AMACDT and medical college trainee representatives discuss preparing trainees for independent practice

26 June 2025

The AMA Trainee Forum met on 26 June 2025. Facilitated by AMA Council of Doctors in Training (CDT) Chair Dr Sanjay Hettige, the session focused on how colleges are preparing their trainees for independent practice. Trainee chairs and representatives from a range of specialist medical colleges attended the session, joined by Professor Alison Jones, Chair of the Australian Medical Council (AMC) Working Group on Accreditation Standards for Specialist Medical Training.

Reflections and discussion

The forum commenced with remarks from Professor Alison Jones, who provided an overview of the current AMC consultation on revising specialist medical college accreditation standards. This includes proposed reforms to strengthen graduate outcomes, ensure psychosocial safety in training environments, clarify roles and expectations in the specialist international medical graduate (SIMG) assessment space, and enhance alignment with evolving community needs. A key theme was the importance of producing consultants who are not only clinically competent but also confident system navigators, culturally safe practitioners, and effective leaders.

Trainee representatives discussed how their colleges currently support preparing doctors for independent practice. Common themes that emerged included:

The need for structured transition pathways

Many colleges were reported to rely heavily on informal apprenticeship models, leaving trainees to absorb key non-clinical skills (e.g., leadership, business literacy, patient advocacy, and system navigation) in an inconsistent manner. Trainees called for more structured and standardised transition-to-fellowship initiatives that moved beyond technical proficiency.

For example:

- **The College of Intensive Care Medicine** was highlighted for introducing a formal "transition year" post-exam, enabling provisional fellows to act in near-consultant roles with structured non-clinical duties.
- **The Royal College of Pathologists of Australasia** was in the early stages of implementing autonomous reporting for senior trainees in anatomical pathology to bridge the experience gap.
- **The Royal Australian College of General Practitioners** embeds independent practice skills from the outset of training due to its apprenticeship-based model and financial incentive structures, with supervision closely linked to future employment in the training site.

Disparities between colleges and training models

Trainees acknowledged considerable variability in how well colleges prepare them for practice:

- GP trainees reported high satisfaction with current practice, in part due to the embedded nature of independent consulting, one-on-one mentorship, and structured peer learning from day one.

- In contrast, trainees in hospital-based specialties often reported limited exposure to the real-world expectations as independent consultants until after fellowship.
- There were concerns that some colleges see themselves primarily as accreditors of programs, rather than as active education providers limiting their engagement in training delivery.

Workforce realities and misaligned incentives

A recurring theme was the mismatch between training structures and actual employment opportunities. In particular:

- Several trainees noted that senior clinicians may be reluctant to invest in developing trainees they do not expect to retain post-fellowship, particularly in competitive or oversupplied metropolitan job markets.
- There was strong interest in models that link training and future employment more closely, such as end-to-end rural pathways or general practice's incentive-aligned supervisor structures.

Calls for expanded non-clinical training

Trainees urged colleges to better integrate:

- business skills, private practice readiness, and billing
- cultural safety and advocacy
- system navigation and policy literacy
- supervision and mentorship skills
- leadership, governance, and decision-making.

Some colleges were beginning to respond, with initiatives such as leadership development scholarships, academic registrar pathways, and improved wellbeing supports. A key thread emerging from the discussion was preparing trainees to deal with uncertainty and ambiguity.

Looking forward

The forum underscored the importance of collective responsibility across colleges, training sites, and regulators in preparing doctors for independent practice. Trainees reiterated the need for:

- common graduate outcomes across specialties
- embedding non-clinical competencies into curricula
- transition-to-fellowship programs with defined supervision and autonomy
- improved rural exposure and structured supports
- stronger governance structures with meaningful trainee input.

The AMACDT thanked Professor Alison Jones and all college trainee representatives for their valuable insights. These discussions help inform ongoing advocacy to ensure medical training equips all doctors for safe, independent, and fulfilling practice in diverse settings.

Attending medical college trainee representatives included:

- Royal Australasian College of Physicians
- Royal Australian College of General Practitioners
- Royal College of Pathologists of Australasia
- College of Intensive Care Medicine
- Royal Australian and New Zealand College of Radiologists
- Royal Australasian College of Medical Administrators.

The next AMA Trainee Forum will be held later in 2025. For questions or feedback, contact: cdt.chair@ama.com.au

The AMA Trainee Forum is designed to increase collaboration between specialist medical college trainee committees and enhance cross specialty communication. If you have any feedback or questions, please contact us at cdt.chair@ama.com.au. The AMACDT represents medical trainees throughout Australia and advocates for equitable and safe outcomes for trainees and their patients.