



South Australian
Medical Education and Training Unit
Intern and PGY2+
Centralised Recruitment
Allocation Report

Positions commencing in the
2023 clinical year



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EXECUTIVE SUMMARY

The South Australian Medical Education and Training (SA MET) Unit, within Clinical Collaborative, System Leadership and Design, SA Health, administers the centralised application, allocation and offer systems for intern (Postgraduate Year 1) and Postgraduate Year 2+ (Resident Medical Officer) positions on behalf of the Local Health Networks (LHN) in South Australia. This report provides an overview of statistical data from the SA MET Unit recruitment process for the 2022 recruitment and allocations for the 2023 clinical training year.

The information provided within this report describes the SA MET Unit centralised recruitment process only, and does not provide information on the complimentary processes implemented by the Local Health Networks to recruit Trainee Medical Officers.

Intern application, allocation and offer system

There were 494 eligible medical graduate applicants for a total of 311 medical internship positions. Intern positions were allocated according to agreed categories which continue to give priority to local, commonwealth supported medical graduates. This commitment is made in accordance with the 2006 Council of Australian Governments (COAG) agreement to guarantee every commonwealth supported medical graduate an internship in Australia as internship is a requirement to become a fully registered doctor.

PGY2+ application, allocation and offer system

There were 623 eligible applicants for 650 PGY2+ positions in the South Australian Local Health Networks (LHNs) for the 2023 clinical year. These positions were offered to applicants using a merit-based process that takes into consideration the application, referee reports, interviews (if required), applicant training program preferences, and applicant ranking by the selection panels. The selection criteria for each advertised position differed; each position provided an information pack to outline the job specifics and selection criteria. The 2022 recruitment process resulted in 439 positions being filled via the SA MET Unit centralised allocation and offer process.

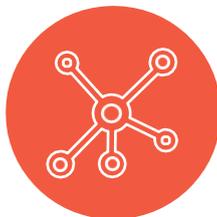
It is important to note that outside of this centralised PGY2+ application process, some PGY2+ positions are filled directly by LHNs, such as positions in emergency medicine and advanced training.

INTERNS



494

Eligible applicants
applied for a position



311

Intern positions across SA
Local Health Networks



308

Intern positions filled in
South Australia



Applications for intern positions in South Australia were received online through [Careers | SA Health](#). Interns are matched to positions using a formula that considers the applicant's residency status, university, LHN preferences (preferred place of work) and the number of available intern positions.

When the number of applications received for a LHN exceeds the number of available intern positions, a randomised ballot is used to allocate applicants to intern positions. Offers are made in order of applicant category group until all positions are full.

South Australian Intern Category Groups 2022:

Category 1*

Australian Citizens, Australian Permanent Residents and New Zealand Citizens

- > Medical graduates from a South Australian university who identify as Aboriginal and Torres Strait Islander (ATSI)
- > Medical graduates from a South Australian university – Commonwealth-supported (HECS-HELP) or SA Bonded Medical Scholarship Scheme (SABMSS)
- > Medical graduates from a South Australian university – full-fee paying

Category 2

Australian Citizens, Australian Permanent Residents and New Zealand Citizens

- > Medical graduates from an interstate or New Zealand university who identify as Aboriginal or Torres Strait Islander (ATSI)
- > Medical graduates from an interstate or New Zealand university who completed Year 12 in South Australia

Australian Temporary Residents and New Zealand Permanent Residents

- > Medical graduates from a South Australian university

Category 3

Australian Citizens, Australian Permanent Residents and New Zealand Citizens

- > Medical graduates from an interstate or New Zealand university

Category 4

Australian Temporary Residents and New Zealand Permanent Residents

- > Medical graduates from an interstate or New Zealand university

Category 5

Australian Citizens, Australian Permanent Residents and New Zealand Citizens, Australian Temporary Residents and New Zealand Permanent Residents

- > Medical graduates from an overseas university

* Category 1. Applicants – an intern place is currently guaranteed in SA under the 2006 COAG commitment.

Applications

Applications for 2023 medical internships in South Australia opened on Monday 9 May 2022 and closed on Thursday 9 June 2022. These dates as well as the first round allocation date were agreed by all Australian jurisdictions. There were 494 eligible applications received however 8 went on to withdraw prior to receiving an intern allocation.

Applicants were required to provide personal and contact information, residency status and demographic data. Applicants uploaded requested documentation and ranked their preferred LHNs. All applications were manually reviewed, cross-checked and verified by SA MET Unit staff to ensure the eligibility criteria (below) had been met by applicants. Applicants who did not meet the eligibility criteria were marked as ineligible, provided with an explanation for their ineligibility and excluded from the allocation.

ELIGIBILITY CRITERIA FOR A 2023 INTERNSHIP POSITION IN SOUTH AUSTRALIA

To apply for an internship in South Australia applicants must comply with the following criteria:

- > Have graduated from a medical school in the last two years (to start internship in 2023, must be a medical graduate of the 2021 or 2022 cohort).
- > Have successfully completed both Australian Medical Council exams if an international medical graduate.
- > Be able to demonstrate meeting the requirements for registration with Ahpra.
- > Have NOT commenced or completed an internship or worked as a doctor before.
- > Be an Australian Citizen, Australian Permanent Resident, Australian Temporary Resident, New Zealand Citizen or New Zealand Permanent Resident.
- > Have a visa or residency status that allows work unrestricted in Australia for the duration of prevocational training.
- > Be able to begin working on the January start date, which includes compulsory orientation, and fulfil the minimum 12 month contract.
- > Have met the English Language Skills Registration standard.
- > Have completed electronic medical record (Sunrise EMR and PAS) training.
- > Have completed and submitted an online application, including the provision of valid supporting documentation, by the application closing date.

Ineligible/Incomplete applications

A total of 104 applications were deemed to be incomplete or did not meet the eligibility criteria. There were 48 applications that did not pass the mandatory components of the eligibility criteria.

Application status	2022 applications
Total applications commenced	598
Incomplete applications	56
Ineligible applications	48
Eligible applications	494
Withdrawn pre-allocation	8

Ineligible/incomplete applications were excluded from the allocation. Where there was any doubt regarding an applicant's eligibility, the applicant was given the opportunity to provide supporting evidence.

Part-time applications

SA Health believes that with the right support and working arrangements, staff are better prepared to help build and deliver sustainable high quality health care services. SA Health promotes diversity and flexible ways of working including part-time work arrangements. Applicants are encouraged to apply for flexible working arrangements if required. The Medical Board of Australia states that internship may be undertaken part-time, but once started must be completed within three years.

For 2023, no applicants applied to complete their internship on a part-time basis.

Part-time intern appointments may be considered by some health networks, however are not guaranteed. During any allocation process, part-time applications are discussed with the relevant health networks and each case considered on an individual basis.

Special Considerations

Applicants are given the opportunity to apply for a special consideration if they can demonstrate they have exceptional circumstances. In SA, three of the six training networks are located in the metropolitan region. As a result, special consideration requests based on transport issues are not considered.

Criteria that may be considered as exceptional circumstances include:

- > Major health problems requiring frequent and ongoing highly specialised treatment only available in certain locations.
- > Responsibility for dependants who are unable to relocate to regional SA with the applicant.

In 2022, six applicants submitted an application for special consideration. The Medical Officers Appointment Working Group assessed all de-identified special consideration requests and made a determination accordingly. These decisions were provided to SA MET who facilitated the allocation.

All six of the 2022 special consideration requests were approved. Successful applicants were granted a special consideration to either work in a metro or rural location however this did not affect the likelihood of them receiving an offer. I.e. offers are made to all category 1 applicants prior to commencing offers to category 2 applicants irrespective of a special consideration request.

Rural intern pathway

2022 marked the fifth year of the Rural Intern Pathway in South Australia. The Rural Intern Pathway includes a selection process for applicants who were interested in undertaking their internship (and potentially subsequent years) in rural hospitals within South Australia. Rural intern positions provide broad opportunities in unique settings and are best suited for medical graduates with a history of living or working in a rural area or a desire to commence a career in these areas. Applicants were asked to provide written answers to some short questions within their application and were invited to attend an interview if shortlisted.

The key drivers behind the implementation of the Rural Intern Pathway were:

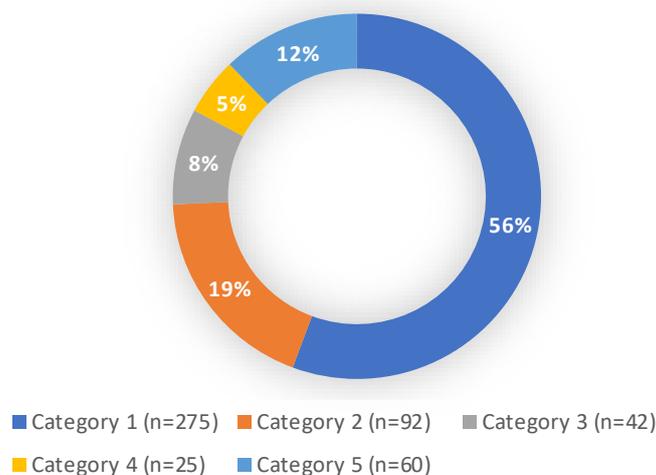
- > to attract quality candidates who had a genuine interest in working in those locations
- > increase rural medical workforce sustainability
- > increase the number and capability of rural doctors
- > support workforce recruitment and retention
- > respond to an increase in medical school graduates.

Offers for rural intern positions commenced on 18 July 2022 prior to metropolitan intern offers. Preference analysis of 2023 intern data indicated that a total of 71 applicants preferred the Rural Intern Pathway by nominating either the Flinders and Upper North Local Health Network, Limestone Coast Local Health Network or Riverland Mallee Coorong Local Health Network as their first preference. The Rural Local Health Networks shortlisted their applicants and undertook interviews either in person or via video conference. Six offers were made for the five Flinders and Upper North Network positions, twelve offers were made for the ten Limestone Coast Local Health Network positions and five offers were made for the four Riverland Mallee Coorong Local Health Network positions.

Allocations

Eligible applicants were allocated to intern positions within the prescribed category groups and then according to applicant preferences. The 494 eligible applicants were categorised as detailed below.

SA INTERN APPLICANTS BY CATEGORY GROUP



Some LHNs were oversubscribed receiving more first preference rankings than there were available positions, therefore a formula was used to randomly determine which applicants were offered the available positions. Applicants were allocated to their second or subsequent preferences once it was no longer possible to match them to their first preference.

Notifications were sent to successful applicants by email with applicants required to respond online within a specified timeframe. If a position was declined, that position was reallocated to an applicant from the same or next category group who had not yet received an offer of an intern position in South Australia.

Offers commenced on the nationally agreed date of 20 July 2022.

Quality assurance

Prior to initial offers being made, a comprehensive quality assurance analysis was undertaken to validate the process. This showed that:

- > all offers were made to applicants who met the eligibility criteria;
- > published category groups were adhered to; and
- > ballot outcomes, where required, were random with no significant association between applicant surname, application submission date or application validation/verification date and allocation outcome.

Internships available

There were 311 intern positions available for 2023, an increase of twenty positions from the previous year.

INTERN POSITIONS IN SOUTH AUSTRALIA (Intern training years 2018 – 2023)						
LOCAL HEALTH NETWORK (LHN)	2018	2019	2020	2021	2022	2023
Central Adelaide LHN						
> Royal Adelaide Hospital	131	130	131	132	129	138
> The Queen Elizabeth Hospital						
Southern Adelaide LHN						
> Flinders Medical Centre	69	70	69	75	81	84
> Noarlunga Health Service						
Northern Adelaide LHN						
> Modbury Hospital	50	50	54	56	63	70
> Lyell McEwin Hospital						
Limestone Coast LHN						
> Mount Gambier Districts Health Service	5	7	7	7	8	10
Northern and Eyre Training Network						
> Port Augusta Hospital	0	5	5	5	5	5
> Port Lincoln Health and Hospital Service						
> Whyalla Hospital and Health Service						
Riverland Mallee Coorong LHN						
> Riverland General Hospital	0	0	0	0	5	4
TOTAL	255	262	266	275	291	311

Allocation data

A total of 384 offers were made for intern positions in South Australia across all category groups. There was one offer which occurred after the allocation process was finalised via the Late Vacancy Management Process (LVM).

Resulting allocation data by location of study:

University Location	Successful Graduates
South Australia	283
Interstate	22
Malaysia	1
Overseas - other	2
TOTAL	308

Allocation breakdown by Category Group:

Category Group	Eligible Applicants	Total Offers Made (including LVM*)	Total LVM offers made	Acceptances	Declines	Accept then withdrawn
Category 1	273	273	0	234	9	30
Category 2	91	91	0	68	11	12
Category 3	42	12	0	3	9	0
Category 4	25	2	0	0	0	2
Category 5	60	6	1	3	2	1
TOTAL	491	384	1	308	31	45

*LVM – Late Vacancy Management Process – may include offers to applicants who did not apply for a position in SA and as such may not be included in the 'Eligible Applicants' figures.

**Some eligible applicants withdrew prior to the allocation commencing, therefore are not recorded in 'Eligible Applicants' figures.

Late Vacancy Management Process

A Late Vacancy Management (LVM) process to manage vacant positions after the last National Audit is undertaken by the National Medical Intern Data Management Working Group (NMIDM WG).

The purpose of the LVM process is to ensure applicants who have not yet received an internship offer in any jurisdiction across Australia are the only applicants to receive further offers that arise after the last National Audit. This process provides better opportunities to fill late vacancies with applicants who are yet to receive a 2023 internship offer. It also reduces the risk for employers of losing applicants to late offers from other jurisdictions.

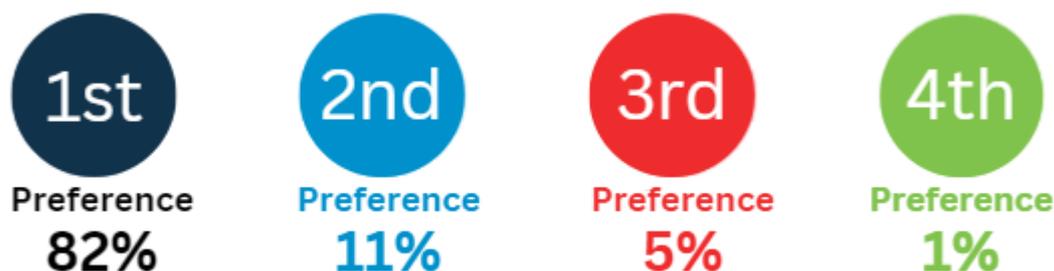
The LVM process runs as a supplementary process from 5 December 2022 to 24 March 2023.

One South Australian internship offer was made to an applicant who accepted after the LVM had commenced.

Preference analysis

A preference analysis was undertaken on all applicants who received an internship offer. Eighty-two percent of applicants who received an offer of internship in South Australia received their first preference, 11 percent received their second, 5 percent received their third and 1 percent received their fourth preference allocations.

Preference analysis for intern applicants who received an offer in SA



Intern declines

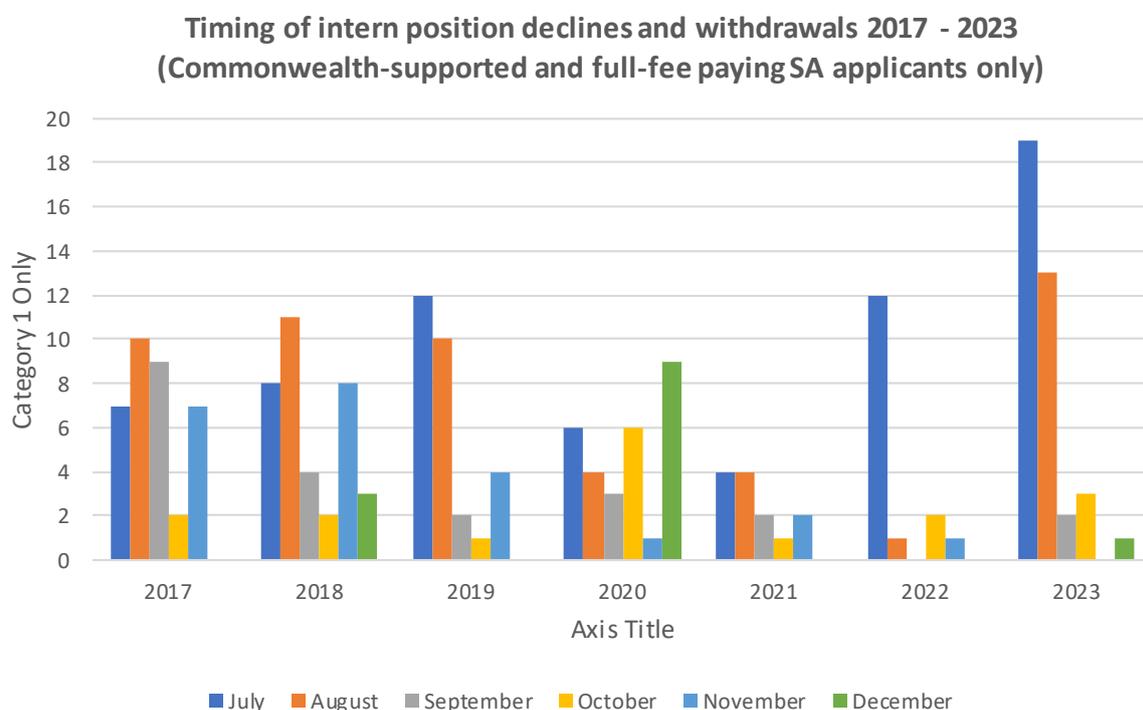
Over the past five years South Australia has experienced between 6 to 13 percent decline/withdrawal rate from its category 1 applicants. In comparison, recruitment for the 2023 intern year saw a fourteen percent decline/withdrawal rate from category 1 applicants.

Declines and withdrawals from this group of applicants allow for any unmatched applicants to be allocated to an intern position. Historical decline rates are used by SA Health to predict whether the 2006 COAG agreement to guarantee all Commonwealth-supported applicants with an intern position will be met in a timely manner.

July and August experienced a high number of declines and withdrawals during the 2023 intern recruitment.

The national Late Vacancy Management Process commenced in December 2022 with the aim of stabilising the allocation results and providing certainty to the LHNs and applicants earlier in the year.

Timing of intern position declines and withdrawals 2017 -2023



Rotation selection

Interns are required to undertake a variety of clinical placements during their intern year. This includes core rotations in appropriate medical, surgical and emergency units and is a requirement of their medical registration. Non-core rotations are also utilised to make up the required five terms of an intern year.

Rotations available vary between the LHNs and are dependent on prevocational accreditation and the health services provided in that area.

Applicants who accepted an offer were asked to complete an online rotation preference form for the South Australian LHNs. The relevant LHN rotation list was provided via a secondary online data collection for applicants to preference the available rotations and to provide a brief statement regarding their career pathway intentions (if known). They were also asked to request any specific annual leave dates.

This information is useful to LHNs for rostering and career planning and assists with future medical workforce and education planning in South Australia.

National Audit of Intern Acceptances and Unplaced Applicants

An annual audit to manage the number of applicants who accept intern positions in multiple jurisdictions is undertaken by the National Medical Intern Data Management (NMIDM) Working Group.

The National Audit of Intern Acceptances and Unplaced Applicants (the audit) uses data provided by the jurisdictions to identify applicants who have accepted multiple intern positions across Australia. Those applicants are contacted and given a specified timeframe to decide which position they will ultimately accept. Applicants who do not make a timely decision are withdrawn² from all accepted positions, except the first one that was offered to them.

The purpose of the audit is to ensure that applicants have the most equitable and timely opportunity to obtain an intern position in Australia. It does not aim to prevent applicants receiving multiple offers, but rather resolve which offer an applicant truly intends to accept when two or more offers have been accepted in different jurisdictions. In 2022, four National Audits of Acceptances and Unplaced Applicants were undertaken between July and November 2022.

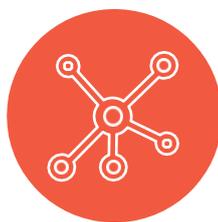
² The Terms of Use that are accepted by applicants when applying for a position allow positions to be withdrawn from applicants in order to ensure timely management of multiple acceptances or in the event that an applicant is subsequently found to be ineligible.

POSTGRADUATE YEAR 2 AND BEYOND (PGY2+)



623

Eligible applicants applied for a position



650

PGY2+ positions across SA Local Health Networks



439

Positions filled in SA

Following the successful completion of a medical intern year, junior doctors may begin pre-specialist training or undertake general training. These positions are generally known as prevocational positions. This subsequent training year provides junior doctors with further clinical experience allowing them to establish networks and provides the opportunity to explore the various medical specialties in depth, prior to choosing a medical career as a generalist or specialist.

General training positions within hospitals provide junior doctors with further general hospital experience and clinical exposure. These positions provide rotations through a range of medical, surgical and emergency units, and are suitable for junior doctors who are yet to decide on a medical career pathway, or those who wish to gain more clinical experience prior to specialty training.

Recruitment and allocation of some PGY2+ positions in South Australia is undertaken through a centralised process administered by the SA MET Unit on behalf of SA Health. Some training programs choose to extend existing staff contracts and/or advertise positions outside of this central application and allocation process, therefore the data presented within this report is not a complete representation of South Australia's PGY2+ workforce.

Allocation of Advanced Training Positions (Registrars) is not undertaken by the SA MET Unit, with recruitment for these positions being coordinated directly by hospitals and/or specialty colleges.

ELIGIBILITY CRITERIA FOR A 2023 PGY2+ POSITION IN SOUTH AUSTRALIA

To apply for a PGY2+ position in South Australia:

- > Applicants must be eligible for general registration as a medical practitioner in Australia issued by the Medical Board of Australia on or before the February start date.
- > Applicants must be available for a 12 month contract commencing on the February start date.
- > Applicants must meet Ahpra and SA Health's recency of practice requirements. SA Health requires applicants to have practiced as a medical officer with paid employment (not an observership) within two years at the time of submitting their application.
- > Applicants cannot have accepted a Targeted Voluntary Separation Package from SA Government within the last three years.

Applications

Applications for 2023 PGY2+ positions in South Australia opened on Tuesday 14 June 2022 and closed at 11:55pm (ACST) on Wednesday 6 July 2022. The SA MET Unit utilises an online application system for PGY2+ positions, which allows applicants to submit employment applications, nominate referees and select their four preferred positions. Following the close of applications, all applications were manually reviewed, cross-checked and verified by SA MET Unit staff to ensure that the eligibility criteria had been met. Applicants who did not meet the eligibility criteria were marked as ineligible, provided with an explanation for their ineligibility and excluded from the allocation.

Applicants are ranked on merit by selection panels. The SA MET Unit then matches applicants to positions according to applicant preferences, selection panel ranking and the number of available positions.

Eligibility Status	2019 Applications	2020 Applications	2021 Applications	2022 Applications
Total applications received	1054	1236	1235	862
Ineligible/incomplete application	165	147	252	35
International Medical Graduates requiring General Registration	192	347	268	214
Eligible South Australian* applicants	497	508	506	460
Eligible Outside South Australia* applicants	110	140	105	120
Withdrawn pre-allocation - SA	45	51	71	25
Withdrawn pre-allocation - interstate	35	37	32	5
Withdrawn pre-allocation – International Medical Graduates	10	6	1	3

**based on State of residential address*

International Medical Graduates (IMG)

Applications from IMGs were identified as those applicants who did not yet have General Registration. These applicants have varying levels of registration prior so were grouped as those on the AMC Competent Authority pathway, those on the AMC Standard pathway who have completed AMC part 1, those on the AMC Standard pathway who have completed AMC part 1 and part 2 and finally those already working in an Australian hospital with limited or provisional registration.

Although these applicants did not have General Registration they may have been suitable for appointment in alternative positions.

IMGs were advised that their details would be retained in a centralised database and distributed to the LHNs to fill appropriate vacancies. SA MET will continue to collect IMG applications in future years.

Part-time applications

Applicants are encouraged to apply for flexible working arrangements if required. In 2022, seventeen eligible applicants indicated within their PGY2+ application that they wished to work on a part-time basis.

Applicants generally request to work between 0.4 FTE and 0.9 FTE. Eight of these applicants accepted a PGY2+ position and negotiated with their allocated LHN to work part-time.

Part-time appointments may be considered by some health networks, however are not guaranteed. During the allocation process, part time applications are flagged with the relevant programs and each case considered on an individual basis.

Statewide selection

Recruitment into a number of PGY2+ positions occurs via a statewide approach. This means that applications are assessed by panel members from each metro LHN for that position type in regard to short-listing, interviewing and ranking.

For 2023, there were 41 different position types on offer across the LHNs; a statewide recruitment process was operated by 16 of these programs. Using statewide selection effectively reduces the amount of applications that require assessment by each LHN.

Example: *Rather than being interviewed three separate times if an applicant preferred Basic Physician Training at Northern Adelaide LHN (NALHN), Central Adelaide LHN (CALHN) and Southern Adelaide LHN (SALHN) they would have one single interview for BPT.*

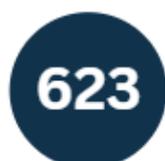
For Basic Physician Training across the metropolitan hospitals, a total of 357 preferences were received. If selection and ranking was performed at each LHN individually, CALHN would have had 129 applications to review, SALHN would have had 125 applications to review and NALHN 103 applications to review and all LHNs would likely be assessing the same applicants.

Using a statewide process there were only 145 unique applicants and if these are divided evenly amongst the metropolitan LHNs, they would only have to assess approximately 48 applications each, refer table below.

Position	Number of unique applicants	Number of individual preferences
Statewide General Training/General Practice Training	514	
CALHN 1-100 General Training/General Practice Training		459
NALHN 5-100 General Training/General Practice Training		330
SALHN 3-100 General Training/General Practice Training		376
		1165
Statewide Basic Physician Training - Adult Medicine	145	
CALHN 1-300 Basic Physician Training - Adult Medicine		129
NALHN 5-300 Basic Physician Training - Adult Medicine		103
SALHN 3-300 Basic Physician Training - Adult Medicine		125
		357
Statewide Surgical Resident Medical Officer	96	
CALHN 1-400 Surgical Resident Medical Officer		75
NALHN 5-400 Surgical Resident Medical Officer		64
SALHN 3-400 Surgical Resident Medical Officer		73
		212
Statewide Obstetrics & Gynaecology (12 Months)	39	
NALHN 5-500 Obstetrics & Gynaecology (12 Months)		32
SALHN 3-500 Obstetrics & Gynaecology (12 Months)		20
WCH 4-500 Obstetrics & Gynaecology		33
		85
NALHN ENT Surgery Service Posts	10	
NALHN 6-460 ENT Surgery Service Post – Modbury		6
NALHN 5-460 ENT Surgery Service Post - Lyell McEwin		9
		15
Statewide Medical Service Resident	59	
NALHN 5-600 Medical Service Resident		30
SALHN 3-600 Medical Service Resident		39
		69
TOTAL	863	

The main advantages of using a statewide selection process are that it reduces double handling of applications amongst the LHNs, reduces inconvenience for applicants and promotes comradery between the different sites.

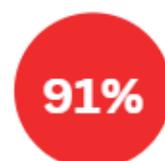
Referee reports



Eligible
applicants



Referees
nominated



Referees completed
their referee report

PGY2+ applicants are required to nominate referees who can provide referee reports during the selection process. Applicants nominated a minimum of two referees by providing their names, email addresses and phone numbers. Referee report forms were made available via an online form which was emailed to the referee once the applicant submitted their job application. The referee is provided a uniquely generated hyperlink to complete the referee report for the applicant. The referee form collects the following information:

Supervisor's information: relationship to the applicant, capacity of work, number of clinical encounters with applicant, period of supervision of applicant, hospital and unit location.

Trainee information: communication skills, clinical competencies, professional and personal conduct.

The referee reports are provided in confidence and copies are not provided to applicants or to any person or institution outside of the SA MET Unit's matching and allocation process. Applicants may check the status of their referee reports by logging onto their SA Health application.

There were a total of 1860 referees nominated by applicants with 91 percent of these referees completing their referee reports.

Interviews

The majority of training positions nominated to interview their candidates prior to ranking them. The selection criteria for each program were specified in the individual job packs which were available through the SA Health careers web page. Selection panels arranged interview times and interviews as part of the selection and ranking procedures independently from SA MET.

Selection panels were asked to provide advanced notice of interview dates to ensure applicants could arrange time to attend. Notices were published in the program job packs when known. A commitment was also continued in 2022 to offer interviews via video conference where possible to ensure interstate and regional applicants would not be disadvantaged.

Allocations

The allocation of PGY2+ applicants is undertaken in rounds based on applicants' preferences and the training programs' ranking. The SA MET Unit makes all offers to applicants and collects their responses. Offers continue until all positions are full or the ranked lists are exhausted.

Offers for general training positions (except first preferences) occur after the other training streams have received their offers to maximise applicants' chances of receiving their highest pre-specialty preferences and reducing the amount of withdrawals in general training. This change was initially implemented in 2016.

The SA MET Unit undertakes a supplementary allocation process to manage any vacancies that may arise post-allocation, through the Late Vacancy Management Process where selection panels may offer a position to applicants who have been identified as unmatched and/or unranked.

Allocation data



There were 20 applicants who withdrew from their position after initially accepting it while 47 declined their initial offer. Refer to table below for full breakdown of allocation process and offers.

2022 Allocation results for the 2023 clinical year

Position	2023 Positions	Number of preferences ** (Non - IMG)	Offers Made (standard rounds)	LVM offers made	Acceptances / Positions filled	Declines	Accept then withdrawn	Positions available
BHFLHN Southern Fleurieu Health Service Rural Generalist Emergency Medicine Advanced Skills	1	2	1	0	1	0	0	0
BHFLHN Mt Barker Rural Generalist Emergency Medicine Advanced Skills	5	3	2	0	1	1	0	4
CALHN 1-100 General Training/ General Practice Training	139	437	142	0	121	14	7	18
CALHN 1-300 Basic Physician Training - Adult Medicine	36	126	38	0	36	2	0	0
CALHN 1-400 Surgical Resident Medical Officer	47	73	36	0	25	2	9	22
EFHLHN Rural Generalist General Training	13	13	2	0	2	0	0	11
EFNLHN Port Lincoln DRANZCOG	1	1	1	0	1	0	0	0
FUNLHN Rural Generalist / General Training	5	10	3	0	3	0	0	2
FUNLHN Whyalla Rural Generalist Anaesthetics (DRGA)	1	4	1	0	1	0	0	0
LCLHN Rural Generalist/General Training	6	27	4	0	2	2	0	4
LCLHN DRANZCOG	1	2	0	0	0	0	0	1
LCLHN Adult Internal Medicine – Advanced Skills	1	0	0	0	0	0	0	1
LCLHN Rural Generalist Emergency Medicine Training	1	3	0	0	0	0	0	1
LCLHN Mount Gambier Rural Generalist Anaesthetics	1	7	0	0	0	0	0	1
TAPPP 7-700 The Adelaide Prevocational Psychiatry Program	44	62	33	0	32	1	0	12
NALHN 5-100 General Training/ General Practice Training	87	317	49	0	43	5	1	44
NALHN 5-300 Basic Physician Training - Adult Medicine	20	100	21	0	17	4	0	3
NALHN 5-400 Surgical Resident Medical Officer	7	64	8	2	6	2	0	1
NALHN 5-500 Obstetrics & Gynaecology (12 Months)	2	26	2	0	2	0	0	0

NALHN 5-550 Obstetrics & Gynaecology (6 months) with Paediatrics (6 Months)	4	20	6	0	3	2	1	1
NALHN 5-600 Medical Service Resident	7	30	6	0	5	1	0	2
NALHN 5-460 ENT Surgery Service Post - Lyell McEwin	1	7	0	0	0	0	0	1
NALHN 6-460 ENT Surgery Service Post - Modbury	1	4	1	0	1	0	0	0
RMCLHN Rural Generalist General Training	9	14	5	0	5	0	0	4
SALHN 3-100 General Training/ General Practice Training	98	359	56	0	52	3	1	46
SALHN 3-300 Basic Physician Training - Adult Medicine	18	120	19	0	18	1	0	0
SALHN 3-400 Surgical Resident Medical Officer	27	73	15	0	11	3	1	16
SALHN 3-500 Obstetrics & Gynaecology (12 months)	4	15	1	0	1	0	0	3
SALHN 3-600 Medical Service Resident	10	36	8	2	8	0	0	2
WCH 4-100 Prevocational Resident Program	39	58	29	0	28	1	0	11
WCH 4-500 Obstetrics & Gynaecology	11	27	14	0	11	3	0	0
Metro Rural Generalist Anaesthetics	3	10	3	0	3	0	0	0
TOTAL	650	2050	506	4	439	47	20	211

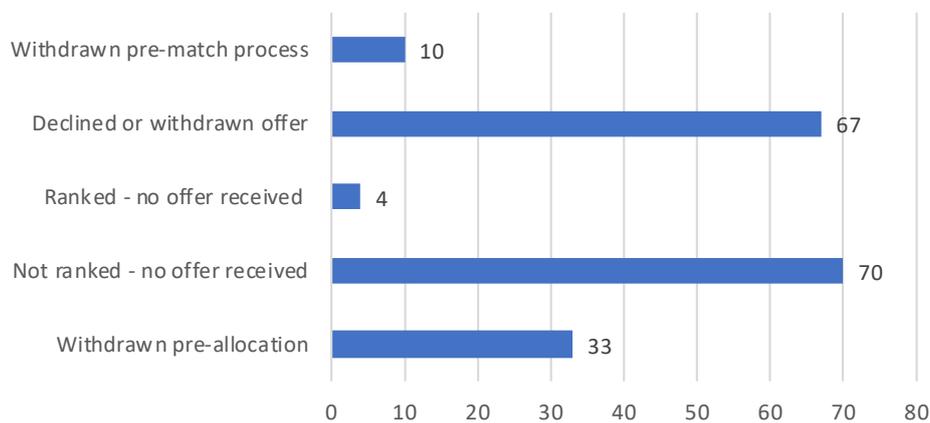
It is important to note that outside of this centralised PGY2+ application process, PGY2+ position vacancies are filled directly by the LHNs.



Available positions, eligible applications, positions filled

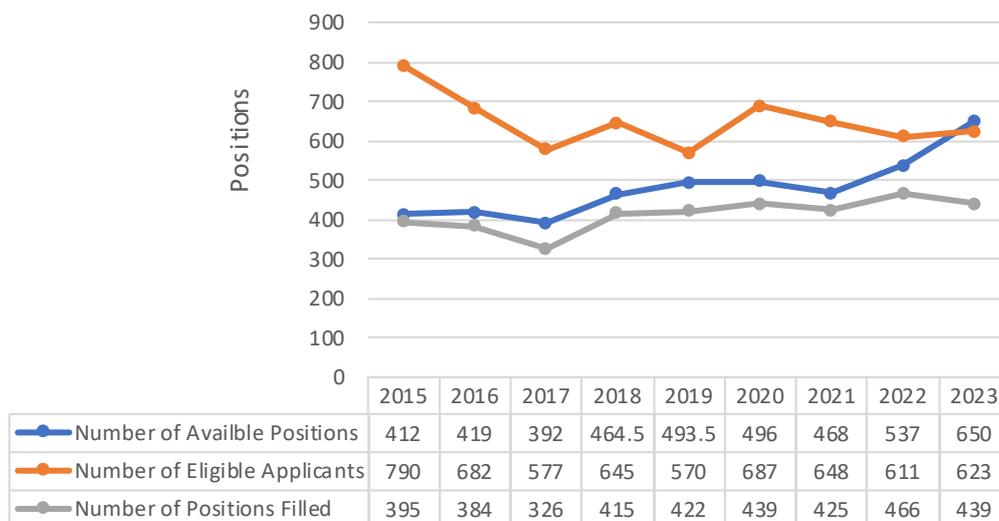
There were 650 available positions and 623 eligible applications received for the 2022 recruitment, however 439 positions were filled. Of the total eligible applications, 117 did not receive a provisional offer. The graph below breaks down the difference of positions available vs the eligible applications (184) that did not fill a potential vacancy.

Difference of positions available vs eligible applications that did not fill vacancies



From the 2021 – 2023 clinical year, there has been an increase of 182 PGY2+ positions available. Over the last five years, there is an average number of 528 positions, 627 eligible applicants, while the average number of positions filled is 437.

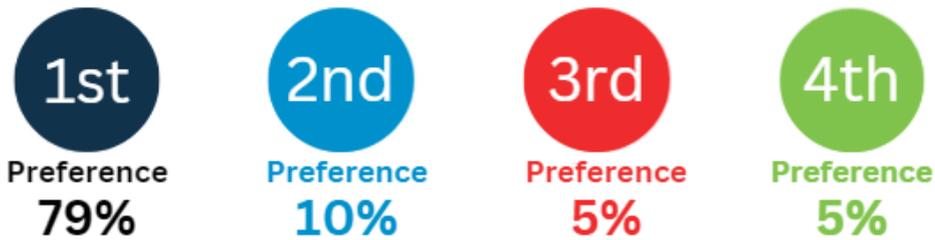
Number of available PGY2+ positions vs eligible applicants from 2015 - 2023 clinical year



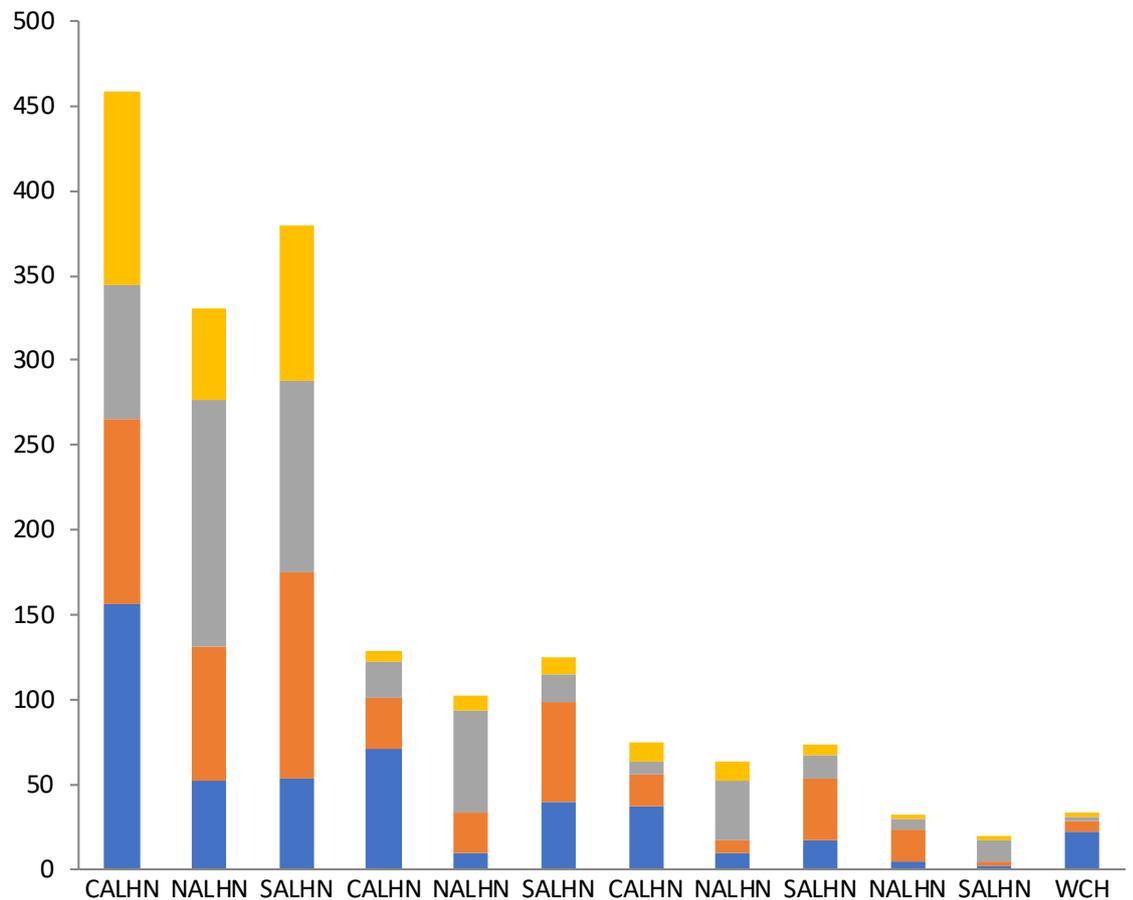
Applicant preferences

By implementing a staggered approach to the timing of PGY2+ offers more applicants were offered their first preference as there was an increased opportunity for declines to be collated prior to making further offers.

Refer to next graph for a full breakdown of applicant preferences for the statewide programs.



Number of preferences for statewide programs



	CALHN	NALHN	SALHN	CALHN	NALHN	SALHN	CALHN	NALHN	SALHN	NALHN	SALHN	WCH
Number of 4th preferences	115	53	91	6	9	10	11	12	6	2	3	2
Number of 3rd preferences	78	146	113	22	61	16	8	35	13	6	12	3
Number of 2nd preferences	110	79	121	30	23	59	19	8	37	19	3	6
Number of 1st preferences	156	52	54	71	10	40	37	9	17	5	2	22

Late Vacancy Management process

The Late Vacancy Management (LVM) process for PGY2+ is the same as for interns, whereby management of vacant positions follows the last round of allocations and undertaken by the SA MET Unit in conjunction with the LHNs. The purpose of the LVM process is to ensure that vacant positions which arise after the allocation process can be filled by applicants who were yet to receive an offer.

Applicants were notified by email if they had been unsuccessful in securing a 2023 PGY2+ offer and were advised that they would be included in the LVM process unless they withdrew their application. The LHNs were provided with applications for these applicants and a spreadsheet containing eligible applicants and IMG applicants who had not been matched to a position. The LHNs notified the SA MET Unit if they would like to make an LVM offer and this applicant would be removed from the LVM list.

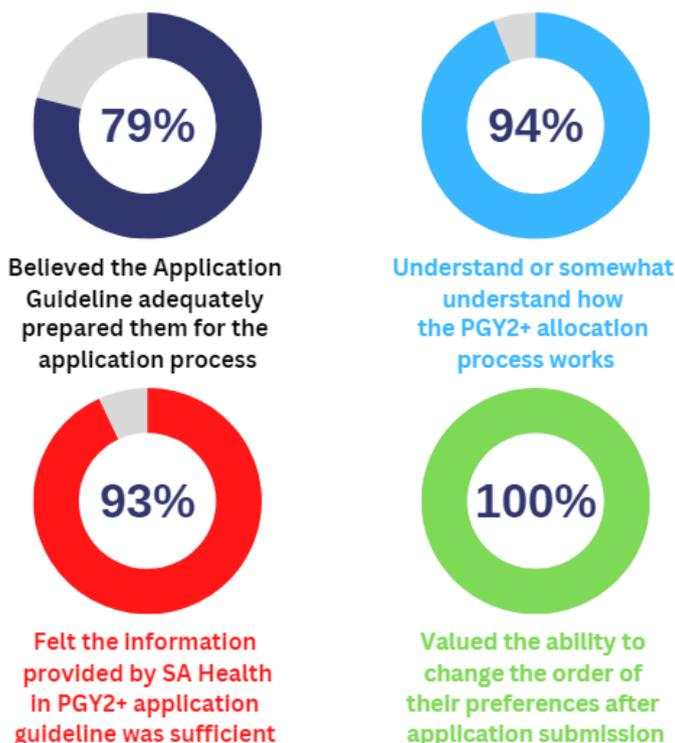
Evaluation

Each year an evaluation of the PGY2+ allocation and appointment process is undertaken in order to allow for revisions to the system to further improve it. Following the 2022 PGY2+ allocation and appointment process, SA MET undertook an evaluation via survey with applicants to investigate where improvements and efficiencies could further enhance the selection and recruitment of PGY2+ positions in South Australia.

There were 66 PGY2+ applicants who completed the survey.

We found that 88 percent of applicants either agreed or strongly agreed that having a centralised PGY2+ application and recruitment process in SA is a valuable resource and 74 percent agreed or strongly agreed that the system is an advantage to seeking employment in SA.

Responses from applicants included:



For more information

www.sahealth.sa.gov.au

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