

# South Australian Prevocational Medical Officer (PMO) Forum

## Terms of Reference



SOUTH AUSTRALIAN  
MEDICAL EDUCATION & TRAINING  
HEALTH ADVISORY COUNCIL

## Purpose

The South Australian Prevocational Medical Officer (PMO) Forum was established in September 2002, called SA MET JMO Forum, renamed in 2025 to reflect the new National Framework for Prevocational (PGY1 and PGY2) Medical Training Framework. It was established a group of Prevocational Medical Officer representatives from the teaching hospitals in South Australia, following a recommendation from the Council for Early Postgraduate Training in South Australia, CEPTSA (now SA Medical Education and Training). The purpose of the Forum is to provide an opportunity for PMOs across the state to meet, identify and action issues facing them as a group.

## Representation

The Forum provides representation for PMOs, including interns, Resident Medical Officers (RMOs PGY2+) and medical students. The majority of the PMOs are prevocational but may also include PMOs who have previously been on the Forum and are now in their first year of a training program.

Please note:

- > Where "PMO" is used in this document, it also refers to medical students; and
- > Where PGY2 is used in this document, it refers to RMO positions postgraduate year 2 and above.

## Reporting

The PMO Forum through its Chair and Deputy Chair report to the Australian Prevocational Medical Officer Committee (APMOC). The PMO Forum may also report to the SA MET Health Advisory Council and the SA MET Doctors-In-Training Committee (DiTC).

## Functions

The functions of the PMO Forum include:

### Representation:

1. Receive feedback regarding relevant training issues from PMOs including:
  - Prevocational education and training;
  - Industrial issues including workplace flexibility;
  - PMO welfare, health and wellbeing;
2. Provide an opportunity for PMOs from SA hospitals to meet to discuss common issues;
3. To advocate for the interests of PMOs in relation to education, training and welfare.

### Advisory and consultation:

1. Provide stakeholder feedback as an independent reference group on behalf of PMOs, particularly to SA MET;
2. Provide input on position statements, policies, guidelines and activities related to the education, training, health and welfare of PMOs;
3. Liaise and consult with external and affiliated organisations such as the SA MET Unit and Council, The Australasian Prevocational Medical Officers' Committee (APMOC), the SA MET DiTC, the SA Salaried Medical Officer Association (SASMOA) and the Australian Medical Association (AMA) on issues related to medical education, training, health and welfare.

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### Operational:

1. To participate as a stakeholder and South Australian representative on the APMOC through its Chair, and to feedback national issues to the SA PMO Forum.
2. To participate in the annual Australian and New Zealand Prevocational Medical Education Forum, including encouraging the attendance of South Australian PMOs to attend where possible.

## Membership

The membership of the PMO Forum will be as follows:

- > Hospital/Network representatives from all LHN including
  - Northern Adelaide Local Health Network
  - Central Adelaide Local Health Network
  - Southern Adelaide Local Health Network
  - Regional Local Health Networks
- > Training representatives
  - The Adelaide Prevocational Psychiatry Program
  - Women's and Children's Health Network
- > Student representatives
  - Adelaide Medical Students' Society
  - Flinders Medical Students' Society
- > Indigenous PMO representative
- > Chairpersons
  - Chair
  - Deputy Chair
  - Immediate past Chair
- > Co-opted members as determined by the PMO Forum.
- > Clinical Advisors
  - Senior doctors

Membership term:

- > PMO and Student Representative positions will be for a period of 1 year. Members will reapply if they wish to continue on the PMO Forum.

Membership vacancies:

- > A membership vacancy may occur when:
  - A member's term of office expires.
  - A member resigns by notice in writing to the Chair of the PMO Forum.
  - A member is no longer employed by the institution at which they were elected.
  - A member is absent for two consecutive meetings of the Committee without informing the Chair and Deputy Chair.

## Member appointment criteria and responsibilities

Responsibilities of members for communication:

- > Reporting back to Hospitals/Networks
  - Members should be aware that their role also includes a responsibility to report back to their hospital PMO groups about issues discussed within the PMO Forum. For this purpose, all contents, papers, discussions, minutes and reports will be deemed non-confidential and for circulation by Representatives unless otherwise specified by the

Chair/Deputy Chair.

> Conflict of Interest

- Members must identify any real or perceived conflicts of interest and to withdraw from any discussion or decisions concerning such a matter. It is at the Chair's discretion whether a member with a conflict of interest remains in the meeting or not during discussion but the member must withdraw from any decision-making vote.

> Confidentiality

- Proceedings of the committee are not confidential and members can disclose discussions or decisions, unless there is explicit agreement during a meeting that a discussion or decision is confidential and is noted in the minutes, that this is not appropriate.

> The membership of the PMO Forum will be as follows:

Chair	
Criteria:	<ul style="list-style-type: none"><li>▪ Elected as Deputy Chair by PMO Forum members the previous year, ideally continues on in PGY2/PGY3 year as Chair.</li><li>▪ If an elected intern Deputy Chair is unable to continue on in PGY2 as Chair, the PMO Forum will elect another PGY2 Chair by expressions of interest, preferably from a member who has previously served on the PMO Forum.</li></ul>
Responsibilities:	<ul style="list-style-type: none"><li>▪ To Chair the PMO Forum</li><li>▪ To sit as a representative on the Australasian Prevocational Medical Officers' Committee (APMOC) for the duration of their term as Chair.</li><li>▪ To sit as a representative on the SA MET DiTC for the duration of their term as Chair.</li></ul>
Deputy Chair	
Criteria:	<ul style="list-style-type: none"><li>▪ A PGY1 initially elected as a hospital/network representative, then elected as Deputy Chair by expression of interest at the first PMO Forum meeting of the year and will ideally succeed as Chair of the PMO Forum the following calendar year.</li><li>▪ Deputy Chair voted by PMO Forum members. If multiple candidates come forward there will be a private ballot by all representatives attending the first meeting of the year.</li><li>▪ If the Deputy Chair is unable to continue in the position, a letter of resignation must be forwarded to SA MET. Another member of the PMO forum will be elected as Deputy Chair at the first meeting following receipt of the resignation letter.</li></ul>
Responsibilities:	<ul style="list-style-type: none"><li>▪ Support and assist the Chair, deputising in their absence including the SA MET DiTC and APMOC for the duration of their term as Deputy Chair.</li></ul>
Immediate Past Chair	
Criteria:	<ul style="list-style-type: none"><li>▪ Ex-officio position. The Immediate Past Chair to continue if possible as a member of the Forum for 12 months to ensure continuity of work and maintenance of corporate knowledge.</li><li>▪ They can continue as a representative member as per the protocol below.</li></ul>
Responsibilities:	<ul style="list-style-type: none"><li>▪ Provide guidance, expertise and support to the PMO Forum and the commencing Chair/Deputy Chair.</li></ul>
Representative members	
Criteria:	<ul style="list-style-type: none"><li>▪ Intern representatives are either elected by PMO's at their respective</li></ul>

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	<p>hospitals/networks or facilitated by each hospital/network Trainee Medical Officer Unit (TMO Unit) prior to the first PMO Forum meeting in each calendar year or interns can nominate through the expression of interest process.</p> <ul style="list-style-type: none"> <li>▪ PGY2 representatives and clinical advisors will be invited by SA MET to express interest and asked to provide a nomination statement. Expressions of interest will be considered by the Chair/Deputy-Chair who will then appoint representatives.</li> <li>▪ Medical Student members (preferably in their final year of studies) will be appointed/nominated by their respective organisation (student representative societies).</li> </ul> <p>Elections/Appointments of representatives will be as follows:</p> <ul style="list-style-type: none"> <li>▪ Hospital/Network representatives <ul style="list-style-type: none"> <li>▪ Northern Adelaide Local Health Network <i>Up to 4 interns and 3 PGY2 Representatives</i></li> <li>▪ Central Adelaide Local Health Network <i>Up to 4 interns and 3 PGY2 Representatives</i></li> <li>▪ Southern Adelaide Local Health Network <i>Up to 4 interns and 3 PGY2 Representatives</i></li> <li>▪ Regional Local Health Networks <ul style="list-style-type: none"> <li>▪ Barossa Hills Fleurieu Local Health Network</li> <li>▪ Eyre and Far North Local Health Network</li> <li>▪ Flinders and Upper North Local Health Network</li> <li>▪ Limestone Coast Local Health Network</li> <li>▪ Riverland Mallee Coorong Local Health Network</li> <li>▪ Yorke and Northern Local Health Network</li> </ul>  <i>Up to 2 interns and 2 PGY2 Representatives each</i></li> </ul> </li> <li>▪ Training representatives <ul style="list-style-type: none"> <li>▪ The Adelaide Prevocational Psychiatry Program <i>Up to 3 PGY2 Representatives</i></li> <li>▪ Women's and Children's Health Network <i>Up to 3 PGY2 Representatives</i></li> </ul> </li> <li>▪ Student representatives <ul style="list-style-type: none"> <li>▪ Adelaide Medical Students' Society <i>1 Student Representative</i></li> <li>▪ Flinders Medical Students' Society <i>1 Student Representative</i></li> </ul> </li> <li>▪ Indigenous PMO representative</li> <li>▪ Chairpersons <ul style="list-style-type: none"> <li>▪ Chair <i>Preferably PGY2/PGY3</i></li> <li>▪ Deputy Chair <i>Preferably PGY1</i></li> <li>▪ Immediate past Chair</li> </ul> </li> <li>▪ Co-opted members as determined by the PMO Forum</li> <li>▪ Clinical Advisors <ul style="list-style-type: none"> <li>▪ Senior doctors <i>Up to 4, preferably PGY4 and above</i></li> </ul> </li> </ul>
Responsibilities:	<ul style="list-style-type: none"> <li>▪ Attend every PMO Forum meeting, communicating with secretariat</li> </ul>

	<p>support or Chair if apology.</p> <ul style="list-style-type: none"> <li>▪ Participate in email discussion, consultation, and papers related to PMO education, training and welfare in between meetings.</li> <li>▪ Opportunities:           <ul style="list-style-type: none"> <li>▪ Nominate, lead and work on projects to improve PMO education, training and welfare.</li> <li>▪ Where work has been completed, publish and present papers on behalf of the PMO Forum in publications and/or at medical education conferences.</li> <li>▪ Attend the national Prevocational Medical Education Conference (financial support may be provided by SA MET, SA Health or hospital/networks)</li> <li>▪ Receive a letter of recognition at the conclusion of term acknowledging contributions made to the PMO Forum.</li> <li>▪ To sit as a PMO Forum representative on formal SA MET Subcommittees (Education Committee, Accreditation Committee)</li> <li>▪ To join SA MET Accreditation Teams as a PMO member.</li> </ul> </li> <li>▪ Medical student representatives are to provide input regarding education and training issues affecting medical students.</li> </ul>
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## Meeting Arrangements

Meeting venue:	<ul style="list-style-type: none"> <li>▪ Meetings are held online, likely via Microsoft Teams.</li> </ul>
Meeting agenda:	<ul style="list-style-type: none"> <li>▪ Meeting agenda will generally be set by the Chair/Deputy Chair. Any suggestions from representatives for agenda items should be sent to the Chair/Deputy Chair for consideration.</li> </ul>
Meeting Quorum:	<ul style="list-style-type: none"> <li>▪ The quorum is to constitute 50% of representatives in attendance, plus one (+ 1).</li> </ul>
Voting:	<ul style="list-style-type: none"> <li>▪ As necessary.</li> <li>▪ Where a proxy attends the meeting on behalf of a member, the proxy will be entitled to the same voting rights as the member.</li> <li>▪ The Chair will declare to the forum that the vote is tied and that they will exercise a casting vote.</li> <li>▪ Where the Chair resolves to hold a vote, the Chair is to vote only when a casting vote is required.</li> </ul>
Attendance, participation and Accountability:	<ul style="list-style-type: none"> <li>▪ Five meetings of 1.5hr duration, will be held per annum.</li> <li>▪ It is the professional expectation that all representatives will attend all meetings where possible and participate in out-of-meeting business via email, meetings, or telephone as required. A member's position on the committee will be considered vacant if they are absent for two consecutive meetings of the Committee without informing the Chair and Deputy Chair.</li> <li>▪ Attendance records for each member will be kept and circulated to members of the PMO Forum following each meeting. As members are supported by their hospital/network to attend meetings on behalf of their peers, these records will also be provided to each hospital TMO Unit to promote accountability and transparency.</li> </ul>
Proxy:	<ul style="list-style-type: none"> <li>▪ Where a Representative is unable to attend a meeting, the Representative must make due efforts to ensure that at least one Representative from</li> </ul>

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	their Hospital is able to attend.
Reporting:	<ul style="list-style-type: none"> <li>Reports from PMO Forum meetings may be provided, as required to other organisations advocating on PMO issues, such as SA MET, SA Health, APMOC, SASMOA, and RMO Associations.</li> </ul>
Agenda, minutes and papers:	<ul style="list-style-type: none"> <li>Agenda and papers to be distributed to members one week before each meeting by secretariat. It is expected that members will read papers prior to the meeting.</li> </ul>
Distribution of minutes:	<ul style="list-style-type: none"> <li>Minutes and Action Items will be finalised and distributed one week after each meeting action items will be distributed via email to all members.</li> <li>Those responsible for actions will be recorded and will be expected to undertake the agreed actions.</li> </ul>
Record keeping:	<ul style="list-style-type: none"> <li>Minutes will be taken and SA MET will hold a complete set of all documentation for 5 years.</li> </ul>

## Role of South Australian Medical Education and Training (SA MET) Unit

The PMO Forum has been set up as an independent forum for Prevocational doctors from each hospital to meet, discuss and identify issues facing them as a group. It is supported in this by the South Australian Medical Education and Training (SA MET) Unit, and individual hospitals and Local Health Networks. SA MET will provide secretariat support to the PMO Forum, ensuring preparation of papers for each meeting, correspondence with PMO Forum members as required, and documentation of minutes. SA MET may also from time to time provide other support for the activities of the PMO Forum such as in an advisory or facilitating role.

## PMO Forum and the Doctors in Training Committee (DiTC)

The PMO Forum is a representative committee of PMO members from each hospital. Its core function is to provide hospital-based representation and facilitate discussion of common issues affecting prevocational PMOs at a grassroots level.

The SA MET DiTC is a formal subcommittee of the SA MET Advisory Council whose objective is to conduct work supporting the SA MET Health Advisory Council around issues relevant to prevocational and vocational medical training and education.

It is expected that the PMO Forum and the SA MET Doctors-in-Training Committee will on occasion have overlapping functions, but largely operate in a cooperative and complementary fashion.

## Document History

Frequency of evaluation for committee and Terms of Reference:

- > These Terms of Reference will be reviewed bi-annually or as required.

Version control:

Date effective	Author/Editor	Version	Approved by	Description
December 2013	SA MET Unit	1.0	SA MET Health Advisory Council	Original Document
2023	Project Officer, Medical Education and Workforce	1.0	Approved out of session by 2023 PMO Forum members.	Terms of Reference have been updated to amend inconsistencies with membership positions across other committees including DiT and APMOC.
5 March 2025	Project Officer, Accreditation	1.1	Approved by 2025 PMO Forum members in meeting.	Updates to terminology for referenced committees/ membership positions.
03 December 2025	Project Officer, Accreditation	2.0	Approved by 2025 PMO Forum members out of session.	Update to terms of reference to new SA MET branding and change from Junior to Prevocational throughout. (Now PMO Forum)

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