

Acknowledgements

AIDA acknowledges and pays respect to the Traditional Owners of the lands across Australia on which our members live and work, and to their Elders and ancestors, past and present. We pay respect to the Ngunnawal people as the Traditional Owners of the land on which AIDA's office stands.

AIDA would like to acknowledge and thank The Royal Australian and New Zealand College of Radiologists (RANZCR) for their support of AIDA in securing and auspicing funds through the Commonwealth on behalf of the college consortia and all participating non-General Practice (non-GP) specialty colleges that formed the consortia named below.

1. Australian and New Zealand College of Anaesthetists (ANZCA)
2. Australasian College for Emergency Medicine (ACEM)
3. Australasian College of Dermatologists (ACD)
4. Australasian College of Sport and Exercise Physicians; (ACSEP)
5. College of Intensive Care Medicine (CICM)
6. Royal Australasian College of Medical Administrators (RACMA)
7. Royal Australian and New Zealand College of Obstetricians and Gynaecologists (RANZCOG)
8. Royal Australian and New Zealand College of Ophthalmologists (RANZCO)
9. Royal Australian and New Zealand College of Psychiatrists (RACP)
10. The Royal Australian and New Zealand College of Radiologists (RANZCR)
11. Royal Australasian College of Physicians (RACP)
12. Royal Australasian College of Surgeons (RACS) - joined in July 2023

Introduction

Funding of \$501,976 for AIDA's Specialist Trainee Support Program (STSP) was secured in 2022 by RANZCR from the Commonwealth's Flexible Approaches to Training in Expanded Settings (FATES). AIDA was subsequently subcontracted to lead activities as part of this funding, from 14 April 2022 to 14 April 2023. Additional funding of \$166,700 was provided to AIDA by RANZCR to extend activities until 30 June 2023.

The objective of the FATES funding was that AIDA establish a non-GP Specialist Trainee Support Program (STSP) focused on the recruitment and retention of Aboriginal and/or Torres Strait Islander doctors who wish to commence or are currently undertaking non-GP specialist medical training.

The long-term aim of STSP was to increase the number of Aboriginal and Torres Strait Islander non-GP Specialists.

AIDA conducted an inhouse evaluation to identify achievements and assess outcomes against the FATES objectives and outcomes.



Evaluation approach

AIDA conducted an evaluation to understand the early achievements and outcomes, and capture learnings for future implementation including ongoing sustainability of the program without FATES funding and scalability of the Program.

The evaluation sought to assess and understand whether the project:

1. Established a non-GP Specialist Trainee Support Program and key elements.
2. Augmented recruitment of Aboriginal and/or Torres Strait Islander doctors who wish to commence non-GP specialist medical training.
3. Augmented retention of Aboriginal and/or Torres Strait Islander doctors who are currently undertaking non-GP specialist medical training.
4. Led to an increase in the number of Aboriginal and Torres Strait Islander non-GP specialists.
5. What has been the benefit of the STSP for; participating Trainees, doctors wishing to undertake specialty training and colleges.

Methodology

A desktop review of project documentation including the funding guidelines, funding agreement, and relevant literature was conducted to understand the STSP and context. Surveys, written and verbal feedback from trainees and college staff recorded throughout the course of the activity was collated and analysed for key themes. The draft report was presented to the STSP Program Governance Group with input from AIDA and RANZCR staff before the report was finalised.

Limitations

This evaluation has been prepared inhouse and whilst it is informed by comprehensive program knowledge, a more rigorous and formal evaluation with an independent external provider would ensure greater impartiality in assessment. At the time of writing, AIDA intends to engage an external provider to undertake an independent evaluation in the second half of 2023 to inform future implementation of the program.

Ethics

Formal ethics approval has not been sought for this evaluation. AIDA has sought permission from Trainees, doctors wishing to commence specialty training and colleges following the provision of feedback throughout the project to include deidentified comments in program reporting.

Background

In 1983 the first known Aboriginal doctor, Professor Helen Milroy graduated from medicine. Medical student and workforce growth was slow in the two decades following. Reports from



2001 and 2004 identified 90 Aboriginal and Torres Strait Islander medical doctors¹ and 102 Aboriginal and Torres Strait Islander medical students² in the medical education system.

Revision of Australian Medical Council (AMC) Standards

In response to persisting health inequities experienced by Aboriginal and Torres Strait Islander Australians and workforce underrepresentation, significant effort has been made in recent years to increase the number of Aboriginal and Torres Strait Islander doctors within the medical workforce.

In 2006, the AMC revised the Standards for Assessment and Accreditation of Primary Medical programs and in 2015, the AMC revised its standards for specialist training colleges. These changes provided Aboriginal and Torres Strait Islander health and medical education at all points throughout the training process. This revision of the AMC accreditation affected specialist medical colleges, their Fellows and trainees, Aboriginal and Torres Strait Islander health advocacy organisations and ultimately, Aboriginal and Torres Strait Islander communities.

Aboriginal and Torres Strait Islander Medical Workforce

Through these reforms, the Aboriginal and Torres Strait Islander medical workforce has increased, with 757³ Aboriginal and Torres Strait Islander medical doctors and 434 Aboriginal and Torres Strait Islander medical students recorded in 2022⁴. Whilst numbers are increasing, further effort is required to recruit and retain Aboriginal and Torres Strait Islander doctors through to College training and fulfil on objectives to grow.

At the time the STSP was funded, most recent college reports identified 150 self-identifying Aboriginal and Torres Strait Islander fellows, equating to just 0.2% of the specialist workforce. Of these 150 fellows, 100 were GPs and 50 were fellows of non-GP colleges. AIDA had long known that the program of support established by Aboriginal GP trainees in 2008, the Indigenous GP Registrar Network' (IGPRN) had been a valued body during training, providing collegiate support, education and information about examinations in a culturally safe space.”⁵

¹ Aboriginal and Torres Strait Islander Health Performance Framework 2010: detailed analyses: Health System Performance (Tier 3) 3.10 Aboriginal and Torres Strait Islander people in the health workforce. September 2011. Accessed 9 July 2019 at <https://www.aihw.gov.au/getmedia/9bec0a51-9023-44e8-b7ab-21e265eb72f9/11874-3-10.pdf.aspx>

² Australian Indigenous Doctors' Association. Healthy Futures - Defining best practice in recruitment and retention of Indigenous medical students. 2005. Accessed 9 July 2019 at: <https://www.aida.org.au/wp-content/uploads/2018/03/AIDA-Healthy-Futures-Report.pdf>

³ Data for December 2022 provided by Ahpra to AIDA in January 2022

⁴ Medical Deans "Indigenous Medical Students – Australia"
<https://app.powerbi.com/view?r=eyJrljoiMzEyNjRmYjAtOGFIMS00MWQzLWl0Y2UtYmVlMTgyOTM4NDQ3liwidC16ljljY2Y4YjAxLWJhZTQ0NDQ2ZC1hZWVhLTdkYTljMDFiZDBmOSJ9&pageName=ReportSection5e5459dc898591506e79> accessed 13 July 2023

⁵ AIDA and James Cook University Australia 'Policy Brief: Strong Futures: Strengthening the Path to Fellowship for Aboriginal and Torres Strait Islander Medical Graduates' accessed 14 July 2023 available at https://aida.org.au/app/uploads/2021/01/AIDA_Policy-Brief_JULY_FINAL_PDF.pdf



AIDA's Leadership to Grow Aboriginal and Torres Strait Islander Medical Specialist Workforce

AIDA has worked with specialty medical colleges to advocate for change over many years.

From 2017 to 2023, AIDA delivered the Indigenous Medical Specialist Training Program (IMST), funded by Department of Health and Aged Care, aimed to increase the number of Aboriginal and Torres Strait Islander specialists.

In 2019, AIDA and the 15 specialist medical colleges endorsed 15 minimum and best practice standards and agreed to provide and publish bi-annual self-assessments against these standards. The third iteration of college self-assessments was collated in June 2023.

AIDA's work with colleges is guided by recommendations from a joint project AIDA undertook with James Cook University in 2018 and 2019, 'Strong Futures'. This project researched factors contributing to the growing number of non-vocationally registered (non-VR) doctors being exited from training programs without fellowship. This project made recommendations to strengthen the pathway to fellowship for Aboriginal and Torres Strait Islander doctors⁶.

Recommendations in the policy brief included that AIDA specifically :

- Establish a network for registrars across non-GP specialties
- Support trainees to appeal specialist training colleges examination outcomes. These should include both financial and emotional assistance
- Support colleges and training organisations implement the brief recommendations

Recommendations for Specialty Colleges and Training Organisations from Strong Futures were to:

- Ensure training programs support greater equity and are flexible for Aboriginal and Torres Strait Islander doctors, allowing part-time study and work options and additional leave for familial and cultural responsibilities, including attendance at funerals.
- Establish committees or a function within existing committees that monitor and are accountable for each Aboriginal and Torres Strait Islander trainees' success. Committees should include Aboriginal and Torres Strait Islander Fellows with similar life and work experiences as their trainees to ensure their cultural context is appreciated.
- Appoint a medical educator to provide tailored, regular support, coaching, exam preparation and feedback to each Aboriginal and Torres Strait Islander trainee and advocate on their behalf within the College. The trainee should be consulted to ensure that the educator is a person the trainee trusts and feels comfortable and supported by. This relationship should be monitored, and educators changed if necessary.
- Establish an early assessment method to assess clinical knowledge, exam technique and develop an individualised study plan.

⁶ ibid



- Establish a process to assess exam readiness for each trainee when they feel ready prior to sitting exams.
- Provide and fund scholarship programs for Aboriginal and Torres Strait Islander trainees and non-VR doctors including mentoring, quarantined study time, appropriate education, exam technique to meet any identified insufficiencies in clinical knowledge and exam technique. Should this involve independent commercial exam courses, individual participation or a collective use should be funded where necessary.
- Provide alternative assessment methods to Aboriginal and Torres Strait Islander registrars.

In 2021, AIDA created a new role to lead, develop and implement a Specialist Trainee Support Program. In April 2021, the Specialist Trainee Support Lead role was filled with a Torres Strait Islander Fellowed GP, employed 0.9 FTE to undertake early work prior to funding being secured.

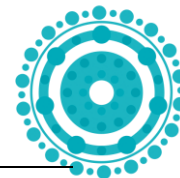
Evaluation Findings

The desktop review demonstrated that the program design elements were delivered to establish the STSP.

Key activities required as part of the FATES funding agreement were that AIDA will, in collaboration with consortia members:

1. Conduct a needs assessment (including a stock take of existing resources) following consultation with non-GP Indigenous trainees and Fellows, and specialist medical colleges in the consortia.
2. Commence the process of establishing or building on recruitment pathways for Aboriginal and/or Torres Strait Islander specialist trainees in each participating College.
3. Commence a process of establishing an induction program in each participating College.
4. Develop a suite of trainee resources.
5. Develop a suite of resources for supervisors to support them in supporting their Aboriginal and/or Torres Strait Islander specialist trainees, made available to all participating Colleges.
6. Establish a non-GP Aboriginal and/or Torres Strait Islander specialist trainee network.
7. Initiate the process to develop a framework for specialist medical colleges to strengthen their engagement with Aboriginal Community Controlled Health Organisations (ACCHO) to create opportunities for Indigenous trainees to undertake accredited training, (especially in rural and remote locations).

An overview of activities, achievements and outcomes against each element is provided below.



1. Conduct a needs assessment (including a stock take of existing resources) following consultation with non-GP Indigenous trainees and Fellows, and specialist medical colleges in the consortia.

In considering needs to ensure stronger recruitment, selection, and retention through specialty training, AIDA identified priorities from a stocktake of existing resources including:

- Healthy Futures - Defining best practice in recruitment and retention of Indigenous medical students. 2005⁷
- 'Policy Brief: Strong Futures: Strengthening the Path to Fellowship for Aboriginal and Torres Strait Islander Medical Graduates'⁸
- Informal consultation through discussions with individual trainees and fellows

Enablers identified in the 'Health Futures' report in 2005 for Aboriginal and Torres Strait Islander medical students remain relevant to Aboriginal and Torres Strait Islander doctors in training. STSP prioritised a focus on factors enabling retention as outlined below.

Retention that works:

- Indigenous staff
- Indigenous health support unit
- Tutoring
- Academic clinical support
- Mentors
- Scholarships and Financial support
- Cultural safety
- Indigenous content in curriculum
- Indigenous partnerships
- Practical equipment grant
- Collegiate support
- Professional development



Additional factors AIDA identified that were key enablers for speciality trainees were:

- Flexibility
- Culturally safe supervision
- Trainee social emotional wellbeing (see diagram to the right)

Cross-College Project Group

AIDA established a cross-college project group which met five times during the activity. These forums provided opportunity to deepen understanding of college needs including increased

⁷ Australian Indigenous Doctors' Association. Healthy Futures - Defining best practice in recruitment and retention of Indigenous medical students. 2005. Accessed 9 July 2019 at: <https://www.aida.org.au/wp-content/uploads/2018/03/AIDA-Healthy-Futures-Report.pdf>

⁸ AIDA and James Cook University Australia 'Policy Brief: Strong Futures: Strengthening the Path to Fellowship for Aboriginal and Torres Strait Islander Medical Graduates' accessed 14 July 2023 available at https://aida.org.au/app/uploads/2021/01/AIDA_Policy-Brief_JULY_FINAL_PDF.pdf



understanding, commitment, strategies and identifying key areas to improve in their recruitment including selection, and retention of Aboriginal and Torres Strait Islander trainees. The factors supporting retention outlined above were presented to the cross-college group on 13 September 2023.

Five meetings of the cross-college group were held with the majority of colleges attending each meeting. Meetings were hybrid, however face to face attendance was preferred by AIDA and participants for value in person networking and informal conversations. College representatives including two CEOs, a Deputy CEO, Directors, Managers and Project Officers. The thirteenth college was invited to attend and participated in meetings from February 2023.

A number of colleges requested to send more attendees seeing a benefit in engaging in the forum to improve college strategies.

At regular intervals, colleges were asked to evaluate meetings, commit to actions before the next meeting and share what they have found of most value. Verbal and written feedback highlighted that colleges found the Cross-College meeting facilitated by AIDA highly beneficial. to share strategies, hear about other college initiatives and seek expert advice from AIDA.

Some comments from meeting on what was most useful included:

Hearing about what other colleges are doing and the type of assistance that can be provided by AIDA so that we can implement change and improvements in our college.

Hearing about what other College's are doing and how we're on this journey together. Leaving today's session with practical next steps and commitments.

Really great to hear the wide-ranging initiatives. Great to have an online and in person option with good numbers of each for it to work.

Open discussion with Colleagues and AIDA. Learning from what other Colleges are doing well and identifying gaps.

AIDA provided considerable advice to colleges outside of the meetings. Colleges approached STSP for guidance on a range of matters including matters relevant to STSP such as advice on trainee performance management and advice on selection policies to matters not directly related to the program such as review of curriculum material, advice on engaging Aboriginal artists, review of college position descriptions.

Whist these requests were indicative of the value college's saw and received from AIDA's knowledge and expertise, college expectations should be managed in the future to ensure that resourcing and focus remain on STSP priorities in relation to strengthening recruitment and retention of Aboriginal and Torres Strait Islander trainees.



Cross-College Fellows Reference Group

The program will benefit from greater trainee and fellow engagement as the program grows understanding of individual college programs and trainees' individual experiences of their college to understand where best to advocate for change.

An activity articulated in the funding agreement, was that AIDA would undertake the needs assessment following consultation with colleges, trainees and fellows. AIDA identified the need to be guided by Aboriginal and Torres Strait Islander fellows of the non-GP colleges. A great strength of the workforce was that there were now Aboriginal and/or Torres Strait Islander Fellows and Trainees, or Diploma graduates of almost every specialty college. In many cases fellows were highly active within their college and also striving to influence change to see their college better recruit and support their Aboriginal and Torres Strait Islander trainees to fellowship.

AIDA invited Fellows or suitable doctor of 12 non-GP colleges to participate and held meetings in April and May 2023. Doctors provided verbal advice that they valued the opportunity to hear about the efforts and activities of their peers in other colleges and discuss strategies. AIDA noted that there was a diversity of views on a range of matters and that ongoing consultation with fellows would be highly beneficial in developing consensus on key matters such as creating equity of access through appropriate financial support and revising the self-assessment reporting template developed through IMST to monitor and measure changes impacted by college strategies.

In addition, fellows provided constructive feedback to AIDA in relation to:

- Shift the focus of STSP to be less college focused and to be more Trainee centric.
- Recognise that whilst colleges may report positive activity, in reality trainee experiences were not improving.
- Better communicate STSP and AIDA activities and opportunities to trainees and fellows.
- Use fellows' time constructively.
- Value informal face to face opportunities for mentoring and peer support.

Opportunities to explore:

1. Confirmation of the purpose of STSP to the Cross-College group to manage expectations.
2. Clarification of the scope of support that can be provided to colleges through STSP.
3. Continuation the Cross-College Fellows Reference Group.

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2. **Commence the process of establishing or building on recruitment pathways for Aboriginal and/or Torres Strait Islander specialist trainees in each participating College**



AIDA established and delivered a series of twelve online ‘Yarn Ups’ which were information sessions on specialty pathways. The Yarn Ups were commenced prior to FATES funding being received. Greater numbers of students and doctors registered for the Yarn Ups and overall, 37 medical students and doctors attended the Yarn Ups, some attending more than one Yarn Up. In general feedback was positive from participants who valued the opportunity to have an informal conversation with Aboriginal and Torres Strait Islander Trainees and Fellows of each college. The table below shows a record of participant numbers.

Yarn Up	Date	No. of attendees
RANZCO	15/2/22	6
RANZCOG	17/2/22	4
ACEM	30/3/22	4
RACP	28/4/22	6
ANZCA	17/5/22	1
RANZCR	21/6/22	3
CICM	22/6/22	3
RANZCR	19/7/22	1
RANZCOG	16/8/22	6
ACSEP	13/9/23	0
RACMA	2/11/22	6
RANZCO	20/3/23	5

In addition, in October 2022, AIDA ran the annual ‘Growing our Fellows’ session at the AIDA Conference. This is an opportunity for all attendees of the conference to network with every specialty college and learn about their training programs. Usually this is attended by the President of e5ach College and an Aboriginal and/or Torres Strait Islander Fellow or Trainee.

This continues to be a useful forum for colleges to recruit trainees and build on their recruitment strategies. However, some of AIDA’s members have also advised that it is perceived as a competitive exercise between colleges. Whilst the session provides an introduction to college programs, more information is required out of this session about the requirement of training programs and support for prospective trainees to assess the suitability of the program for individual trainees and their family and community responsibilities. The concept of the more informal Yarn Ups is therefore an important addition to the recruitment activities.

In July 2022, AIDA met with staff from the Southeastern Regional Training Hub (SRTH) alliance to discuss Regional Training Hubs (the Hubs) promotion of college pathways and the one-page flyers the Hubs had developed. Throughout the program, AIDA has progressed a relationship with the hubs and will explore further opportunities to strengthen information for Aboriginal and Torres Strait Islander doctors developed by the hubs in the 23-24 financial year.

Opportunities to explore:



1. Consideration of holding Yarn Ups in blocks so that three pathways can be presented on each occasion.
2. Exploration of other options for promoting college pathways including collaboration with the Regional Training hubs.
3. Inclusion of a mechanism to record interest in college pathways from the 'Growing our Fellows' session for the STSP team to follow up.

3. Commence a process of establishing an induction program in each participating College.

Through the cross-college project group meetings, AIDA has asked colleges to share information about their induction programs. A number of colleges welcome Aboriginal and Torres Strait Islander Trainees with a letter from the President that provides information about support available at the college. Good practice in relation to induction has also included providing opportunities for Aboriginal and Torres Strait Islander Trainees of the college to connect and network with each other.

AIDA's engagement with trainees is likely to grow over time as STSP continues and expands. This will enable AIDA to have greater insight into individual trainee experiences. Through the course of the program, AIDA has been informed by Aboriginal and Torres Strait Islander trainee responses in the Medical Training Survey⁹, responses to questions relating to Training curriculum for Aboriginal and Torres Strait Islander non- GP specialist trainees highlight further areas that could be improved which would be included in induction:

My college clearly communicates the requirements of my training program.

63 % of Specialist non-GP trainees: Aboriginal and/or Torres Strait Islanders agreed.

72 of all Specialist non-GP trainees: National response

My College clearly communicates with me about changes to my training program and how they affect me

60% of Specialist non-GP trainees: Aboriginal and/or Torres Strait Islanders agreed compared with 64% of all Specialist non-GP trainees.

Whilst the numbers are not significantly lower for Aboriginal and Torres Strait Islander doctors in training, these results highlight an area for colleges to improve overall.

I know who to contact at the College about my training program

63% of Specialist non-GP trainees Aboriginal and/or Torres Strait Islanders agreed compared with 72% of all Specialist non-GP trainees who responded.

Opportunities to explore:

⁹ Ahpra 'Medical Training Survey: Aboriginal and Torres Strait Islander doctors in training' available at <https://medicaltrainingsurvey.gov.au/Download/2022/2022%20Report%20for%20Aboriginal%20and%20Torres%20Strait%20Islanders.pdf> accessed 24 July 2023



1. Continuation of an annual reporting process on strategies to improve induction programs and better support Aboriginal and Torres Strait Islander trainees commencing training.
2. Provision of support to colleges to provide clear information about their training program and the requirements and relevant college contacts including any specific contacts for Aboriginal and Torres Strait Islander trainees.

4. Develop a suite of trainee resources.

Throughout the year, STSP delivered a suite of resources to support the cohort, which included:

1. Fortnightly drop-in session held at lunchtime.
2. Twelve College pathway Yarn Ups.
3. Five webinars held with two on cv writing, two on job interview preparation and one on career planning. Fact sheets were produced and shared with trainees and medical students for CV writing and job interview preparation.
4. Two face to face workshops.
5. 1 on 1 culturally appropriate support.
6. Performance coaching through a newly created role, Specialist Trainee Support Officer.
7. Monthly virtual Trainee catchups held in the evening.
8. WhatsApp group.

Webinar Feedback

Half of the participants that attended the CV writing webinar completed the evaluation. All agreed:

- strongly that the webinar was culturally appropriate
- that the webinar was of value
- that they would recommend the webinar to their peers

Four people attended the Job Interview webinar in February 2023. Of these, two people completed the evaluation and

- strongly agreed that the webinar was culturally appropriate for them,
- agreed they would recommend the webinar to their peers and
- agreed that the webinar was of value to them

Comments included:

*I have found these webinars extremely helpful in preparation for future planning
Thanks so much for your time, I look forward to attending the next AIDA webinar as this was really useful. I was able to reflect on some of those points that I implemented in previous scholarship and cadetship interviews as well as gain more tips for future interviews! Thanks again!*



Opportunity to explore:

1. Continuation of the initiatives and monitoring of what is of best value and of best use of time and resources.

5. Develop a suite of resources for supervisors to support them in supporting their Aboriginal and/or Torres Strait Islander specialist trainees, made available to all participating Colleges.

With the appointment of a Medical Educator in July 2023, AIDA was able to produce two webinars promoted via all participating colleges and develop two complementary resources. The resources were focused on 'culturally safe clinical supervision' and 'addressing racism'.

Approximately 200 people registered for the first two webinars held in November 2022 and 98 attended both. In the second round of webinars, 267 people registered and 92 attended the first webinar and 185 registered and 48 attended the second. In the second round of webinars, the webinar was closed after 10 minutes to ensure a quality experience for those who attended.

AIDA was pleased with the response to the webinars. It was clear from the analysis of the evaluation that few doctors had regular up to date cultural awareness or cultural safety training.

In January, the Medical Educator who was working two days per week, resigned and the Specialist Trainee Support Lead took 12 months leave from the role. At the time given that funding was uncertain beyond 14 April 23, AIDA decided not to recruit the Medical Educator position but backfilled the Lead role with an Aboriginal Fellow who worked part-time two days per week. This reduced capacity meant AIDA was unable to develop any further resources. However, in March, the substantive Lead was contracted on a casual basis to deliver the second round of webinars.

Following analysis of the supervisor registration data and evaluation, it was clear that there was high need for supervisors to access both cultural awareness and cultural safety training. AIDA recognized that existing resources developed for commercial use, AIDA's online module 'Cultural Awareness- An introduction to cultural safety' module would be of high value to supervisors. This module was developed by Aboriginal and Torres Strait Islander doctors for other doctors.

AIDA proposed to redirect STSP underspend to provide 815 tokens to AIDA's online module 'Cultural Awareness- An introduction to cultural safety' to all 13 non-GP specialty colleges. This proposal was accepted by RANZCR and DoHaC.

Cross-college Project Group – Cultural Safety Training

AIDA identified that colleges required support to develop culturally appropriate information and content. AIDA's in person cultural safety program 'The Clinical Application of Cultural Safety' was an existing resource developed by Aboriginal and Torres Strait Islander doctors for other doctors. Some colleges had opted to use this course in lieu of creating their own. To



provide colleges with comprehensive insight into this course and to promote uptake of the course and consistency of training across colleges, AIDA facilitated an in person training session for college representatives at the May 2023 meeting of the cross-college group.

Opportunity to explore:

1. Evaluation of the uptake and any increase in cultural awareness and cultural safety training

6. Establish a non-GP Aboriginal and/or Torres Strait Islander specialist trainee network.

AIDA undertook a range of activities to build engagement with trainees and establish a specialist trainee network. As previously summaries, these activities included:

1. Fortnightly drop-in session held at lunchtime
2. College Yarn Ups, twelve held with nine colleges
3. Five webinars held with two on cv writing, two on job interview preparation and one on career planning. Fact sheets were produced and shared with trainees and medical students for CV writing and job interview preparation
4. Two face to face workshops
5. 1 on 1 culturally appropriate support
6. Monthly virtual Trainee catchups held in the evening
7. WhatsApp group

AIDA recognised that trainees needs differ in terms of training stage, training program requirements and professional development needs. At this stage STSP is limited in relation to its depth of understanding of 13 separate college training programs and education needs and this is likely to grow in future years. The early achievement and outcomes of the network in the first year of STSP have been in establishing culturally safe spaces and opportunities for doctors to come together with other Aboriginal and Torres Strait Islander doctors to support one another and be provided with support by AIDA and targeted professional development.

Evaluation of the two face to face workshops demonstrates this value and has trainee suggestions for content that would be of most useful to the diverse group. In time it would be beneficial for AIDA to collaborate with educators across colleges to ensure that content is relevant to success on different training programs.

The Indigenous GP Registrar Network (IGPRN) established in 2008 has a close relationship with the Royal Australian College of General Practitioners (RACGP) and the Australian College of Rural and Remote Medicine (ACRRM). RACGP runs an exam preparation workshop



alongside IGPRN workshops, called Yagila Wadamba¹⁰. Such an approach may be beneficial for STSP in the future as activities and engagement builds.

Suggestions for future workshops included having a greater focus on wellbeing including cultural wellbeing, time for discussion and conversation, content delivered by Aboriginal and Torres Strait Islander experts including fellows and content relating to self-care, finances, leadership and research.

Highlights reported by trainees included:

- Sharing experiences and stories with the other trainees
- Peer support that was facilitated through robust conversations throughout the day.
- [Study skills session with] Patsy
- Yarning and eating together, safe space for discussions with like minded people.
- Studying smarter session
- Cultural session
- Cultural activity with my children.
- The cultural event interacting with children
- Study skills session.
- Loved Patsy's info and Aunty Candice's cultural workshop
- Dr Patsy

Opportunities to explore:

1. Building engagement with trainees and prospective trainees
2. Continuation of twice yearly face to face meetings and other initiatives to provide a forum for peer connection and support in a culturally safe space

7. Initiate the process to develop a framework for specialist medical colleges to strengthen their engagement with Aboriginal Community Controlled Health Organisations (ACCHO) to create opportunities for Indigenous trainees to undertake accredited training, (especially in rural and remote locations).

AIDA facilitated relationships between VACCHO and NACCHO and all consortia colleges thereby establishing and strengthening relationships with the NACCHO and VACCHO to explore opportunities for Aboriginal and/or Torres Strait Islander trainees to undertake accredited training within the ACCHO sector.

The working group identified that all colleges have existing frameworks to identify and support relationships with key stakeholders including ACCHOs through their Reconciliation Action Plans or similar document and therefore a broad framework is not required.

¹⁰ RACPG 'Yagila Wadamba Program and IGPRN Workshop' accessed 26 July 2023 available at <https://www.racgp.org.au/the-racgp/faculties/aboriginal-and-torres-strait-islander-health/education-and-training/gps-in-training/indigenous-fellowship-excellence-program>



The working group identified that the majority of Aboriginal and Torres Strait Islander doctors are working in hospital settings. Engagement of training hospitals is considered a more pressing need for next stages of STSP subject to capacity. Should trainees express interest in undertaking training in ACCHOs, a targeted approach would be required by colleges to develop relationships with relevant ACCHOs and communities.

AIDA undertook a scoping exercise to determine which colleges already had a commitment to develop stronger relationships with Aboriginal and Torres Strait Islander organisations. All colleges had a formal commitment to build relationships through Reconciliation Action Plans (RAP) or similar documents.

AIDA also noted the broader policy context and that the National Agreement on Closing the Gap, agreed to by all Australian Governments, represents a new approach where policy making that impacts Aboriginal and Torres Strait Islander people occurs in full and genuine partnership with Aboriginal and Torres Strait Islander people¹¹.

- 11 of the 13 colleges have an existing RAP
- 1 college is in the process of developing a RAP
- 1 college has an Action Plan for Māori, Aboriginal and Torres Strait Islander Health

Opportunities to explore:

1. Encouragement of Colleges to implement RAPs and Action Plans and identify and build relationships where appropriate.
2. Consideration of the alignment of The National Agreement on Closing the Gap (National Agreement) with STSP.

8. Provide ongoing, tailored and culturally appropriate support to individual Aboriginal and Torres Strait Islander trainees to assist upskilling Colleges.

AIDA maintained a log of support over the course of the program and over the 14.5 months a total of 41 doctors and medical students were provided tailored individualized support including pastoral support, advice, performance coaching. Most of the students and doctors approached AIDA and were referred internally to STSP. In a few cases doctors were referred from their college. Support was provided to:

- 18 potential trainees, assisting recruitment to nine separate non-GP colleges
- 19 trainees, assisting retention at eight non-GP specialty colleges
- 2 specialists, assisting specialist workforce retention
- 12 medical students

Key learning from this activity included confirmation of the need for better financial support and pastoral support across colleges

¹¹ Coalition of Peaks (2020). National Agreement on Closing the Gap.



In January 2023, STSP was enhanced by the creating of a new role, Specialist Trainee Support Officer, and appointment of an Aboriginal staff member to the role who was a performance coach, a qualified psychotherapist with expertise in CV review and job interview preparation. AIDA achieved the following outcomes through this activity:

- Successful advocacy to colleges to have application and exam fees waived to enable doctors to apply and progress through training
- Advocacy to colleges for extension of training time and additional exam attempts
- Performance coaching of prospective trainees who were selected to college training

Opportunities to explore:

1. Identification of college staff who can provide support
2. Influencing colleges to strengthen financial support for trainees and prospective trainees to ensure costs are not a barrier to applying and progressing through training.
3. Formalisation of a performance coach role within the STSP team.

Overall reflections

AIDA has successfully implemented the STSP with benefit to trainees, prospective trainees and the 13 non-GP colleges now participating in the cross-college project group.

Overall numbers of Aboriginal and Torres Strait Islander non-GP specialist trainees and fellows have increased over the course of the program. In 2021, 50 fellows were identified by non-GP colleges and in 2023 non-GP fellow numbers had grown to 70. In 2021, there were 99 Aboriginal and Torres Strait Islander non-GP trainees and in 2023 this number had grown to 136.

A table showing data colleges have provided to AIDA as part of biannual self-assessments for the last four years is outlined below.

College	Aboriginal and Torres Strait Islander Fellows			Aboriginal and Torres Strait Islander Trainees		
	2019	2021	2023	2019	2021	2023
Non GP Colleges						
ACD	1	1	4	3	3	4
ACEM	5	6	8	14	19	19
ACSEP	0	0	0	1	1	1
ANZCA	5	9	7	9	7	7
CICM	0	0	0	3	4	5
RACMA	0	0	NP	1	1	NP
RACP	12	13	14	24	26	46



RACS	3	3	5	5	7	5
RANZCO	1	1	4	0	0	3
RANZCOG	3	5	8	5	5	12
RANZCP	8	10	14	17	25	32
RANZCR	1	1	4	0	0	1
RCPA	1	1	2	1	1	1
Subtotal	40	50	70	83	99	136

There is significant complexity for AIDA in working with 13 colleges and addressing and meeting the needs of Aboriginal and Torres Strait doctors wishing to undertake and are currently in training in diverse specialties.

Ongoing monitoring and evaluation of the program would be beneficial to ensure that AIDA is maximising value for all parties and making cost and resource effective investment for greatest benefit.

Additional recommendations of this preliminary evaluation are therefore that an external evaluation is undertaken to best inform program development and that a monitoring and evaluation framework is developed following this evaluation to inform continuous quality improvement of the program.