

Delaying recruitment and the start of the 2021 clinical year in response to COVID-19

The situation:

- Several jurisdictions have considered the feasibility of delaying 2021 recruitment processes for doctors in training (DiTs) in response to managing a possible surge of COVID-19 patients. Such a move could have knock on effects, potentially delaying the start of the 2021 clinical year and impacting on trainee progression and hospital workforce.
- The [Medical Board of Australia has already announced it will waive usual mandatory rotation requirements for interns in 2020 whilst taking steps to ensure quality education, training and supervision.](#)
- At the time of writing, WA and NSW have considered this issue and have decided to not delay the clinical year under the current COVID-19 pandemic conditions.

The impact:

- DiTs across Australia are understandably concerned about the potential for delays to training during the COVID-19 response and would like to maintain their current training trajectory for as long as possible.
- Concerns have been raised about whether or not it may be difficult for DiTs to prepare for application processes, perform optimally at interviews, and to progress equitably through training when many are likely to be working to meet the service demands of the COVID-19 pandemic and further opportunities to bolster CVs have been postponed; these factors should be taken into account.
- Noting the uncertainty about the duration and peak of the COVID-19 pandemic, if a decision were made to delay recruitment for 2021, and it eventuates that there is no need for a COVID-19 surge workforce, then many services may find they have workforce shortages and there is an unnecessary bottleneck of DiTs (especially residents) looking to progress through training.

The way forward:

- State and Territory AMA Doctor in Training representatives should be involved in any discussions which affect DiTs and recruiting decisions for 2021. The AMA recommends forming a group of essential organisations to meet monthly, analyse incoming data and consider the need to defer recruitment and the start of the 2021 clinical year.
- The unpredictable nature of the situation must be recognised. If the response to COVID-19 impacts on critical recruitment stages, the AMACDT's preference is for all DiTs to be re-offered a contract for renewal and for this approach to be adopted nationally. Consideration should also be given to adopting nationally consistent recruitment processes for intern, resident and registrar recruitment, including aligning dates for recruitment.
- In the longer term, opportunities to streamline recruitment processes to minimise the workload for all involved and avoid duplicative processes for similar roles should be considered.
- Should it be deemed necessary to defer the start of 2021 clinical year for a period because of delayed recruitment due to COVID-19, this should occur at a national level. This should be an agreement from colleges and training programs for the 2021 clinical year to count as a full year for training, with extra allowances for leave later to compensate for leave not taken during COVID.
- While the impact of COVID-19 on training progression will be different for DiTs by stage of training and specialty, all training programs are likely to be disrupted in some way. Flexible and innovative approaches to supporting DiTs to meet training requirements and progress through training should be considered, including outcomes/competency-based approaches to learning.
- Irrespective of the solution, it is essential that structures are in place to support the wellbeing of DiTs along with systems to identify DiTs at greater risk of poor mental health secondary to isolation, increased workload, or illness.