**Professionalism**

**Practitioner in difficulty**
- Identifies the support services available
- Recognises the signs of a colleague in difficulty
- Refers appropriately & responds with empathy

**Doctors as leaders**
- Shows an ability to work well with and lead others
- Exhibits the qualities of a good leader and takes the leadership role when required (ADV)

**Professional Development**
- Explores and is open to a variety of career options
- Participates in a variety of continuing education opportunities

**TEACHING, LEARNING & SUPERVISION**

**Self-directed learning**
- Identifies and addresses personal learning objectives
- Establishes and uses current evidence-based resources to support own learning
- Seeks opportunities to reflect on and learn from clinical practice

**Supervision**
- Provides effective supervision e.g. by being available, offering an orientation, learning opportunities, and by being a role model
- Adapts level of supervision to the learner’s competence and confidence

**Assessment and Feedback**
- Provides constructive, timely and specific feedback based on observation of performance
- Participates in feedback and assessment processes
- Provides constructive guidance or refers to an appropriate support to address problems (ADV)

**Skills & Procedures**

**Doctors should be able to provide safe treatment to patients through competently performing certain procedural and/or assessment skills (ADV – ADVANCED i.e. more likely to be learnt in PGY2 or above).**

**Cardiovascular**
- 12 lead electrocardiogram recording and interpretation
- Arterial blood gas sampling and interpretation
- Pulse flow measurement
- Sphygmomanometer
- Peripheral arterial/bloodstream aspiration

**Gastrointestinal**
- Nasogastric tube insertion
- Rectal examination
- Ano-rectoscopy/proctoscopy

**Abdominal paracentesis (ADV)**

**Neurological**
- Glasgow Coma Scale (GCS) scoring
- Assessment of Headache
- First-rectosigmoid sign identification
- Papilloedema identification (ADV)
- Lumbar puncture (ADV)

**Mental Health**
- Minor mental state examination
- Psychiatric Mental State Examination
- Suicide assessment
- Alcohol withdrawal scale use

**Application of intracutaneous injection (ADV)**

**Opthalmic**
- Visual field assessment
- Visual acuity assessment
- Direct ophthalmoscopy
- Eye drop administration
- Eye bandage application
- Eyelid eversion

**Cervical collar application**

**Corneal foreign body removal**

**Eye bandage application**

**ENT**
- Suture removal
- Simple skin lesion excision
- Local anaesthesia

**Skin conditions**
- Dermatological

**Pulmonary**
- Newborn examination
- Apgar score estimation (ADV)
- Infant respiratory distress assessment

**Obstetric**
- Speculum examination
- Urine pregnancy testing

**Trauma**
- Primary trauma survey and immobilisation of spinal axis
- Cervical collar application
- Pressure haemostasis
- Volume resuscitation
- Peripheral neurovascular assessment
- Pulse oximetry
- Secondary trauma survey (ADV)

**Respiratory**
- Breathing assessment
- Oxygen
- Gough
- Chronic Obstructive Pulmonary Disease
- Pneumonia or respiratory infection

**Renal / Urology**
- Upper urinary obstruction
- Obstructive uropathy
- Pyelonephritis

**Mental Health**
- Depression
- Bipolar disorder
- Anxiety

**Communication**
- Active listening
- Empathy

**Confederation of Postgraduate Medical Education Councils**

**Australian Curriculum Framework for Junior Doctors**

**Introduction**

The Australian Curriculum Framework for Junior Doctors (ACF) is an educational template outlining the learning outcomes required of prevocational doctors, to be achieved through their clinical rotations, education programs and individual learning, in order to promote safe, quality healthcare. The ACF is built around three key areas: Clinical Practice, Communication, and Professionalism. These areas are divided into categories each of which is further subdivided into learning topics. These topics have been identified in the literature and from supervisors’ experiences as being critical to both safe prevocational practice and a basis for future training.

The principles that underpin the ACF include:
- **Adult Learning theory, including respect for prior learning and experience, provision of clear learning outcomes, regular feedback on performance and provision of opportunities for reflection**
- **A focus on translating learning from university into performance in the workplace**
- **Vertical integration of medical education across the continuum**
- **Clear expectations of outcomes for all involved in prevocational medical education and training**
- **Safety and quality in healthcare.**

The ACF is a continuing collaborative project between Postgraduate Medical Councils (PMCs) and a broad range of stakeholders under the leadership of the Confederation of Postgraduate Medical Education Councils (CPMEC) and funded by the Australian Government Department of Health and Ageing.

The history of the development of the ACF, references and useful downloads and links are available on the CPMEC website: www.cpmec.org.au

**Using the ACF**

The ACF can be used in a variety of ways to support prevocational training and development:

**For Prevocational Doctors**
- The ACF can be used to guide your journey through the prevocational years. It outlines the desired learning outcomes however it is recognized that proficiency in achievement of the capabilities will occur at different stages in your training but should ideally be achieved prior to vocational training.
- The ACF is designed to be used as a self-assessment tool to identify strengths, weaknesses and opportunities for learning and professional development. It can then be used as a basis for monitoring your progress during the period between graduation and vocational training.
- When commencing new rotations, the ACF provides a useful guide for discussing the learning opportunities that may be available from a given term. It may help to identify particular skills and procedures that may be learnt during the term and to plan in advance to receive such training.

**For Supervisors, educators, employers and managers:**
- The ACF can be used to review the learning opportunities offered by existing rotations or to plan the development of innovative positions in new and expanded settings. For example, clinical staff can use the ACF as a starting point for discussions about what doctors in vocational training should learn and how best to teach it.
- The ACF can be mapped to undergraduate and vocational training curricula, prevocational education programs, position descriptions and rosters in order to identify gaps or duplication across the continuum of medical education.
- Clinical unit staff can use the ACF as a starting point for discussions about innovative approaches to clinical practice and professional development.
- The ACF provides a structure for mid and end of term feedback and assessment.

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SAFETY PATIENT CARE

EMERGENCIES

Basic Life Support
- Implements basic airway management, ventilatory & circulatory support
- Effectively uses semi-automatic and automatic defibrillators

Advanced Life Support
- Identifies the indications for advanced airway management
- Recognises malignant arrhythmias, uses resuscitation/protocols & manual defibrillation

Acute patient transfer
- Identifies the steps that need to be addressed for patient transfer
- Identifies and manages risks prior to and during patient transfer (ADV)

PATIENT MANAGEMENT

Public health
- Identifies and can justify the patient management options for common problems and conditions
- Implements and evaluates a management plan relevant to the patient following discussion with a senior clinician

Therapeutics
- When prescribing, takes account of the actions and interactions, indications, monitoring requirements, contraindications & potential adverse effects of each medicine
- Involves nurses, pharmacists & allied health professionals appropriately in medication management
- Evaluates the outcomes of medication therapy (ADV)

Fluid, electrolyte & blood product management
- Identifies the indications for and risks of fluid & electrolyte therapy and use of blood products
- Recognises and manages the clinical consequences of fluid & electrolyte imbalance in a patient

End of Life Care
- Arranges appropriate support for dying patients

SKILLS & PROCEDURES

Decision-making
- Expresses indications and contraindication for common procedures
- Selects appropriate procedures with involvement of senior clinicians and the patient

Informed consent
- Applies the principles of informed consent in day to day clinical practice
- Identifies the circumstances that require informed consent to be obtained by a more senior clinician

Preparation & anaesthesia
- Prepares & positions the patient appropriately
- Recognises the indications for local, regional or general anaesthesia (ADV)
- Arranges appropriate equipment & describes its use

Procedures
- Provides the appropriate anaesthesia and/or premedication
- Arranges appropriate support staff & defines their role

Post-procedure
- Monitors the patient & provides appropriate aftercare
- Identifies the common complications
- Interprets results & evaluates outcomes of treatment

Communication

PATIENT INTERACTION

Context
- Arranges an appropriate environment for communication, e.g. private, no interruptions
- Uses interpersonal skills and open communication to ensure effective healthcare relationships
- Uses effective strategies to deal with the difficult or vulnerable patient

Respect
- Treats patients courteously & respectfully, showing awareness & sensitivity to different backgrounds
- Maintains privacy & confidentiality
- Provides clear & honest information to patients & respects their treatment choices & wishes

Providing information
- Applies the principles of good communication (e.g. verbal & non-verbal) & communicates with patients & carers in ways they understand
- Uses interpreters for non-English speaking backgrounds when appropriate
- Involves family in discussion & decisions about their care

Meetings with families or carers
- Recognises the impact of family dynamics on effective communication
- Ensures relevant family/carers are included appropriately in meetings and decision-making
- Respects the role of family in patient health care

Breaking bad news
- Identifies & signs of loss & bereavement
- Participates in breaking bad news to patients & carers
- Shows empathy & compassion

Open disclosure
- Explains & participates in implementing the principles of open disclosure
- Ensures patients and carers are supported & cared for after an adverse event

Complaints
- Acts to minimise or prevent the factors that would otherwise lead to complaints
- Uses local protocols to respond to complaints
- Adopts behaviours such as good communication designed to prevent complaints

MANAGING INFORMATION

Written
- Completes with organisational policies regarding timely and accurate documentation
- Maintains high quality written skills e.g. notes, letters, concise & informative discharge summaries
- Uses appropriate structure & content for specific correspondence e.g. referrals, investigation requests, GP letters

Electronic
- Uses electronic patient information & decision-support systems recognising his/her role as a doctor

Health Records
- Completes with legal/institutional requirements for health records
- Uses the health record to ensure continuity of care

Complies with administrative documentation
- Facilitates appropriate coding & classification by accurate documentation

Evidence-based practice
- Describes the principles of evidence-based practice & hercules
- Uses best available evidence in clinical decision-making (ADV)

Handover
- Describes the importance and features of handover that ensure patient safety & continuity of care
- Performs effective handover & e.g. team member to team member, hospital to GP, to ensure patient safety and continuity of care

WORKING IN TEAMS

Team structure
- Identifies the healthcare team (e.g. medical team, multidisciplinary team) most appropriate for a patient
- Includes the patient & carers in the team decision making process where possible
- Identifies that team leaders can be from different health professions and respects their roles
- Uses greater assertiveness when appropriate
- Respects the roles & responsibilities of team members

Team dynamics
- Contributes to teamwork by behaving in ways that maximises the teams' effectiveness & includes who extend outside the hospital
- Demonstrates an ability to work with others & resolve conflicts when they arise
- Adapts when situations & abilities to adapt to change

WORKING IN TEAMS

Case Presentation
- Presents cases effectively, to senior medical staff & other health professionals

Professionalism

DOCTOR & SOCIETY

Access to healthcare
- Identifies the physical or cognitive disability can limit patients' access to healthcare services
- Provides access to culturally appropriate healthcare
- Demonstrates a non-discriminatory approach to patient care

Culture, society & healthcare
- Behaves in ways which acknowledge the social, economic & political factors in patient illness
- Behaves in ways which acknowledge the impact of culture, ethnicity & spirituality on health
- Identifies his/her own cultural values that may impact on his/her role as a doctor

Indigenous patients
- Behaves in ways which acknowledge the impact of history & the experience of Indigenous Australians
- Behaves in ways which acknowledge Indigenous Australians' spirituality & relationship to the land
- Behaves in ways which acknowledge the diversity of Indigenous cultures, experiences & communities

Professional standards
- Complies with the legal requirements of being a doctor & e.g. maintaining registration & adherence to professional standards
- Respects patient privacy & confidentiality

Medicine & the law
- Completes with the legal requirements in patient care e.g. Mental Health Act, death certification
- Completes appropriate medico-legal documentation
- Adheres to legal & statutory authorities, including mandatory reporting where applicable (ADV)

Health promotions
- Advocates for healthy lifestyles & provides environmental & lifestyle risks to health
- Uses a non-judgmental approach to patients & his/her lifestyle choices (e.g. discuses options; offers choice)
- Evaluates the positive & negative aspects of health screening & prevention when making healthcare decisions (ADV)

Healthcare resources
- Identifies the potential impact of resource constraint on patient care
- Uses finite healthcare resources wisely to achieve the best outcomes

Behaves in ways that acknowledge the complexities and competing demands of the healthcare system (ADV)

PROFESSIONAL BEHAVIOUR

Professional responsibility
- Behaves in ways which acknowledge the professional responsibilities relevant to his/her health care role
- Maintains an appropriate standard of professional practice & works within personal capabilities
- Reflects on personal experiences, actions & decision-making
- Acts as a role model of professional behaviour

Time management
- Prioritises workload to maximise patient outcomes and health service function
- Demonstrates punctuality

Personal well-being
- Is aware of & optimises personal health & well-being
- Behaves in ways to mitigate the personal health risks of medical practice (e.g. fatigue, stress)
- Behaves in ways which mitigate the potential risk to others from his own health status (e.g. infection)

Ethical practice
- Behaves in ways which acknowledge the ethical complexity of practice & follows professional & ethical codes
- Demonstrates the potential ethical responses
- Accepts responsibility for ethical decisions