



# COUNCIL OF PRESIDENTS OF MEDICAL COLLEGES

## POSITION STATEMENT

17 April 2020

### Using a Skills Stratification Approach to Trainee Redeployment during the COVID-19 Pandemic

The Council of Presidents of Medical Colleges (CPMC) comprises all fifteen of Australia's specialist Medical Colleges, half of which are also located in New Zealand.

CPMC recognises that all doctors are working under extraordinary pressure in many locations during the COVID-19 pandemic and support them. All specialist trainees have a broad skill set and diversified areas of expertise and wherever possible should remain working within their existing specialty/skillset in an acute setting. If redeployment is required to support critical care, including acute medical and emergency department services, mobilising the doctor-in-training workforce should follow a skills stratification approach as follows:

- **Airway Trained Skills:** Trainees trained in advanced airway skills are suitable to be deployed to critical care units. Also trainees having worked in the formal ICU and outreach areas converted to ICU, including experience having reviewed patients in other areas requiring consideration of escalation of care would be suitable for deployment to critical care units.
- **Advanced Life Support/Acute Medicine Trained:** Trainees who are experienced in the assessment and admission of acute patients including having experience on isolation wards with patients at high risk of respiratory collapse and cardiac arrest. This includes experience with paediatric and obstetric cardio-respiratory arrest.
- **Non-acute Care Trainees:** Trainees who have no recent experience in the acute medical or critical care setting or are under-utilised primarily procedural trainees including surgery, orthopaedic, ophthalmology can be utilised in the general areas to provide ongoing continuity of care.
- In **Primary Care- General Practice** registrars can be redeployed following the skills stratification process outlined above.

While the above skills stratification approach can be useful as a guide it is recognised that each trainee is unique and therefore advise active consultation with individual trainees prior to redeployment and that appropriate supervision must be available wherever they are mobilised to.

**Managing the wellbeing of the Consultant teams** is critical and College Presidents feel it is imperative that the medical workforce has access to appropriate support during this pandemic. Colleges have pre-existing avenues of support for their members and call for further health system sponsored support services specific to well-being needs arising in the context of COVID-19. These should include support for doctors working in environments outside their normal spectrum of activity.

Dr Kym Jenkins, Chair CPMC