1. Term details:									
Health Service:	Northern Health	Term duration:	Maximum: 13 weeks						
Location/Site:	Broadmeadows Hospital	Clinical experience -	C: Acute and critical illness patient						
Location, Site.	Broadmeddows frospitar	Primary:	care						
Parent Health	Northern Health	Clinical experience -	B: Chronic illness patient care						
Service:	Northern Health	Secondary:							
Speciality/Dept.:	General Medicine	Non-clinical	(PGY2 only)						
эрссіанту/ Берт	General Wedleine	experience:	(1 G12 GINY)						
PGY Level:	PGY1	Prerequisite learning:	(if relevant)						
Term Descriptor:	Assessment and management of patients admitted under general medicine unit. Provide medical care to patients with acute medical presentations of various aetiologies. Participate in admissions, inpatient management, and discharge planning. Attend met calls and code blues and manage deteriorating patients								

2. Learning o	bjectives:	
	Domain 1	Obtains person-centred histories tailored to the clinical situation in a culturally safe and appropriate way.
FDA1. Climinal	Domain 2	Recognises their own limitations and seeks help when required in an appropriate way.
EPA1: Clinical Assessment	Domain 3	Incorporates psychosocial considerations and stage in illness journey into assessment, acknowledging these factors can influence a patient's experience of illness and healthcare behaviours.
	Domain 4	Draws on medical literature to assist in clinical assessments, when required.
	Domain 1	Identifies deteriorating or acutely unwell patients
EPA2:	Domain 2	Demonstrates professional conduct.
Recognition and care of the acutely unwell patient	Domain 3	Accesses interpretive or culturally-focused services and considers relevant cultural or religious beliefs and practices.
patient	Domain 4	Observes local service protocols and guidelines on acutely unwell patients
	Domain 1	Appropriately, safely & accurately prescribes therapies (drugs, fluids, blood products, oxygen), & demonstrates an understanding of the rationale, risks & benefits, contraindications, adverse effects, drug interactions, dosage & routes of administration
EPA3:	Domain 2	Recognises their own limitations and seeks help when required in an appropriate way.
Prescribing	Domain 3	Acknowledges and respects patients' cultural and religious background, attitude and beliefs, and how these might influence the acceptability of pharmacological and non-pharmacological management approaches.
	Domain 4	Applies the principles of safe prescribing, particularly for drugs with a risk of significant adverse effects, using evidence-based prescribing resources, as appropriate.
	Domain 1	Produces medical record entries that are timely, accurate, concise and understandable.
EPA4: Team communication	Domain 2	Demonstrates professional conduct, honesty and integrity.
– documentation, handover and referrals	Domain 3	Considers social/economic context, for example: discharge planning and social supports given patients individual circumstances and care needs
. 5, 5, 7 4, 15	Domain 4	Ensures all outstanding investigations, results or procedures will be followed up by receiving units and clinicians.

## 3. Outcome statements:

**Domain 1:** The prevocational doctor as practitioner

- ☑ 1.1 Place the needs and safety at the centre of the care process, working within statutory and regulatory requirements and guidelines. Demonstrate skills including effective handover, graded assertiveness, delegation and escalation, infection control, and adverse event reporting.
- ☑ 1.2 Communicate sensitively and effectively with patients, their family and carers, and health professionals, applying the principles of shared decision-making and informed consent.
- ☐ 1.3 Demonstrate effective, culturally safe interpersonal skills, empathetic communication, and respect within an ethical framework inclusive of indigenous knowledges of wellbeing and health models to support Aboriginal and Torres Strait Islander patient care
- ☑ 1.4 Perform and document patient assessments, incorporating a problem-focused medical history with a relevant physical examination, and generate a valid differential diagnosis and/or summary of the patient's health and other relevant issues
- ☑ 1.5 Request and accurately interpret common and relevant investigations using evidence-informed knowledge and principles of sustainability and cost-effectiveness
- ☐ 1.6 Safely perform a range of common procedural skills required for work as a PGY1 and PGY2 doctor.
- ☐ 1.7 Make evidence-informed management decisions and referrals using principles of shared decision-making with patients, carers and health care team
- $\Box$  1.8 Prescribe therapies and other products including drugs, fluids, electrolytes, and blood products safely, effectively and economically
- ☐ 1.9 Recognise, assess, communicate and escalate as required, and provide immediate management to deteriorating and critically unwell patients.
- ☐ 1.10 Appropriately use and adapt to dynamic systems and technology to facilitate practice, including for documentation, communication, information management and supporting decision-making

**Domain 2:** The prevocational doctor as professional and leader

- № 2.1 Demonstrate ethical behaviours and professional values including integrity, compassion, self-awareness, empathy, patient confidentiality and respect for all.
- ☐ 2.3 Demonstrate lifelong learning behaviours and participate in, and contribute to, teaching, supervision and feedback.
- ☐ 2.4 Take increasing responsibility for patient care, while recognising the limits of their expertise and involving other professionals as needed to contribute to patient care.
- $\square$  2.6 Contribute to safe and supportive work environments, including being aware of professional standards and institutional policies and processes regarding bullying, harassment and discrimination for themselves and others.
- ☐ 2.7 Critically evaluate cultural safety and clinical competencies to improve culturally safe practice and create culturally safe environments for Aboriginal and Torres Strait Islander communities. Incorporate into the learning plan strategies to address any identified gaps in knowledge, skills, or behaviours that impact Aboriginal and Torres Strait Islander patient care.
- $\square$  2.8 Effectively manage time and workload demands, be punctual, and show ability to prioritise workload to manage patient outcomes and health service functions.

**Domain 3:** The prevocational doctor as a health advocate

- ☐ 3.1 Incorporate disease prevention, relevant health promotion and health surveillance into interactions with individual patients, including screening for common diseases, chronic conditions, and discussions of healthcare behaviours with patients
- 3.2 Apply whole-of-person care principles to clinical practice, including consideration of a patients physical, emotional, social, economic, cultural and spiritual needs and their geographical location, acknowledging that these factors can influence a patient's description of symptoms, presentation of illness, healthcare behaviours and access to health services or resources.
- ☐ 3.3 Demonstrate culturally safe practice with ongoing critical reflection of the impact of health practitioner's knowledge, skills, attitudes, practising behaviours and power differentials in delivering safe, accessible and responsive healthcare free of racism and discrimination.
- ☐ 3.4 Demonstrate knowledge of the systemic and clinician biases in the health system that impact on the service delivery for Aboriginal and Torres Strait Islander peoples. This includes understanding current evidence around systemic racism as a determinant of health and how racism maintains health inequity.
- ☑ 3.5 Demonstrate knowledge of the ongoing impact of colonisation, intergenerational trauma and racism on the health and wellbeing of Aboriginal and Torres Strait Islander peoples.
- ☐ 3.6 Partner with the patient in their healthcare journey, recognising the importance of interaction with and connection to the broader healthcare system. Where relevant, this should include culturally appropriate communication with caregivers and extended family members while also including and working collaboratively with other health professionals (including Aboriginal Health Workers, practitioners and Liaison Officers).

**Domain 4:** The prevocational doctor as a scientist and scholar

- ☑ 4.1 Consolidate, expand and apply knowledge of the aetiology, pathology, clinical features, natural history and prognosis of common and important presentations in a variety of stages of life and settings.
- ☐ 4.3 Participate in quality assurance and quality improvement activities such as peer review of performance, clinical audit, risk management, incident reporting and reflective practice.
- ☐ 4.4 Demonstrate a knowledge of evidence-informed medicine and models of care that support and advance Aboriginal and Torres Strait Islander health.

4. Supervision details:										
Supervision Role	Name	Position	Contact							
DCT/SIT	Dr Carol Chong	Supervisor of Intern Training	Carol.Chong@nh.org.au							
Term Supervisor	TBC- Dr Michael Farber	Click or tap here to enter text.	Click or tap here to enter text.							
Clinical Supervisor (primary)	Allocated Consultant on ward service	General Medicine Physician	Via Switchboard							
Cinical Supervisor (day to day)	Allocated Unit Registrar	Unit Registrar	Via Medtasker or Switchboard							
EPA Assessors Health Professional that may assess EPAs	<ul><li>All Consultants</li><li>All Registrars</li><li>Click or tap here to enter</li></ul>	name and role								

## Team Structure - Key Staff

Name	Role	Contact			
Director of Medicine	Dr Yana Sunderland	Yana.Sunderland@nh.org.au			
Head of Unit	Dr Michael Farber	Michael.Farber@nh.org.au			
Unit Consultants	General Medicine Physician	Via Switchboard			
Unit Registrars	Unit Registrars	Via Medtasker or Switchboard			
Unit NUM	Unit NUM	Via Switchboard			

5. Attachments:							
R-over document https://view.officeapps.live.com/op/view.aspx?src=https%3A%2F%2Fmedia.r							
	octors.org.au%2Fwp-content%2Fuploads%2F2023%2F01%2FBHS-Gen-Med-Intern-						
	HMO-Rover-January-2023.docx&wdOrigin=BROWSELINK						
Unit orientation guide	https://media.northerndoctors.org.au/wp-content/uploads/2022/02/BH-Handbook-						
	January-2021.pdf						
Timetable (sample in appendix)	Click or tap here to enter url of attachment.						

6. Accreditation details (PMCV use only)								
Accreditation body: Click or tap here to enter text.								
Accreditation status:	Click or tap here to enter text.							
Accreditation ID:	Click or tap here to enter text.							
Number of accredited posts:	PGY1: number	PGY2: number						
Accredited dates:	Approved date: date.	Review date: date.						

## 7. Approval



Reviewed by:	Click or tap here to enter text.	Date:Click or tap to enter a date.
Delegated authority:	Click or tap here to enter text.	Date:Click or tap to enter a date.
Approved by:	Click or tap here to enter text.	Date:Click or tap to enter a date.

Appendix								
Timetable	example							
	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	
	Enter Time	Enter Time	Enter Time	Enter Time	Enter Time	Enter Time	Enter Time	
Morning	Consultant WR	Registrar WR	Consultant WR	Registrar WR	Consultant WR	Click or tap here to enter text.	Click or tap here to enter text.	
	Enter Time	Enter Time	Enter Time	Enter Time	Enter Time	Enter Time	Enter Time	
	Click or tap	12:30 – 13:30	Click or tap	Unit CUSP	Click or tap	Click or tap	Click or tap	
	here to enter	Intern	here to enter	meeting	here to enter	here to enter	here to	
Afternoon	text.	education	text.	every 4 <sup>th</sup> Thursday	text.	text.	enter text.	
		12:30 – 13:30 BHS Education		mursuay				
	Enter Time	Enter Time	Enter Time	Enter Time	Enter Time	Enter Time	Enter Time	
Evening	here to enter here to enter here		Click or tap here to enter text.	Click or tap here to enter text.				
Hours	Total	Total	Total	Total	Total	Total	Total	

BHS MEDICAL HMO/Intern	Mon	Tues	Wed	Thur	Fri	Sat	Sun	Mon	Tues	Wed	Thur	Fri	Sat	Sun
HMO 1				0800- 2030	0800- 2030	0800- 2030	0800- 2030	0800- 2030	0800- 2030	0800- 1700				
Intern 1	0800- 1700	0800- 1700	0800- 2030	0800- 1230	0800- 1700			0800- 1700	0800- 1700	0800- 2030	0800- 1230	0800- 1700		
HMO 2	0800- 2030	0800- 2030	0800- 1700								0800- 2030	0800- 2030	0800- 2030	0800- 2030
BHS MEDICAL REG														
Reg 1	0800- 1700	0800- 1230	0800- 2030	0800- 1700	0800- 1700			0800- 1700	0800- 1230	0800- 2030	0800- 1700	0800- 1700		
		REGIS TRAR TRAIN ING TIME AFTE RNOO N							REGIS TRAR TRAIN ING TIME AFTE RNOO N					
Reg 2	0800- 2030	0800- 2030	0800- 1700	REGIS TRAR TRAIN ING TIME					,	REGIS TRAR TRAIN ING TIME	0800- 2030	0800- 2030	0800- 2030	0800- 2030
Reg 3			REGIS TRAR TRAIN ING TIME	0800- 2030	0800- 2030	0800- 2030	0800- 2030	0800- 2030	0800- 2030	0800- 1700	REGIS TRAR TRAIN ING TIME			