

Guideline for the Assessment Appeals and Independent Review Panels

Purpose

The AMC National Framework for Prevocational (PGY1 and PGY2) Medical Training requires that an Assessment Review Panel be appointed to monitor and make decisions about the longitudinal progress of prevocational doctors. This guideline describes how health services and the Assessment Review Panel could facilitate an appeal of a term assessment.

An appeals process that provides a fair and reasonable opportunity to challenge the decision is likely to result in decisions that are ultimately correct.

Principles

- The prevocational doctor appeal process must align with health service policies and be aligned with the *AMCs Guide to Assessment Review Panels*.
- Decisions made in good faith by a properly constituted Assessment Review Panel, following due process, are not subject to negotiation.
- Appeals review the process, not the performance outcome itself.
- Supervisors and panel members are supported to provide honest, evidence-based assessments.
- The Executive Director of Medical Services (EDMS) ensures independence and oversight of the appeals process.

Grounds for Appeal

Appeals are limited to:

- An error in law or due process in forming the original decision; relates to whether the decision was made fairly, lawfully, and in line with required processes.
- Relevant and significant information was not considered, or not properly considered; applies where important information that could affect the outcome was overlooked or not given appropriate weight.
- Irrelevant information was considered in making the original decision; occurs when information that should not influence the decision is taken into account.
- Procedures required by organisational policy were not followed; focuses on whether the organisation adhered to its own documented processes.
- The original decision was made for an improper purpose; applies where the decision was made for a reason outside the intended purpose of assessment processes.
- The original decision was made by applying a rule or policy without considering the individual case; occurs when a decision is made rigidly, without considering the specific circumstances of the prevocational doctor.
- The original decision was clearly inconsistent with the evidence and arguments presented; applies where the decision does not reasonably align with the available evidence.

Appeals are not intended to:

- Reassess clinical performance.
- Replace professional judgement with a different opinion.
- Negotiate or overturn decisions made appropriately and in good faith.

The process is intended to ensure decisions are fair, consistent, evidence-based, and made in accordance with established health service policies and procedures.

Lodging an Appeal

Appeals must be submitted by a prevocational doctor directly to the EDMS within 5–10 working days of notification of the assessment outcome. The email must include the following information:

- Date received assessment
- Term name
- Term Supervisor
- Decision requested for appeal
- Grounds for appeal. *Describe the ground for the appeal based on the limitations*
- Supporting documentation

Once an appeal has been received, the EDMS should:

1. Acknowledge receipt of appeal within 5 business days.
2. Undertake a preliminary review to ensure valid grounds exist. If not, the appeal is declined with rationale provided to the prevocational doctor.
3. Establish an Independent Review Panel for the assessment of whether due process was followed. The panel do not reassess clinical performance.

Establishment of Independent Review Panel

The EDMS is responsible for establishing an Independent Review Panel to ensure an impartial review. Elements of a strong and effective appeals process include incorporating the principles of procedural fairness, natural justice, timeliness and transparency of decision-making. This includes written documentation of reasons for decisions to be issued. The process should also consider the principle of confidentiality and make all efforts to ensure confidentiality in line with relevant health service policy and reporting requirements.

The panel should be independent of the original Assessment Review Panel and could include representatives from another health service to support the impartial review. Membership of the panel should include, but not limited to:

- Panel Chair – EDMS or Senior Medical Practitioner (not involved in original decision)
- Director of Clinical Training
- Medical Education Officer
- Medical Education Registrar
- Term supervisor from another unit or health service
- Human Resource and/or SA MET Health Advisory Council Representative

Outcome Determination

Utilising the Independent Review Panel Report - Prevocational Doctor Assessment Appeal (appendix 1) the panel are required to review, assess and provide a determination on the final outcome of the appeal. The panel may:

- Uphold the original decision
- Refer the matter back for reconsideration.
- Recommend a new review process.

The Independent Review Panel Report - Prevocational Doctor Assessment Appeal Report should be confidentially maintained and provided to the Assessment Review Panel.

Communication of Outcome

The EDMS should provide written confirmation to the prevocational doctor on the outcomes of the decision. That includes the rational and further actions to be taken.

Escalation Pathways

- Should further escalation be required, please refer to the LHN grievance policy.
- Prevocational doctors' performance is assessed and reviewed to meet both registration and employment requirements. When safety concerns are raised, clear procedures are important for those responsible for the prevocational training program to inform both the employer and the regulator (Ahpra), where appropriate.

Statement of Progress

Should a PGY1 doctor cease employment with the health service prior to completion of their medical internship year, the prevocational doctor should be provided with a Medical Internship Statement of Progress signed by the EDMS, or delegated authority.

The Statement of Progress should detail:

- total completed weeks of service (FTE)
- period of employment
- accredited terms satisfactorily completed, including:
 - clinical patient care category
 - specialty/sub-specialty

The Statement of Progress is intended to provide formal confirmation that the completed terms were undertaken in accredited positions within an accredited internship program, in accordance with the requirements of the Medical Board of Australia's registration standard, [*Granting general registration as a medical practitioner to Australian and New Zealand medical graduates on completion of postgraduate year one training.*](#)

Appendix 1: Independent Review Panel Report Template

Independent Review Panel Report - Prevocational Doctor Assessment Appeal <i>This report is strictly confidential and intended only for restricted personnel.</i>	
Prevocational Doctor Name:	
Local Health Network:	
Panel Meeting Date:	
Panel Members	<ul style="list-style-type: none"> • [Name], Chair • [Name] • [Name] • [Name] • [Name]
Background	<ul style="list-style-type: none"> • Prevocational training is assessed in accordance with the AMCs Training and assessment – Training and assessment requirements for prevocational (PGY1 and PGY2) training programs. • PGY1s are expected to satisfactorily meet the Medical Board’s registration standard, Granting general registration as a medical practitioner to Australian and New Zealand medical graduates on completion of postgraduate year one training, that defines the requirements that Australian and New Zealand medical graduates must meet to be eligible for general registration. • [Original decision/outcome being appealed] • [Timeline of relevant events (assessments, feedback, original decision, appeal submission)]
Grounds for Appeal	<p>Detail the ground for appeal as described by the prevocational doctor. Must be limited to:</p> <ul style="list-style-type: none"> • Error in law or due process in forming the original decision • Relevant and significant information was not considered or not properly considered • Irrelevant information was considered • Required organisational procedures were not observed • Decision made for an unintended purpose • Decision applied rigid rules without regard to case merits • Decision inconsistent with evidence and arguments presented
Scope of Review	<ul style="list-style-type: none"> • Included: <ul style="list-style-type: none"> ○ Original assessment documents, feedback, and evidence considered ○ Submissions from intern and training provider ○ Interviews/clarifications if needed • Excluded: <ul style="list-style-type: none"> ○ Re-marking clinical performance or subjective reassessment ○ New evidence unrelated to procedural concerns (unless relevant to fairness)

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Methodology	<p>Describe how the panel review and assess the appeal against the grounds alleged.</p> <ul style="list-style-type: none"> • Documentation reviewed • Interviews conducted (if any) • Policies referenced • Timeframe of review • Confirmation of independence of panel members • Assurance that procedural fairness, natural justice, timeliness, transparency, and confidentiality were maintained
Summary of Evidence	<p>Prevocational Doctor Submission</p> <ul style="list-style-type: none"> • Key arguments and supporting evidence <p>Assessment Review Panel Report</p> <ul style="list-style-type: none"> • Rationale for original decision • Evidence referenced <p>Assessment Documentation</p> <ul style="list-style-type: none"> • Summary of performance/assessment outcomes • Relevant policies and procedures followed
Findings by Ground of Appeal	<ul style="list-style-type: none"> • Ground: [e.g., Relevant information not considered] • Claim: [Prevocational doctors' statement] • Policy/standard referenced: [National Standard 1.6 or 1.3.7 / LHN policy] • Panel findings: [Summary of evidence and evaluation]
Determination	<p>Clear single statement:</p> <ul style="list-style-type: none"> • Appeal not upheld, Confirm original decision • Appeal partially upheld, or • Appeal upheld <p>If partially upheld or upheld, options may include a Reconsideration by the Assessment Review Panel, Remediation or re-assessment (if process error impacted outcome).</p>