

3C

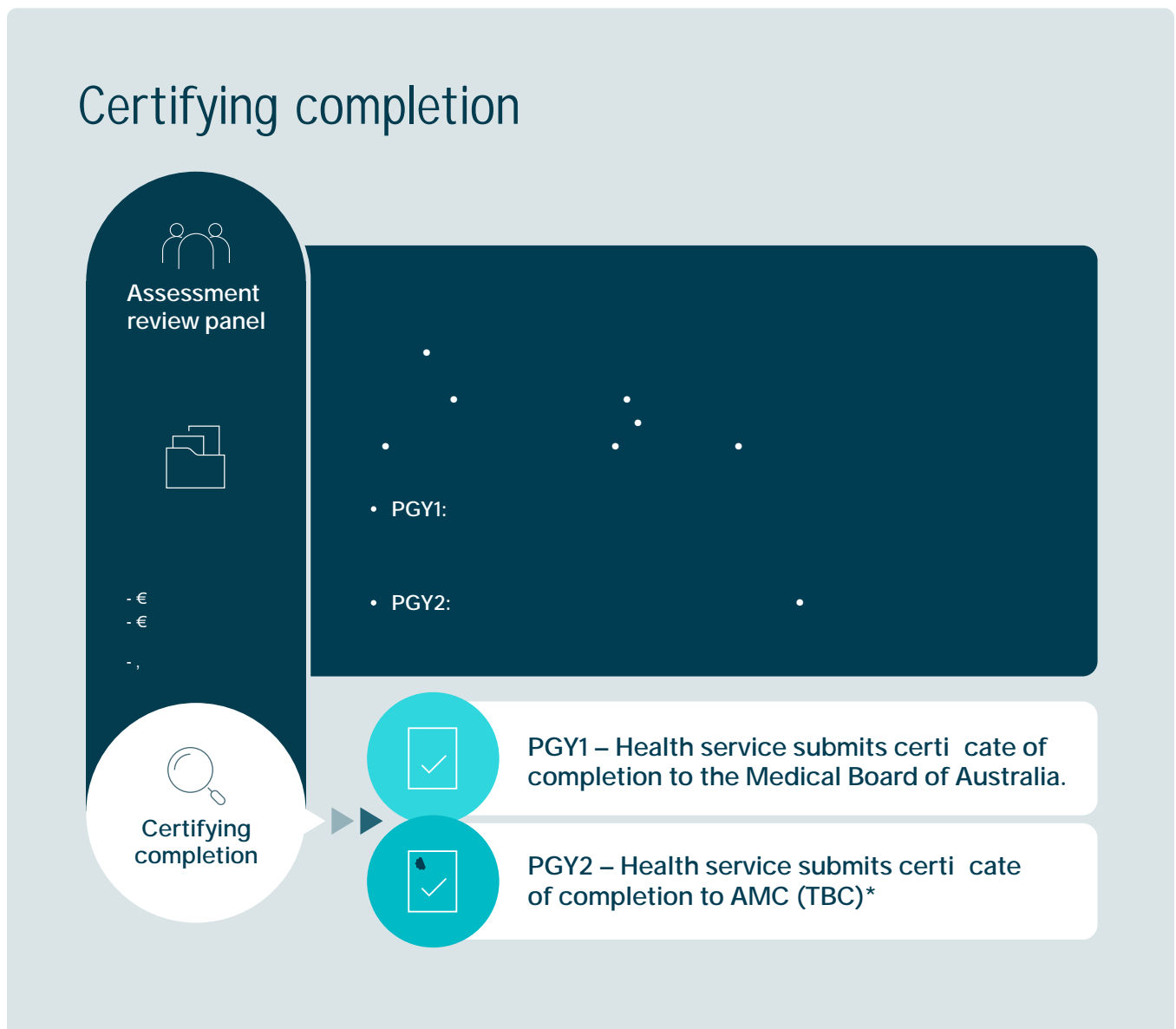
3C – Certifying completion of PGY1 and PGY2 training

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At the end of each year an assessment review panel makes a global judgement on whether to recommend progression to the next stage of training. Note that the requirements for certifying completion of PGY1 and PGY2 are different, and that satisfactory completion of PGY1 remains the point at which the Medical Board of Australia makes a decision to grant general registration.

Figure 8 – Overview of process for certifying completion of PGY1 and PGY2 training



Assessment review panel composition

Prevocational training providers have some flexibility in determining the members of the assessment review panel based on what is practical in their circumstances. The panel must have at least three members, who should have a sound understanding of procedural fairness and prevocational training requirements. Members might include the following roles: DCT, DMS or chief medical officer (CMO) or delegate, medical education officer (MEO), an individual with HR expertise, experienced supervisor/s and/or a consumer. The role of an individual with HR expertise is to

Outcome	Assessment criteria
Outcome 1	Evidence that the prevocational doctor has completed the minimum time requirement for the year.
Outcome 2	Evidence that the prevocational doctor has met the requirements for clinical exposure outlined in <i>N</i> Note: Finalising a mandatory term requirement for PGY1 depends on the review of the Medical Board of Australia's <i>G</i> <i>.</i> The wording will be confirmed once this is complete.
Outcome 3	The level of detail provided will depend on the prevocational doctor's overall performance – see Table 3.
Outcome 4	<i>Evidence</i> Evidence that a minimum of 10 EPA assessments have been completed, including one assessment of EPA 1 in each term and at least 2 assessments of EPAs 2–4. <i>The level of detail provided will depend on the prevocational doctor's overall performance (see Table 3). For the majority of prevocational doctors there will be a summary of the levels of entrustability for each EPA. For more complex decisions, the panel may review all EPA forms.</i> Note: The goal of prevocational training is to reach the required level of entrustability by the end of the year, therefore it is not necessary that entrustability is reached for every EPA during the year.
Outcome 5	The e-portfolio record of learning includes a mechanism for demonstrating that each outcome statement is achieved at the end of both PGY1 and PGY2. Evidence of achieving outcomes includes: <ul style="list-style-type: none"> • mid- and end-of-term assessments • assessment of EPAs (outcome statements have been mapped to the EPAs) • documentation uploaded by prevocational doctors of other activities to achieve outcome statements (for example, attending a course or workshop or completing an online training module).

Table 3: Prevocational assessment and general registration	

Certifying completion – PGY1 for general registration

Prevocational training providers must certify satisfactory completion of internship. On the basis of the information provided, the Medical Board of Australia makes a decision on granting general registration to the intern.

The Board requires only the completion of the [C](#) [Form](#), which is available on the Board's website. The training provider should store term and EPA assessment reports and supporting documentation, including outcomes of any remediation, in case the Board seeks additional information.

The Board's requirements for certification, as per the [G](#), have been clarified as:

Term supervisors are expected to indicate whether interns have satisfactorily 'passed' each term, but the Medical Board will consider the totality of advice in deciding whether to grant general registration. An intern who has performed marginally or unsatisfactorily in a specified term but who has demonstrated 'significant' progress with evidence of remediation may be deemed to have met the standard expected for general registration by the end of the year.