

# Implementing the Australian Curriculum Framework for Junior Doctors in the Workplace

## Who should be using the ACF?

- ▶ Everyone involved in Prevocational Medical Education regardless of a junior doctor's planned specialisation or training location

# Prevocational Medical Education

Prevocational Phase



**ACFJD**



## What is the purpose of the Prevocational Phase of Medical Education?

- ▶ Application of undergraduate knowledge and skills to the real world
- ▶ Attainment of new knowledge, skills and behaviours
- ▶ Interaction in the workplace with other health professionals
- ▶ Progressive increase in levels of autonomy and responsibility
- ▶ Requirement for Accountability for own practice
- ▶ Undertake further career choices

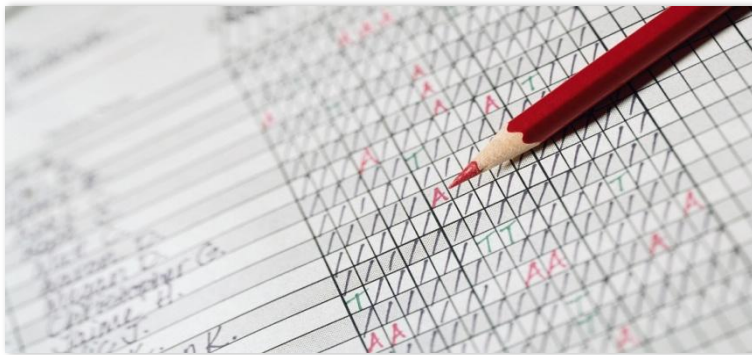
## What is the ACF?

- ▶ Provides an educational template that clearly identifies the core capabilities that are required to provide quality health care



## How was the ACF developed?

- ▶ A Writing Group (of Clinicians, Junior Doctors and Educators) under the auspices of CPMEC, developed the initial blueprint, which was then released for extensive national consultation
- ▶ Launched November 2006





## How is the ACF constructed?

- ▶ 3 Core Areas
  - Clinical Management
  - Communication
  - Professionalism
- ▶ Each Area divided into Topics
- ▶ Each Topic divided into Categories
- ▶ Each Category divided into Capabilities (knowledge, skills and behaviours)

## Australian Curriculum Framework for Junior Doctors

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### Structure of the Australian Curriculum Framework for Junior Doctors

The Curriculum framework is built around three learning areas: Clinical Management, Communication and Professionalism.

These areas have been divided into a total of eleven categories.

Each category is further subdivided into four to seven learning topics. These learning topics have been identified in the literature and from supervisors' experience as being critical to safe prevocational practice.



Each topic includes three competencies or capabilities.

While it is expected that most of the competencies will be mastered by the end of internship, it is anticipated that a trainee will become more proficient and skilful in these competencies in subsequent postgraduate years.

Some competencies and capabilities have been labelled as 'advanced', suggesting that they are more likely to be achieved in the second post-graduate year.

#### Clinical Management: Safe Patient Care : Systems

Give feedback on this topic

##### Capabilities:

- Understand the uses & limitations of electronic patient information & decision-support systems
- Use electronic resources in patient care e.g. obtain results, discharge summaries, pharmacopoeia
- Understand & comply with policies regarding IT e.g. passwords, e-mail & internet

##### Useful links to learning & assessment resources:

Description or web address

This feature will be activated once the curriculum is finalised



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### CLINICAL MANAGEMENT

Safe Patient Care	Systems	Risk & prevention	Adverse events & near misses	Public health	Infection control	Radiation safety	Medication safety
Patient Assessment	Patient identification	History & examination	Problem formulation	Investigations	Referral & consultation		
Emergencies	Assessment	Prioritisation	Basic Life Support	Advanced Life Support	Acute patient transfer		
Patient Management	Management options	Therapeutics	Pain management	Fluid & electrolyte management	Subacute care	Ambulatory & community care	Discharge planning
Skills & Procedures	Decision-making	Informed consent	Preparation & anaesthesia	Procedures	Post-procedure		



### COMMUNICATION

Patient Interaction	Context	Respect	Providing information	Meetings with families or carers	Breaking bad news	Open disclosure	Complaints
Managing Information	Written	Electronic	Prescribing	Health records	Evidence-based practice	Handover	
Working in Teams	Team structure	Team dynamics	Teams in action	Case presentation			



### PROFESSIONALISM

Doctor & Society	Access to healthcare	Culture, society & healthcare	Indigenous patients	Professional standards	Medicine & the law	Health promotion	Healthcare resources
Professional Behaviour	Professional responsibility	Time management	Personal well-being	Ethical practice	Practitioner in difficulty	Doctors as leaders	
Teaching & Learning	Self-directed learning	Teaching	Supervision	Career development			

v3.4

## How does the ACF assist JMOs?

- ▶ JMOs can:
  - Self assess their confidence with the ACF capabilities
  - Identify their individual learning needs
  - Monitor progress in achieving the ACF capabilities
  - Engage in discussion with their supervisors as to their specific learning needs and how best to address these

## How does the ACF assist Clinical Teachers?

- ▶ The ACF clarifies for ALL clinical teachers what needs to be taught, and what learning opportunities should be provided across the prevocational years
- ▶ Clinical teachers can:
  - Map the learning opportunities specific to their terms to the ACF
  - Identify resources to assist JMOs to meet their learning needs
  - Liaise with their Medical Education Unit to ensure achievement of capabilities across the Framework

## Want to know more ...

- ▶ Contact your Medical Education Unit on ...

CPMEC would like to thank Queensland Health for assistance in developing this presentation

<http://www.cpmecc.org.au>