

## **AMA submission to IHPAs Public consultation on the development of the Australian Teaching and Training Classification**

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Investment in teaching, training and research (TTR) is critical to the future of the health system. The AMA has supported IHPAs work to apply an ABF model to TTR from the outset on the basis that an appropriate funding model for TTR should:

- support the maintenance of a highly qualified and well-trained medical workforce through the provision of clinical training and maintenance of research in public hospitals; and
- provide medical students and graduates with a quality clinical training experience from medical school through to the completion of vocational training.

Applying an ABF model to teaching and training is a complex task, and the work that IHPA has done to date to prove that this is possible has been consultative, robust and is to be commended. The AMA acknowledges that the current consultation document on the development of the Australian Teaching and Training Classification (ATTC) is a starting point for classifying teaching and training by health discipline and stage of training consistently at a national level, and in doing so, to draw out the relative differences in the cost of training an intern as opposed to a newly graduated nurse for example.

Throughout the TTR project the challenges associated with defining, classifying and costing teaching and training have been discussed at length. Whilst acknowledging the inherent challenges posed by meeting the needs of a federated health system, different health disciplines, and embedded teaching and training, we strongly encourage the development of a classification system that has the capacity to capture the changing complexity and intensity of training across the continuum of medical training.

More specifically, we would like to see further granularity by year of medical training and specialty with prevocational and vocational doctors separately classified and coded in the next iteration of the ATTC. On this basis, prevocational trainees should be divided into PGY1, PGY2 and PGY3+ categories and vocational trainees into basic and advanced categories as a minimum.

In closing, the AMA would like to draw your attention to a set of principles and objectives to underpin funding models for teaching and training developed by the AMA and a group of medical stakeholders in October 2012. These remain relevant to this piece of work and its future iterations and can be found on the AMA website at <https://ama.com.au/article/activity-based-funding-teaching-training-and-research>

We welcome the chance to discuss this classification with you further and to that end have invited the IHPA secretariat to attend the next meeting of the AMA Council of Doctors in Training on 28-29 October 2017.

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If you have any questions, please contact Ms Sally Cross on (02) 6270 5433 or [scross@ama.com.au](mailto:scross@ama.com.au) for further information.

Yours sincerely



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