

General Practice:	Benal	la Church Street Surg	lery			
Contact	Mrs Meryl Jerome				Contact	03 5762 1022
Term Supervisor:	Dr Peter Dr Gary (Dr Geran Dr Brian All docto general p	rd de Crespigny Slot D'Brien d Brownstein	doctor ca	an be	Email:	meryl@churchstreetsurgery.com.au
Unit/Rotation	General Practice Pare			Pare	nt Health	Benalla Health
Duration (no. weeks):	20	Type of Post? (PGY1 or PGY2)	PGY1	v	Practice edited by RTP for ocational raining?)	Yes

*For intern posts refer to the *Guide for Interns in Victoria* (<u>http://www.pmcv.com.au/resources/publications</u>) and the *National Intern Training Framework* (<u>http://www.amc.org.au/index.php/ar/psa</u>).

Intern/PGY2 Requirements					
Does the Intern/PGY2 have a dedicated consulting room?	Yes				



Does the Intern/PGY2 have livin provided?	g accommodation	Yes				
Does the Intern/PGY2 accompar patients off-site in a local hospit please specify which facility/faci	al or other facility? If so,	Yes During this rotation the intern will be rostered to attend the local Aged Care facilities where the supervisor (s) have patients. They will also attend on anaesthetic roster and obstetrics visits on an ad hoc basis. Interns will also spend time with a variety of visiting medical specialists including Physicians, surgeons etc				
Parent Health Service Details						
Parent Health Service	Name: Benalla Health					
Parent Health Service	Name:					
Supervisor of Intern Training (S						
applicable:	Time allocated to PGY2 activities (FTE):					
Parent Health Service	Name: Dr Jack Best					
Director of Clinical						
Training (DCT) if applicable	Time allocated to PGY2 activities (FTE):					
Nature of relationship between the Practice & the Parent Health Service (e.g. level of contact about HMO staffing & management, support provided by parent hospital, shared education pro <u>c</u> existing administrative arrangements (if any), visits by senior staff, etc.)						
The Benalla Church Street Surgery general practitioners provide VMO services to Benalla Health Benalla Health coordinate the following medical meetings:						
Medical Administration						
Clinical Reviews						
The Benalla Church Street Surgery general practitioners provide VMO services in obstetrics and anaesthetics						
services to Benalla Health.						
Is there a secondment agreement in place? Yes						
Distance of General Practice from Parent						
Health Service						

1. Overview of Practice

approx. clinical catchment size, clinical casemix, relationships with local health services etc.



The approximate patient catchment of Benalla is 13,719 people including the towns of Benalla, Baddaginnie, Devenish, Goorambat, Swanpool, Tatong, Thoona & Winton. Benalla Church Street Surgery is located in a large, modern, purpose-built medical centre, in the township of Benalla. There are eleven consulting rooms, a large nursing complex (including a casualty-type area), an audio room and one procedure room. Benalla Church Street Surgery have a "wing' of the practice dedicated to intern, registrar and medical student education and training. This is supported by dedicated supervision provided by a general practitioner with support provided by nursing and allied health staff.

Dorevitch Pathology has a collection centre located on site in Benalla Church Street Surgery.

Benalla Church Street Surgery provides medical consultations to approximately 750 patients each week.

The practice is fully computerized and uses Medical Director as a clinical package and Pracsoft as an accounting/appointment package.

The Clinic is accredited for Registrar, medical student and PGPPP intern training. Tutorials are held regularly and rotate through the partners. Medical education is encouraged through educational meetings held weekly at the Hospital and many other local meetings including satellite broadcasts.

2. GP structure and medical staffing

medical staffing (GP, registrars, medical students) & approx. FTE, and any other clinical team members (ie: nursing/allied health staff).

The practice has six principal partners and five full or part-time associates.

There is a practice manager, four receptionists and three practice nurses on duty.

A number of the GPs provide anaesthetic and obstetric services and admit patients to Benalla Health.

The practice also provides support and training for GP registrars, Murray to the Mountains interns and University of Melbourne, Rural Clinical School Extended Rural Cohort medical students.

3. Supervision

Nominate the Principal Supervisor and outline supervision arrangements both in and after hours *if applicable* and if trainee attends local hospital (see also *PGPPP Guidelines*). If the new post is in addition to currently accredited posts in that practice please also discuss availability of supervision across all.

Benalla Church Street Surgery has an abundance of experienced rural general practitioners. All six practice principals provide supervision for interns. One practice principal is nominated as supervisor for the intern rotation. The practice principals are:

- Dr Peter Slot
- Dr Richard de Crespigny
- Dr Gerard Brownstein



- Dr Gary O'Brien
- Dr Paul Kelly
- Dr Brian Hollins

All practice principals are experienced supervisors and have supervised doctors-in-training, including interns. All supervisors are Fellows of FRACGP or ACCRM. The learning environment will be structured so the iintern sees patients in a classic parallel consulting model with the default position being interns see two patients per hour. This may increase or decrease based on the intern's experience and competence.

Benalla Church Street Surgery has a "wing' of the practice dedicated to intern, registrar and medical student education and training. This is supported by dedicated supervision provided by a general practitioner with support provided by nursing and allied health staff.

Several GPs from the Practice have regular sessions at the local Aged Care Facilities. The intern will be rostered in Aged Care for two sessions per week. The doctor providing the services to the aged care facility at the time will provide supervision for the intern during the Aged Care sessions. The intern will also spend one session per week delivering services from the Emergency Care Centre under the supervision of the doctor rostered for "on-call".

The anaesthetic and obstetrics sessions will be supervised by the qualified and experienced GP who provides anaesthetic or obstetrics coverage at Benalla Health The level of involvement in obstetrics care will be dependent on birthing timing. This will be ad hoc and may be in addition to standard sessions per week.

Interns will also be rostered with visiting medical specialist such as surgeons, physicians and paediatricians etc The visiting medical specialists will provide supervision for the intern under the principal supervisor.

4. Intern/PGY2 role and responsibilities

• expected patient load, duties (e.g. including inpatient, aged care/procedural), & rostered hours and oncall (*if applicable*). If the new post is in addition to currently accredited intern/PGY2 posts in that practice please also discuss the impact on all.



It is expected the intern will work at Benalla Church Street Surgery in a dedicated room, for 5 to 6 sessions per week. These are standard hours in the morning and afternoon. The exact days of sessions will depend on rosters for 2015. The patient load will begin at 1-2 patients per hour in a standard parallel consulting format. The number of patients may increase per hour dependent on the experience and competence of the intern. This is especially relevant for the 20 week term where the intern may grow considerably in their ability to see patients. The intern will be exposed to the common cross section of patients that the practice provides services.

Benalla Church Street Surgery undertakes minor procedures and the intern is exposed to these experiences.

The sessions at the Aged Care facilities will be centred on the weekly scheduled appointments by the intern's supervisor. It is estimated the intern will spend 2 sessions per week in Aged Care. The role of the intern during any session will be to prepare the patients to be seen by their supervisor during the supervisor's usual 'ward call' to the Aged Care Facility. The intern will then accompany the supervisor during their 'ward rounds' at the Aged Care Facility and remain for the full half day session to follow up on any activity requested by the Supervisor. It is noted that the session that the intern participates in may be at different Aged Care facilities across different weeks. Where the intern has time to undertake other activity during these sessions they will be directed to undertake medication reviews.

The anaesthetic session will be once a week/once a fortnight, depending on the rosters of the supervisors at the time. The intern will accompany the supervisor to Benalla Health and assist them with their anaesthetic roster. Involvement in this on an ad hoc or continual basis will be dependent on the learning activities identified and agreed between the intern and supervisor.

Exposure to obstetrics experiences will be dependent on the involvement of supervisors and GPs in obstetric activity during the term of the intern. This will also be dependent on the learning activities identified and agreed upon between the intern and supervisor. Some of these services may be delivered after hours under the direct supervision of a Benalla Church Street Surgery general practitioner supervisor.

Interns will be able to participate in the town after hour roster. The majority of this is at the Emergency Department of Benalla Health. This will be by negotiation with the intern and GPs in the Practice and will reflect the desire and enthusiasm and safety of the intern. Interns will be supervised directly by the doctor "on-call" for any afterhours services. The structure of these sessions may allow the intern to follow patients from the General Practice to outpatients at Benalla Health hospital to aged care facilities etc. Where appropriate, interns will have the opportunity to track and assist patients navigate the health system in the local area.

5. Describe the Orientation to the practice provided to the Intern/ PGY2, and any resources to support this.

Each Intern, on their first day in the GP rotation, is provided with an Orientation to both the Clinic and the Parent Health Service.

One Half day is spent at the Clinic where the Practice Manager and Supervisor take the intern through items such as, tour of the Clinic and introduction to staff and work colleagues, log in and access to computer systems and medical director, etc. The other half day is spent at the Parent Health Service giving a tour of all hospital facilities,



organising "swipe card" access, confidentiality agreements, etc.

Each Clinic and health service is provided with a standard "checklist" which they must complete with the intern during orientation and sign. A copy of these documents is attached.

Each Intern is also provided with an M2M Intern Manual at the commencement of their internship (Orientation Week). This manual contains all information on Orientation, Assessment, Evaluation etc.

All interns must attend the M2M orientation program conducted at the commencement of employment. This program includes orientation to the general practice and shadowing" in the general practice. A copy of the M2M orientation program is attached.



6. Describe the formal and informal learning opportunities available and expected learning outcomes/Learning Plan for the intern/PGY2 in this rotation

Formal/informal learning opportunities

(comment on access to teaching and learning including tutorials, case presentations etc.)

Interns will be presented with a learning environment that provides exposure to a range of clinical presentations that meet AMC and ACFJD learning objectives.

Education will be available to the intern during their community placement at 4 different levels.

- The Practice has formal dedicated teaching during rostered times, at which the current interns participate. This is generally conducted on a Monday at the practice.
- All interns during their general practice rotation will be required to present at a formal grand round and clinical review. These sessions will require research and delivery to peers both internal and external to the medical professionals within Benalla.
- All interns in their general practice rotation will have coordinated education rostered in working hours. These sessions will include skills workshops, Paediatric Telehealth and video conferenced education sessions. This education will be provided across a range of sites. This is in addition to any education provided at during the core rotations at the major health services.
- The interns will also be able to attend any other multidisciplinary education conducted within Benalla. These sessions may be conducted by the health service, Medicare local or regional Training Provider.

Additionally, the intern will have supervisors who use every clinical encounter as an informal teaching opportunity. During the community term at Benalla Church Street Surgery the intern will be exposed to several supervisors and be exposed to their supervisors in different learning contexts (aged care, anaesthetics, obstetrics)

Intern Outcome Statements

(for intern posts only - provide comments on these for this new post - refer to National Intern Training Framework)

The overall aim of a medical internship is to gain general registration as a medical practitioner through exposure to, and experience in, a defined set of skills and competencies. The M2M Internship will achieve this by assuring adherence to the Medical Board of Australia (MBA) standards for internships and utilising the Australian Medical Council (AMC) Guidelines for Terms (Nov 2013) to develop the program of experiences for the internship.

The experiences will be a mixture of supervised practice and integrated training and as such fit with the AMC 'National Standards for Programs' (Nov 2013). The Australian Curriculum Framework for Junior Doctors (ACF) has been reviewed to determine what is able to be experienced in a community setting and the competencies listed in this document will form the basis for evaluation of the achievement of the program. The ACF, along with the Intern Outcome Statements (AMC, Nov 2013), form the basis for the education program implementation in the M2M Intern Program.



• <u>Expected Learning Outcomes</u> (must be aligned to the Australian Curriculum Framework for Junior Doctors (ACFJD - <u>http://www.cpmec.org.au/Page/acfjd-project</u>)

Interns will be presented with a learning environment that provides exposure to a range of clinical presentations that meet AMC and ACFJD learning objectives. During this rotation interns will meet learning outcomes in Clinical Management, Professionalism, Communication, Skills and Procedures Clinical Symptoms and Problems and Conditions

Benalla Church Street Surgery has general practitioners with a range of special interests that will provide interns with exposure to a extensive range of patient presentations.

- Obstetrics
- Anaesthetics
- Minor Surgery
- Chronic Disease
- Mental Health
- Diabetes Education
- Aged Care
- X ray & Ultrasound
- District Nursing

Benalla Health has a range of visiting medical specialists that will provide interns with exposure to a wide range of patient presentations and medical procedures.

- General Surgery
- Orthopaedic Surgery
- Anesthetics
- Obstetrics & Gynaecology Theatre
- Faciomaxilory
- Gastroenterology
- Urology
- Ophthalmology



7. Describe the process for the provision of <u>feedback to the intern/PGY2</u> for this rotation, including management of an intern/PGY2 with difficulties (ie: not coping/ health issues).

DCT Visits Survey Mid Term and End Term Assessments and IPAP if required

8. Describe the process for the intern/PGY2 to provide <u>feedback on his/her rotation</u> experience. What happens with this information?

DCT Visits Survey Mid Term and End Term Assessments End GP Rotation Evaluation by Intern (completed at 10 week & 20 week mark)

DCT visits provide an opportunity for the Intern to speak with the DCT and Manager M2M on all aspects of their rotation experience and follow up on any items on their Term Assessment. All Term Assessments, after sign off, are filed in an individually allocated folder for each intern and kept with M2M administration officer. At the 10 week and 20 week mark of the GP rotation the intern is asked to complete a GP Rotation Evaluation (copy attached) and return to M2M administration for collating and filing. Any concerns, issues or matters to be raised are directed to the Manager M2M for follow up.

Additional comments:

(insert reply)

Name & Signature of Rotation Term Supervisor: