concern that unless Governments identified clinical training as a key workforce priority the continued high standards of medical education in Australia would be at risk. National Conference called on the Australian Health Ministers' Council to place the issue at the top of their agenda.

The AMACDT has also asked all state/territory AMAs to lobby at state/territory level for increased infrastructure and better planning and is in the process of contacting universities to seek assurances that their strategic plans outline actions and resources needed to accommodate the increased numbers of medical students.

On-line Job Share Register

During the extensive consultations that the AMA undertook as part of the work life flexibility project, junior doctors said that they needed access to an online job share register to help them negotiate flexible working arrangements with other doctors.

MJA Classifieds provides members with free access to an online job share register. This allows you to register your interest in job sharing as well as search for job share opportunities. To visit the site, click on the link below.

<http://www.mja.com.au/classifieds/jobshare.cgi>

Work Life Flexibility Project

The AMA is widely regarded as raising the prominence of work life flexibility as a key medical workforce issue.

In consultation with the AMA's Coordinating Committee of Salaried Doctors the AMACDT endorsed changes to the AMA's formal WLF position statement to extend its coverage to all doctors, not just DITs. The revised position statement was approved by Federal Council at its May 2005 meeting and is now on the AMA website at:

<http://www.ama.com.au/web.nsf/doc/WEEN-5TQ8EA>

The AMA has also finalised useful guides to assist doctors who want to implement flexible working arrangements that match their own personal circumstances. These are now available from the Federal AMA Website:

<http://www.ama.com.au/web.nsf/doc/WEEN-6DU5QC>

as well as state/territory AMA offices.

Comparison of Specialist Medical Colleges

The AMACDT has finalised a useful resource for junior doctors comparing the policies, practices and other aspects of Medical Colleges. If you want to know about issues such as:

- Length of training and applicable fees
- Recognition of prior learning
- Part time training arrangements
- Trainee input and representation

Then the *AMA Comparison of Training Conditions in Australian Specialist Training Medical Programs* will provide you with a useful summary of answers to these questions and other issues.

Copies are available from state/territory AMAs, or via the Federal AMA website at: <http://www.ama.com.au/web.nsf/doc/WEEN-6CY26T>

Medical Education

As reported in the last edition of E_dit, changes to medical education have been a hot topic in recent times, with changes to curriculum and teaching methods often the subject of torrid debate. The Minister for Education, Science and Training, Dr Brendan Nelson appears to want to put the issue to bed once and for all, allocating over half a million dollars to fund a study about the impact of changes to medical education.

The AMA attended a "roundtable" meeting organised by Dr Nelson's department on 26 May 2005 and has subsequently been invited to participate on the steering committee that will oversee the study. It is expected that the study will take around 12 months to complete and preliminary work is already under way.

Assessment of Junior Doctors

The AMC/CPMC assessment workshop held on 18-19 March 2005 raised concerns that Medical Colleges had not moved forward sufficiently in the adoption of modern assessment techniques. Concerns have also been raised previously about proposals to implement more "paper driven" assessment processes during pre-vocational training. Following discussion the AMACDT has decided to resume its work on developing formal AMA policy on education, training and assessment of doctors in the first two postgraduate years.

Rural and Remote Medical Workforce

Responding to the AMACDT's invitation, representatives of the Royal Australian College of General Practice (RACGP) and the Australian College of Rural and Remote Medicine (ACRRM) attended the May meeting and gave presentations on the challenges of rural and remote medicine and what could be done to help and support medical practitioners working in those areas.

ACRRM obviously focused on the recognition of rural and remote medicine as a distinct medical specialty, however, the position put by ACRRM President Dr Bruce Chater did not address AMACDT concerns about the consequences for general practice and the single end point for general practice training.

During National Conference the AMA announced that it would hold a Rural Forum on 4 August 2005 to try and assist the RACGP and ACRRM to find some common ground on this issue and pave the way for greater recognition for rural and remote doctors. The AMACDT will send two nominees to this forum to ensure that the views of junior doctors are taken into account.

The AMACDT also has two representatives on the AMA Rural Reference Group that was announced at National Conference. This group has been established as an advisory body reporting directly to the AMA President on issues of concern in rural and remote health care.

Network-Based Training Programs

AMA NSW has maintained its close involvement with the NSW Physician Trainees' Committee and is monitoring the new network-based Physician training program in NSW.

So far the new program appears to be working quite well, with a positive effect on the quality of training placements, but it needs continued monitoring to ensure that training quality is maintained. The Medical Training and Education Council (MTEC) is now working on networked training for other specialties, and AMA NSW will keep working to ensure that trainees are treated fairly and the quality of their training experience is not undermined.

A similar program is being considered in Victoria where AMA Victoria have been working closely with physician trainees to address a number of concerns that have been raised, and the view that the program is more concerned with workforce distribution than quality training.

Surgical Trainees

The AMA's lobbying efforts have saved the surgical careers of a number of basic surgical trainees (BSTs) who would otherwise have had their surgical training terminated by the Royal Australasian College of Surgeons (RACS) due to its time expiry policy.

The focus of the AMA's attention has now turned to the lack of advanced surgical training positions. Commitments by state/territory governments last year to increase AST positions are increasingly coming under question and according to RACS there is little evidence of real progress. The AMACDT has formally requested state/territory AMA Presidents to pursue at the local level efforts to increase the number of advanced surgical training positions and avoid delays in surgical trainees completing their training.

Specialist Training in the Private Sector

The work of the Medical Specialist Training Steering Committee is slowly gathering pace. Two of the reference groups have engaged consultants to produce reports, which will be considered by the reference groups.

The AMA also successfully coordinated a joint letter from the AMA, the Royal Australasian College of Surgeons (RACS) and the Royal Australasian College of Physicians (RACP) to the Minister for Health and Ageing seeking the removal of geographic restrictions imposed on the Outer Metropolitan Specialist Training Program (OMSTP), along with a funding extension.

The AMA appears to have had some limited success. Funding for OMSTP was due to end in mid 2006, however, the Department of Health and Ageing has indicated that it will extend funding for the program by 6 months while a consultant is engaged to evaluate the success of the program. This will ensure that Colleges will be able to place trainees in 2006 – confident of a full twelve months funding. It is hoped that the May 2006 Budget will also contain additional funds.

Your AMACDT Representatives



AMACDT members relaxing with junior doctors from throughout Australia during May 2005 AMA National Conference

The AMACDT relies on grass roots support and is made up of representatives from each state/territory. The current Council membership comprises:

Dr David Hewett (Chair)	workplace@ama.com.au
Dr Paula Kitto (NT)	amant@amant.com.au
Dr Matthew McConnell (SA)	admin@amasa.org.au
Dr Stephen Parnis (Vic)	amavic@amavic.com.au
Dr Omar Khorshid (WA)	mail@amawa.com.au
Dr Kelly Lowther (ACT)	reception@ama-act.com.au
Dr Peter Lim (NSW)	enquiries@nswama.com.au
Dr Alex Markwell (Qld)	amaq@amaq.com.au
Dr Andrew Black (Tas)	amatas@netspace.net.au

Each member of the AMACDT can be contacted via the email address provided opposite.

AMA Vice President, Dr Choong-Siew Yong, is an ex-officio member of the Council along with a representative from AMSA. A number of observers also regularly attend AMACDT meetings including the GPRA, ASMOF and GASACT.

Changes to College Training Programs

The AMACDT had written to the CPMC about principles to be followed in changes to College training programs. These essentially were consultation with affected trainees, ample lead time for changes and “grandfathering” of existing trainees so that they were not disadvantaged by changes introduced after they had commenced their College training programs.

The CPMC Secretariat’s initial response has been to refer the matter to individual Colleges, however, that missed the point. In the interests of consistent standards across Colleges and the need to raise awareness of the issue, the AMACDT had hoped the CPMC would adopt a collaborative approach and develop a set of best practice principles for all Colleges to follow. The AMACDT has resolved to continue to pursue this matter.

ACCC Info kit for the Medical Profession

The Australian Competition and Consumer Commission (ACCC) has produced a new package of information designed specifically for doctors to provide details on how the competition and fair trading laws affect doctors’ businesses.

The ACCC Info kit for the medical profession provides doctors with guidance on the Trade Practices Act 1974 and the protections and obligations that it creates for them.

The Info kit was developed in consultation with representatives of the medical profession and is designed as a reference for doctors on the application of the Act to a number of key areas, including medical rosters, fee setting and collective negotiations.

For copies of the free Info kit, contact the ACCC Infocentre on 1300 302 502, or visit <http://www.accc.gov.au>

AMA Electrical gains Apple iPod Reseller Status

Veteran Podsters understand that at least once a year Apple performs a feat that at once infuses them with dread and delight: an iPod upgrade. The delight comes from a new look and new capabilities. The dread comes from the realization that you're a step behind the cutting edge and must consider whether to buy your way back on it.

The considerably tweaked latest generation iPod will be instock this week, and AMA Electrical has secured a quantity for AMA members. Compared to the older generation it looks a bit different, operates more efficiently, has a few more features and costs less. For those who have not kept pace with this worldwide craze, here are the highlights.

The click wheel. The iPod keeps getting slimmer and more streamlined. While the initial version had a relatively boxy feel, subsequent versions have been curvier and smaller. This one is about a millimetre thinner and, more significantly, eliminates the control buttons that sat under the display screen. Instead, it uses a "click wheel," where the controls are placed on the compass points of the circular touchpad that lets you scroll through menus. This is an innovation carried over from the diminutive iPod Mini. It was developed out of necessity for the Mini, because there wasn't enough room for the buttons. But the minute I experienced it, I thought to myself, "Why didn't BMW think of this for their i-Drive system?"

More efficient menus. There's less thumbing required to get to your favourites. "Music" is a first-level entry, and now a single click invokes the popular technique of shuffling your library for playback.

New features. You can create multiple on-the-go playlists and delete songs from those ad hoc mixes. Audio books are not only easier to find, you can listen to them at normal speed, slower or 25 per cent faster, without it sounding like a Munchkin.

Longer play. Country doctors, rejoice! The new iPods are touted to allow 12 hours of rockin' between charges – a 50 per cent boost in battery life. "This is accomplished," Apple says, "not by a heavier battery but diligent conservation of power."

Lower price. The top-of-the-line iPod Picture 60GB, holding up to 25,000 pictures and 15,000 songs (60 gigs, as geeks will tell you), now costs \$649. AMA Electrical has very limited stocks available, with over \$400 worth of FREE accessories included.

Colour. Despite rumours to the contrary, the wide-bodies are still as pure as the driven snow. But the iPod Mini now comes in a range of colours – silver, blue, pink and green. The i-shuffle is white only.

Bottom line: If you have yet to jump on the iPod bandwagon, it's cheaper and more attractive to do so. If you're already plugged in, the question is whether you should engage in the "iPod Bump," where you snap up the spiffy new version and pass Old Reliable to a grateful friend or family member (or the highest eBay bidder). If your music collection has exceeded your iPod's storage space, or your listening binges exceed your current iPod's battery life – or if you want to hear Mark Latham's abridged book in four-and-a-half hours rather than six – consider the Bump this time around. Of course, you will want to purchase it from AMA Electrical!

Phone 1300 652 992 or visit
<http://www.ama.com.au/memberservices>



Recognition of Prior Learning (RPL)

The Committee of Presidents of Medical Colleges (CPMC) Education Subcommittee continues to look at RPL and related issues, although progress is still slow. It is obvious that the Subcommittee will require a lot of material and input from the AMACDT and a small group has been formed by the AMACDT to support this work.

E_dit

E_dit is aimed at all doctors-in-training. Feel free to forward E_dit to your colleagues, who can join the network by providing their e-mail address to the Federal AMA at:

http://lists.ama.com.au/mailman/listinfo/e-dit_lists.ama.com.au

By facsimile to: (02) 6270 5499 or by freepost to Reply Paid 6090, Kingston ACT 2604.

Please also print off a copy and place it on a notice board in your workplace. You can unsubscribe from this service by visiting the following link:

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The AMACDT is established as a Committee of the Federal Council of the AMA and reports directly to Federal Council on issues of importance to junior doctors.