pmcv Term Description

1. Term details:							
Health Service:	Northern HealthTerm duration:Maximum: 13 weeks						
Location/Site:	Northern Hospital Epping	Clinical experience -	C: Acute and critical illness patient				
Location/Site.		Primary:	care				
Parent Health	Northern Health	Clinical experience -	Choose an item.				
Service:		Secondary:	choose an item.				
Speciality/Dept.:	Paediatric Surgery	Non-clinical	(PGY2 only)				
Speciality/ Dept		experience:	(1012011))				
PGY Level:	PGY2	Prerequisite learning:	(if relevant)				
Term Descriptor:	Paediatric surgical term ward-based management patients. Attendance at clinics and theatre. Oppor in unit audit during the course of the team.		5 , 1 5				

2. Learning o	bjectives:							
	Domain 1	Obtains person-centred histories tailored to the clinical situation in a culturally safe and appropriate way.						
EPA1: Clinical	Domain 2	Demonstrates professional conduct, honesty and integrity.						
Assessment	Domain 3	ecognises and takes precautions where the patient may be vulnerable.						
	Domain 4	Demonstrates the ability to manage uncertainty in clinical decision-making.						
	Domain 1	Identifies deteriorating or acutely unwell patients						
EPA2: Recognition	Domain 2	Recognises their own limitations and seeks help when required in an appropriate way.						
and care of the acutely unwell patient	Domain 3	Accesses interpretive or culturally-focused services and considers relevant cultural or religious beliefs and practices.						
puten	Domain 4	Raises appropriate issues for review in quality assurance processes (such as at morbidity and mortality meetings).						
	Domain 1	As appropriate, monitors and adjusts medications.						
EPA3:	Domain 2	Works collaboratively with the multidisciplinary team, including pharmacists and nursing staff.						
Prescribing	Domain 3	Other (please edit and update)						
	Domain 4	Makes use of local service protocols and guidelines to ensure decision-making is evidence-based and applies guidelines to individual patients appropriately						
	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	Includes relevant information regarding patients' cultural or ethnic background in the handover and whether an interpreter is required.						
	Domain 4	Maintains records to enable optimal patient care and secondary use of the document for relevant activities such as adequate coding, incident review, research or medico-legal proceedings.						



Domain 1: The prevocational doctor	Domain 2: The prevocational	Domain 3: The prevocational	Domain 4: The prevocationa
as practitioner	doctor as professional and leader	doctor as a health advocate	doctor as a scientist and schola
 ☑ 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 	doctor as professional and leader2.1 Demonstrate ethical behavioursand professional values includingintegrity, compassion, self-awareness,empathy, patient confidentiality andrespect for all.2.2 Identify factors and optimisepersonal wellbeing and professionalpractice, including responding to fatigue,and recognising and respecting one's ownlimitations to mitigate risks associatedwith professional practice.2.3 Demonstrate lifelong learningbehaviours and participate in, andcontribute to, teaching, supervision andfeedback.2.4 Take increasing responsibility forpatient care, while recognising the limits	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.	 doctor as a scientist and schold □ 4.1 Consolidate, expand and apply knowledge of the aetiology, pathology, clinical features, natura history and prognosis of common and important presentations in a variety of stages of life and settings. □ 4.2 Access, critically appraise and apply evidence form the medical and scientific literature to clinical and professional practice. □ 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.
to support Aboriginal and Torres Strait Islander patient care	of their expertise and involving other professionals as needed to contribute to patient care.	Ø 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.	☐ 4.4 Demonstrate a knowledge of evidence-informed medicine and models of care that support and advance Aboriginal and Torres Strait Islander health.
 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 1.8 Prescribe therapies and other products including drugs, fluids, electrolytes, and blood products safely, effectively and economically 1.9 Recognise, assess, communicate and 	 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 communities. 2.8 Effectively manage time and workload demands, be punctual, and 	 □ 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 	
 △ 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 	show ability to prioritise workload to manage patient outcomes and health service functions.	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).	



4. Supervision details:										
Supervision Role	Na	те	Position		Contact					
DCT/SIT	Dr Chiu Kang		Supervisor of HMO Training		Chiu.Kang@nh.org.au					
Term Supervisor	Dr Sarah Condron		Head of Unit		Sarah.Condron@nh.org.au					
Clinical Supervisor (primary)	Dr Sarah Condron		Head of Unit		Sarah.Condron@nh.org.au					
Cinical Supervisor (day to day)	Allocated Consult	ant on duty	Paediatric Surgeon Consult	tant	Click or tap here to enter text.					
EPA Assessors Health Professional that may assess EPAs		iltants tap here to enter tap here to enter								
Team Structure - Key S	taff									
Name		Role			Contact					
Dr Sarah Condron		Head of Unit			Sarah.Condron@nh.org.au					
Alecia Caddy		NUM			r tap here to enter text					
Kerry Wirz		Wound Nurse Consultant		Click or tap here to enter text						
Mara Ciaverella		Theatre elective surgical liaison nurse			Click or tap here to enter text					
Click or tap here to en	ter text.	Unit Consultants			Click or tap here to enter text					

5. Attachments:								
R-over document	https://media.northerndoctors.org.au/wp-content/uploads/2023/05/Paeds-Surg-HMO-ROVER_April-2023.docx							
Unit orientation guide	Click or tap here to enter url of attachment.							
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
	0730	0730	0730	0730	0730	Click or tap	Click or tap
	Ward round	Ward round	Ward round	Ward round	Ward round	here to enter text.	here to enter text.
	0830	0815	0815	0815	0815		
	Ms J Wheatley's	(week 2 and 4) Ms J	(week 1) Ms S	(week 4) Ms S	(week 1 and 3) Ms G		
	clinic (every 2 nd week)	Wheatley's theatre	Condron's theatre	Condron's theatre	Wilson's theatre		
		0830	0900	1200	(week 2) Ms J		
Morning		(week 3)	(week 3)	handover to Thoracic	Wheatley's theatre		
		Ms S Condron's	Ms S Condron's	HMO prior to half day.	1200 You will		
		theatre	clinic	nun uuy.	cover thoracic Surg		
			1330		(as the HMO		
			(week 1, 2,		has their half day)		
			and 4)		1300 (week 1		
			Ms S Condron's		and 3)		
			clinic		Ms G		
					Wilson's clinic		
	Fueto a Time e	Enter Time	Fration Times	Frates Times		Fration Times	Fratan Times
	Enter Time 1630	Enter Time 1630 handover	Enter Time 1700 – 2100:	Enter Time 12:30 – 13:30	Enter Time 1630	Enter Time Click or tap	Enter Time Click or tap
	handover to	to spec surg	Spec Surg	HMO	Weekend	here to enter	here to
Afternoon	spec surg	cover on	cover (cover	Education	handover to	text.	enter text.
	cover on	Medtasker	thoracic surg,		spec surg		
	Medtasker		paeds surg, Urology, ENT)		cover on medtasker		
	Enter Time	Enter Time	Enter Time	Enter Time	Enter Time	Enter Time	Enter Time
	Click or tap	Click or tap	Click or tap	17:30	Click or tap	Click or tap	Click or tap
Evening	here to enter	here to enter	here to enter	Surgical	here to enter	here to enter	here to
	text.	text.	text.	Forum	text.	text.	enter text.
Hours	Total	Total	Total	Total	Total	Total	Total



Paediatric Surgery HMO	Mon	Tues	Wed	Thur	Fri	Sat	Sun	Mon	Tues	Wed	Thur	Fri	Sat	Sun
НМО	0730- 1700	0730- 1700	0730- 1700	0730- 1230	0730- 1700			0730- 1700	0730- 1700	0730- 1700	0730- 1230	0730- 1700		
			SPEC 1600- 2100							SPEC 1600- 2100				