



AIDA Communique – Specialist Trainee Support Program

AIDA held the fourth meeting of the Specialist Trainee Support Program (STSP) Cross-College Project Group (comprising 12 specialty colleges) on Awabakal Country on Tuesday 2 May 2022.

The meeting was preceded by a full day of cultural safety training delivered by AIDA Facilitators, Dr Karen Nicholls and Dr Anita Watts. The training and meeting continued the collaboration between AIDA and the college consortium to augment the recruitment and retention of Aboriginal and Torres Strait Islander doctors who wish to commence or are currently undertaking non-GP speciality training.

The meeting began with a discussion of AIDA's cross cultural safety training with the group reflecting on the powerful content and the devastating consequences of racism and bias within the medical profession including substandard care and patient death. It was noted that whilst AIDA's training was developed for medical practitioners, the non-clinical staff found the course of value.

All colleges shared updates on their activities, challenges and successes in progressing improvements in recruitment and retention since the last meeting in February 2023.

AIDA provided an update of activities including:

- Second trainee workshop and research masterclass held from 24-26 March 2023
- Monthly virtual trainee catch ups commenced in April
- A first meeting of an AIDA Fellows Committee held in April. This aims to provide greater communication to and between Aboriginal and Torres Strait Islander fellows who represent AIDA on key or who are key figures within their college.

The Royal Australian College of General Practitioners (RACGP) and Australian College of Rural and Remote Medicine (ACRRM) were invited to the meeting to provide presentations on key initiatives, policies and processes that have supported Aboriginal and Torres Strait Islander doctors to fellowship.

With the highest number of Aboriginal and Torres Strait Islander fellows at 120, RACGP's initiatives include: priority selection, priority placement to support doctors' cultural needs, exam support including pre-exam workshop 'Yagila Wadamba' and individual post exam feedback provided by the College Censor for Aboriginal and Torres Strait Islander trainees who had been unsuccessful. RACGP have seen improved exam performance as a result of initiatives delivered in partnership with the Indigenous GP Registrar Network. Following fellowship, new fellows are becoming leaders within GP training and medical education.

ACRRM's number of Aboriginal and Torres Strait Islander trainees is above population parity at around 4%. A core component of ACRRM's curriculum addresses the needs of the Aboriginal and Torres Strait Islander population. There are 6,500 rural doctors and 85% of ACRRM trainees are in rural and remote areas. Key issues for ACRRM trainees include challenges faced due to working in rural and remote settings. ACRRM has a targeted recruitment framework and AIDA is represented on the selection committee. Assessment is online allowing trainees to stay home with their families. ACRRM's placement policy does not require trainees to move and the training program is flexible.

ACRRM is fortunate that the program has been highly appealing to Aboriginal and Torres Strait Islander doctors and doctors wishing to maintain a strong community connection. ACRRM sees their approach is 'growing a family' and the college's philosophy is to lean in early with wrap around support. ACRRM like RACGP are working with IGPRN to deliver assessment and training support to registrars and through the provision of assessment expertise.



AIDA then presented an overview of the college self-assessments completed in April 2023 against the minimum and best practice standards set by CPMC and AIDA in 2019. Colleges report every two years against the standards and the third report of the self-assessment will be released by 30 June 2023.

The group noted that colleges had made progress overall against each of the 15 standards however in the interest of continuous quality improvement, it may be timely to review some standards, and strengthen and simplify the reporting process with measurable goals and targets. The group workshopped five standards of most relevance to STSP and discussed the value of suggesting two additional standards in relation to:

1. *Accreditation of training sites to ensure culturally safe training environments for Aboriginal and Torres Strait Islander trainees*
2. *Ensuring Aboriginal and Torres Strait Islander trainees are supported to undertake culturally safe research*

AIDA will prepare a template for colleges to outline goals for the next 12 months against the CPMC/AIDA agreed standards.

Key outcomes from the meeting included:

1. The group would seek a Commonwealth Government solution to address financial burden and suggest that Australia follow the Aotearoa model whereby fees for Māori trainees are funded by Government.
2. Colleges would share cultural leave policies and share community protocol guidelines with the aim to embed strong policies across colleges.
3. The draft cross-college statement on racism would be circulated to the group for feedback.

Attendees

- Australian Indigenous Doctors Association
- Department of Health and Aged Care
- Australasian College of Dermatologists
- Australasian College of Sport and Exercise Physicians
- Australian College of Emergency Medicine
- Australian and New Zealand College of Anaesthetists
- Royal Australian and New Zealand College of Ophthalmologists
- Royal Australian and New Zealand College of Obstetricians and Gynaecologists
- Royal Australian and New Zealand College of Psychiatrists
- Royal Australasian College of Physicians
- Royal Australasian College of Medical Administrators
- Royal Australian and New Zealand College of Radiologists
- Royal College of Pathologists of Australasia

Apologies

- College of Intensive Care Medicine of Australia and New Zealand
- Royal Australasian College of Surgeons