



# The Council of Presidents of Medical Colleges

## Colleges using MTS results to shape workforce policy advice

In 2020 a global epidemic emerged from a novel human coronavirus known as SARS-2 or COVID-19. It has caused significant impact globally because of its rapidity in spread, mutations, severity of illness and limitations in treatment options. With the advent of a vaccine and global rollout program, the pandemic will eventually abate but the impact on the global economy and sectors such as health will be long lasting.

Key to effective health policy development is seizing on the opportunity when disruptions occur to the status quo and document the issues, challenges and decisions made in response to the crisis. In mid-2020 the Council of Presidents of Medical Colleges (CPMC) established a research project to examine the impact on postgraduate medical training in Australia. During phase one a review of the literature occurred along with stakeholder consultation whereby the impact on the system of medical training was captured with decisions made to cease clinical placement rotations, upskill and redeploy personnel to critical care areas, establish COVID and non-COVID medical teams, cancel face-to-face teaching and shift education and assessment processes on-line along with pausing of all accreditation requirements.

We also examined the results from the 2020 Medical Training Survey (MTS) to help inform a series of policy recommendations to feed into the National Medical Workforce Strategy for Australia. Close to half of all doctors in training reported the pandemic had both positive and negative impact mostly negative with a disruption to routine teaching and in the number of training opportunities available along with uncertainty for the remainder of the training year. While virtual educational learning methods were provided trainees reported an inability to prepare due to unconfirmed assessment dates. Some reported an impact on entry into training and therefore a delay in career progression while others reconsidered the preferred specialty to train in.

The project has examined the impact from the perspective of whether changes should be ended, amplified, discarded, or restarted and what high value innovative practices related to the delivery of medical education and training in Australia should be introduced such as competency-based assessment, programmatic assessment, standards of supervision and alterations to accreditation arrangements. A series of policy adjustments will occur to improve the system of medical training and to enable enhanced responsiveness to meet any future global emergencies.

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