Local Health Network Accreditation Report

SA ME+
SOUTH AUSTRALIAN
MEDICAL EDUCATION & TRAINING
HEALTH ADVISORY COUNCIL

Central Adelaide Local Health Network
Royal Adelaide Hospital

Accreditation Report Details

Date of Visit:	**15 – 17 May 2023**
Team Leaders:	**A/Professor Robert O'Brien** **Dr Rob van den Berg**
Team Members:	**Dr Lacey Cassidy** **Ms Sheryl Keegan** **Dr Adam Overweel** **Dr Miranda Lam**
SA MET Unit Ex-Officious:	**Ms Colleen Cryans** **Ms Stacey Holst**

Date approved by SA MET Health Advisory Council:	**22 August 2023**
Expiry Date:	**31 August 2027**

Accreditation Decision

☒ 4 years with 11 provisos

Executive Summary

Central Adelaide Local Health Network's (CALHN) Medical Education Strategic Framework 2021-2026 provides a strategic direction for the education and training program promoting innovation and excellence in educational programs supporting diversity and equity, strong educational governance and leadership and the requirements for the learner and educator. CALHN has significantly improved the governance structure and organisation of the medical education and training program since the last accreditation assessment in 2018. The appointment of the CALHN Medical Lead – Medical Education position has provided greater leadership, governance and strategic oversight creating an integrated approach for the CALHN-wide medical education and training portfolio.

Trainee Medical Officers (TMO) generally reported they were well supported and had good clinical training and medical education experiences. There was a high degree of engagement and initiative by Term Supervisors to support TMOs with regard to education, training, supervision, advocacy, online information resources, virtual reality simulations, and clinical experience which increased patient engagement and learning opportunities. In addition, the Med App initiative provides TMOs with quick access to clinical protocols and policies as well as reminders for hospital-wide education sessions has been well received.

As part of the new CALHN-wide medical education and training portfolio, the RAH Medical Education and Training Committee (METC) and the TQEH General Clinical Training Committee (GCTC) were established to support the Medical Education Committee (MEC) by providing a forum for the Medical Education Unit to support medical education and training issues at a local level and a structure to escalate concerns.

The RAH utilised TMO feedback from the weekly education and training sessions and end-of-term evaluations to implement service improvements such as development of clinical escalation pathways available on Med-App, improvements to the hospital-wide orientation and an increase of presentation time for useful employment sessions.

The purpose-built simulation suite on 5D has reintroduced simulation-based education and practical training, as well as space for debriefing and meetings. The newly appointed Simulation Technician Officer provides governance and ensures the coordination, maintenance and utilisation of the technical suite. The Simulation Technical Officer is working closely with The University of Adelaide and the CALHN Nursing Education Unit to increase visibility, activity and to build capacity.

The majority of interns were able to access the weekly education sessions, with some variability in attendance mostly attributed to high workload, unit schedules, staff on unexpected leave or admission days. The importance of the intern education program should be considered beyond the educational perspective, as the intern tutorials create an opportunity for interns to engage with their peers and support their education and training from a whole person perspective.

A clear communication plan was implemented by the Medical Education Unit to ensure all TMOs are reminded of their upcoming assessment expectations and TMOs are provide instructions on how to complete their assessments. TMOs on five terms did not receive any assessments due to high workload or staff not being available due to unplanned leave but did receive informal feedback on their performance throughout the term, which was considered valuable.

There were some instances of very high workloads on some terms, with TMOs reporting there were no concerns in claiming unrostered overtime or being appropriately remunerated. It is encouraging that CALHN have investigated and trialling the *Core Schedule* rostering system, which will increase capacity to capture overtime data and provide a reporting mechanism to the Education and Training Committee.