

Accreditation Report



Flinders and Upper North Local Health Network

Accreditation Report Details

Date of Assessment Visit:	8 August 2024
Accreditation Surveyors:	Dr Ben Teague (Lead Surveyor) Ms Sharon Frahn (Medical Education) Dr Stefan Court-Kowalski (Prevocational Doctor) Ms Simone Bradey (SA MET Unit Representative) Ms Colleen Cryans (SA MET Unit Representative)
Chief Executive Officer:	Mr Craig Packard
Executive Director of Medical Services:	Dr Lindy Washington
Director of Clinical Training:	Dr Nadeeshani Assiriyage
Medical Education Officer/s:	<i>Vacant</i>
Date endorsed by the SA MET Health Advisory Council:	27 November 2024
Accreditation Expiry Date:	28 February 2027

Accreditation Decision

Approved for 2 years with 20 conditions

Executive Summary

The Flinders and Upper North Local Health Network (FUNLHN) Strategic Plan 2021-2026 indicates a strong commitment to prevocational medical education and training. This commitment is evident in strategic pillar 5 Innovation – where FUNLHN plan to “Foster curiosity and creativity and embrace new technology” including learning and plan to have “targets for innovation training”. This reveals the organisation's dedication to nurturing a learning culture and are reflected in the number of study opportunities across the workforce. The FUNLHN Clinical Engagement Strategy 2023-2026 details their approach to engaging clinicians across all levels and specialties of the network. This aligns with the priorities of the FUNLHN Strategic Plan 2021-2026, and includes a strong focus on consumer needs, Aboriginal Health, People, Equity, Quality and Safety and Innovation.

FUNLHN has developed strong partnerships with the local Aboriginal and Torres Strait Islander communities focusing on cultural safety, supportive systems, and culturally safe clinical practices. They work closely with other local health services including the Bunyarra Medical Clinic and the Nunyara and Pika Wiya Aboriginal Health Services.

The key leadership roles of the Director of Medical Services (DMS) have been established, and the Executive Director of Medical Services (EDMS) has been permanently appointed to the position. This is expected to have a stabilising effect and establish and encourage medical education to be embedded into the LHN's culture.

Resources allocated to the Medical Education Unit (MEU) have been steadily increasing. This will support prevocational doctors in accordance with the revised Australian Medical Council's (AMC) National Framework for Prevocational (PGY1 and PGY2) Medical Training. The Accreditation survey team recognises that the AMC National Framework is being implemented in stages, and there are still areas within the network that need further development over time.

The Medical Education Training Committee (METC), chaired by the Director of Clinical Training (DCT) with a membership that including the EDMS, senior clinicians, prevocational doctors, and external partners, monitors medical education at FUNLHN. Meeting monthly, it reviews the Education and Training Program (ETP) and facilitates regular communication between the FUNLHN Executive and prevocational doctors.

There are three prevocational doctors working in the FUNLHN Medical Training Program (MTP), this allows more personalised educational and pastoral support to meet their needs. The prevocational doctors interviewed emphasised that the (Medical Education Unit) MEU has been highly supportive in addressing their feedback and helping them navigate any challenges encountered. The MEU has maintained an ‘open-door’ policy, creating an environment of safety and openness for the prevocational doctors. This approach is also embraced by medical leadership, promoting a flattened hierarchy, and giving prevocational doctors the opportunity to collaborate closely with senior consultants.

A wide variety of generalist terms for prevocational doctors were offered, including placements within primary care, emergency medicine, anaesthetics, mental health inpatient unit, and obstetrics and gynaecology. These terms provided comprehensive clinical training, equipping prevocational doctors with a solid foundation for lifelong learning and further postgraduate education.

Supervision is provided by Term Supervisors and senior clinicians within each specialty. To ensure all supervisors meet supervision criteria, FUNLHN uses the Term Supervisor Selection Guide. Supervisor training is conducted through the relevant colleges and will be expanded in line with the AMC National Framework for Prevocational Medical Training (PGY1 and PGY2). Assessment of prevocational doctors is conducted by Term Supervisors at both mid-term and end-of-term evaluations.

Due to the small number of prevocational doctors, FUNLHN holds a joint organisational orientation with the Eyre and Far North Local Health Network (EFNLHN). The program is located over multiple sites and includes introductions to key personnel, engagement with outgoing prevocational doctors, cultural awareness, mandatory training sessions and sessions with South Australian Salaried Medical Officers Association (SASMOA), the Australian Medical Association (AMA) and the Royal Australian College of General Practitioners (RACGP).