

AMC Commendations, Conditions, and Recommendations

Commendations

Standard	Commendations
Standard 1	A The commitment of College fellows to the governance and delivery of the education and training program, continuing professional development program and assessment of specialist international medical graduates.
	B The appointment of the Trainee Director is a positive step towards recognising trainees as a key stakeholder group.
	C The combined expertise and experience of the Aboriginal and Torres Strait Islander Mental Health Committee, Te Kaunihera mo ngā kaupapa Hauora Hinengaro Māori, and the Community Collaboration Committee are important resources for evolution of the College's education, training and continuing professional development programs.
	D The Rural Psychiatry Roadmap 2021 – 2031, the Rural Psychiatry Training Pathway, and development of the Diploma of Psychiatry demonstrates engagement with internal and external stakeholders, and responsiveness to workforce and community need in Australia.
Standard 2	E The publicly available Fellowship Competencies that clearly define the expectations of a graduate psychiatrist.
Standard 3	F The public availability of broad curriculum maps for Stage 1 and Stage 2 of training, linked to learning outcomes, learning activities and assessment.
	G The focus on developing specific curriculum content as part of the Rural Psychiatry Roadmap to respond to the needs of rural communities in Australia.
	H The support trainees receive to take breaks in training and pursue studies of choice within the training program.
Standard 4	I The availability of College-developed e-learning modules on Learnit, and the InTrain trainee management system, effectively used in the delivery of the training program.
	J The provision for trainees in Aotearoa New Zealand to gain experience in a variety of acute and non-acute mental health settings and services.
Standard 5	K The College has been a leader in developing workplace-based assessment methods that progressively test trainees' knowledge and skills in the context of practice.
	L The notable commitment of fellows and staff in developing and implementing the Alternate Assessment Pathway to enable progression of trainees to fellowship.
	M The InTrain system provides sophisticated functionality to support the early identification and support of trainees not meeting the outcomes of the training program.
Standard 6	N The commitment to a robust monitoring and evaluation approach to implement a process of co-design and co-production with stakeholders.
	O The annual Trainee Exit Survey that provides clear guidance on areas of strength and improvement from a new fellow perspective.
Standard 7	P The Indigenous Financial Support Initiatives to support the retention of Aboriginal and/or Torres Strait Islander and Māori trainees.
	Q The appointment of the Trainee Trajectory Coordinator is an excellent way for trainees to receive support directly from the College.

Standard	Commendations
Standard 8	R The dedication of supervisors, Directors of Training and Directors of Advanced Training to the supervision, support, and education of trainees and their vital roles in delivery of the training program.
	S The well-developed and functional systems to recruit and reaccredit supervisors and assessors with relevant induction, training and peer support processes.
	T The flexibility and innovation of the accreditation standards and procedures, supporting the accreditation of the new training zone for the Western Australian rural pathway.
	U The inclusion of trainee representatives on accreditation panels.
Standard 9	V The peer review program is well structured, defined and supported, with extremely high participation rates across the fellowship.
	W The wide-ranging activities of the CPD program aligned to the CanMEDS framework and role, creating clear connection to the specialist training program.
Standard 10	X The work underway to develop of onboarding and support resources for SIMGs as part of the Rural Psychiatry Roadmap 2021 – 2031.

Conditions

Standard	Condition	To be met by
Standard 1	1. Undertake and complete the planned external review of governance structures, decision-making and management of conflicts of interests and confidentiality, with relevant consultation, benchmarking mechanisms, implementation, and evaluation. (Standard 1.1)	2025 Review and evaluation by 2023 Implementation by 2024 Evaluation of changes by 2025
	2. To ensure appropriate College governance and transparency, and improve the confidence of the broader group of trainees and their perceptions of the college: <ul style="list-style-type: none"> (i) Identify methods to systematically monitor consistent application of College policies in branch and national committees and training committees in Australia and Aotearoa New Zealand, respectively. (Standards 1.1 and 6.1) (ii) Review and implement changes to address barriers created by the Deed of Undertaking to ensure a balance between effective governance and confidentiality protection, and engagement of and communication with trainees. (Standards 1.1 and 7.2) (iii) Implement the Binational Trainee Committee and Trainee Advisory Committee with regular evaluation mechanisms to ensure effectiveness of the new governance structure.(Standard 1.1.3) (iv) Ensure regular processes for revising and centrally monitoring conflicts of interest to manage actual or perceived bias in decision-making. (Standard 1.1.6) 	2025 Scoping and development of actions for i, ii and iv by 2023 Implementation of iii by 2023 Evaluation of iii by 2024 Implementation by 2024 Evaluation of changes by 2025
	3. Finalise, publish, and implement the revised review, reconsideration and appeals policy with monitoring to ensure that processes are clear and that criteria underpinning decisions are transparent. (Standard 1.3)	2023
	4. Develop and implement a resourcing strategy to demonstrate resources for sustainable delivery of 'best practice' education and training functions and programs, with consideration of the expertise of medical educators, and Aboriginal and/or Torres Strait Islander and Māori culture and health experiences. (Standards 1.4 and 1.5.1)	2024 Scoping and development by 2023 Implementation by 2024
	5. Develop and implement a program of systematic collaboration with relevant internal and external stakeholder groups on: <ul style="list-style-type: none"> (i) Key issues relating to the College's purpose, education and training functions. (ii) An enhanced leadership role in workforce planning for the specialty to meet the needs of communities in Australia and Aotearoa New Zealand. (Standards 1.4 and 1.6.4) 	2025 Scoping and development by 2024 Implementation by 2025
	6. Develop and implement systematic processes to strengthen the voice of community participation in the co-design of training and education programs and in all levels of governance. (Standards 1.1 and 1.6.4)	2025 Development and consultation by 2024 Implementation by 2025

	<p>7. Demonstrate commitment to Aboriginal and Torres Strait Islander and Māori expertise, leadership, health, and culturally safe practice by:</p> <ul style="list-style-type: none"> (i) Involving the Aboriginal and Torres Strait Islander Mental Health Committee and relevant community stakeholders in the development and implementation of the Innovate Reconciliation Action Plan. (Standards 1.1 and 16.4) (ii) Establishing relationships with Te Whatu Ora (Health New Zealand) and Te Aka Whai Ora (Māori Health Authority) to address workforce needs and health equity for Māori and the broader community in Aotearoa New Zealand. (Standard 1.6.4) (iii) Embedding cultural safety training for all fellows, trainees, specialist international medical graduates and College staff. (Standard 1.7) 	<p>2025 Scoping, development and consultation by 2024 Implementation by 2025</p>
	<p>8. Develop and implement mechanisms to ensure systematic and continuous review of:</p> <ul style="list-style-type: none"> (i) Education and training functions, based on evidence, to meet evolving practice and need, with benchmarking against peer organisations in the sector (ii) College structures and functions, regulations, policies, and guidelines, with regular evaluation mechanisms for quality assurance and improvement. (Standard 1.7). 	<p>2025 Scoping, development and consultation by 2024 Implementation by 2025</p>
Standard 2	<p>9. Explicitly define the College's commitment to Aboriginal and/or Torres Strait Islander peoples and Māori health outcomes and perspectives, and community responsibilities in its educational purpose and within key College documents. (Standard 2.1)</p>	<p>2024 Development and consultation by 2023 Implementation by 2024</p>
	<p>10. Ensure program and graduate outcomes acknowledge and address equity in healthcare for Aboriginal and/or Torres Strait peoples and Māori. (Standards 2.2 and 2.3)</p>	<p>2024 2023 development and consultation 2024 implementation</p>
	<p>11. Expand the College's educational purpose, program outcomes and graduate outcomes to reflect community need for non- acute mental health services across a range of settings. (Standards 2.1, 2.2 and 2.3)</p>	<p>2025 Development and consultation by 2024 Implementation and communication by 2025</p>
	<p>12. Ensure that the needs of Aboriginal and Torres Strait Islander and Māori communities for cultural safety are addressed by:</p> <ul style="list-style-type: none"> (i) Implementing the Takarangi framework across the training, CPD and SIMG assessment programs. (ii) Developing and implementing actions in the Innovate Reconciliation Action Plan that relate to training, CPD and SIMG assessment programs. (Standards 2.1.2, 2.2 and 2.3) 	<p>2024 Scoping and development by 2023 Communication and implementation by 2024</p>

Standard 3	13. Develop and implement an overarching curriculum framework and enhanced mapping aligned with program and graduate outcomes, syllabi, and assessment for all stages of training. This work should include implementation timelines and coordinated with: (i) Completing the planned review of the syllabus in Stage 1 and 2 of training. (ii) Establishing a clear syllabus and curriculum map for Stage 3 of training. (Standards 3.1 and 3.2)	2026 Scoping and development by 2024 Communication by 2025 Implementation by 2026
	14. Review and implement enhanced curriculum content, including explicit learning outcomes and relevant minimum clinical experience to ensure all graduates have capabilities in: (i) Psychotherapy and high prevalence disorders to prepare graduates for non-acute presentations. (ii) Neuroscience, addictions, trauma-informed care, and intellectual disability. (iii) Leadership and working in multidisciplinary teams to prepare for roles in both public and private practice and community settings. (iv) Delivering high quality, patient centred mental health care with understanding of health inequities and systemic barriers in Australia and Aotearoa New Zealand. (Standards 3.2.3, 3.2.4, 3.2.5, 3.2.6 and 3.3.2)	2026 Scoping and development by 2024 Communication by 2025 Implementation by 2026
	15. Develop and implement explicit learning outcomes for trainees to develop culturally safe practice in Australia and Aotearoa New Zealand supported by and mapped to specific learning resources and assessments. (Standards 3.2.9 and 3.2.10)	2026 Completion by 2023 –2024 Communication by 2025 Implementation by 2026
	16. Develop and implement mechanisms to centrally monitor the application of the College’s “break in training” and part-time policies at local training sites. (Standard 3.4.3)	2024 Development and consultation by 2023 Implementation by 2024
Standard 4	17. Develop, implement, and monitor increased opportunities in non-acute settings and longitudinal care to facilitate the expansion of skills of trainees to manage high prevalence, low acuity disorders. (Standards 4.2.1 and 3.2)	2025
	18. Evaluate the utility of Formal Education Courses, addressing their purpose as a valid educational tool, and develop and implement measures to address variations in content, course fees and equity of access for all trainees. The evaluation should involve relevant stakeholder consultation from the onset and transparent reporting of outcomes. Developmental measures should include contemporary modes of delivery to align with trainee’s clinical placements. (Standard 4.2.2)	2024 Evaluation by 2023 Implementation by 2024
	19. Curate a central set of educational materials and activities and roadmap to support consistent delivery of teaching and learning, aligned with program and graduate outcomes, and assessments. (Standard 4.2.2)	2025

	20. Develop and implement central College monitoring of trainee development of independence, with clear articulation of service expectations, required skills and responsibility for Stage 1 trainees. (Standard 4.2.4)	2025 Development by 2023 Consultation by 2024 Implementation by 2025
Standard 5	21. Develop, implement, and monitor the outcomes of the Assessment Framework review with evidence of: (i) Improved alignment of assessment methods to program and graduate outcomes. (ii) Effective engagement with relevant stakeholders, including those with lived experience, in development and implementation plans. (iii) Embedding of culturally safe and inclusive practice, and feedback from those with lived experience, in the program of assessment. (iv) Effective monitoring of the workload of supervisors and Directors of Training to ensure wellbeing is looked after with appropriate support and training. (Standards 5.1, 1.6.4, 6.1, and 8.1.3)	2025 Development by 2023 Implementation by 2024 Monitoring and evaluation by 2025
	22. Provide evidence of the application of valid project/program management and change management methods to ensure appropriate sequencing of work, accountability for delivery, timely implementation, and effective communication of actions and rationale related to the Assessment Framework. This should be part of an overarching plan that includes other planned reviews and the integration of these with each other and the program of assessment. (Standard 5.1)	2024 Development by 2023 Implementation by 2024
	23. Systematically review the breadth of assessment methods with a view to reducing the burden of assessment on trainees and their supervisors. This includes an evaluation to determine reasons for the high prevalence of breaks in training undertaken in order to complete summative assessments, so that there is improved alignment of assessment requirements and program duration. (Standards 5.1 and 5.2)	2024 Development by 2023 Implementation by 2024
	24. Develop and implement systems to monitor and ensure calibration of workplace-based assessment practices and assessors across different training sites and posts. (Standards 5.2, 5.4.2 and 8.1.3)	2025 Development by 2024 Implementation by 2025
	25. Monitor and evaluate the Clinical Competency Assessment as an appropriate replacement for the Objective Structured Clinical Examination. (Standard 5.2)	2024 Evaluation by 2023 Implementation by 2024
	26. Review and benchmark the content and role of the Clinical Essay Question and Modified Essay Question examinations to ensure utility and fitness for purpose, including relevance of each to contemporary practice. (Standard 5.2)	2025 Review and development by 2023 Implementation and communication by 2024 Operational by 2025
	27. Develop and implement the outcomes of the review of Entrustable Professional Activities (EPAs) with evidence of:	2025 Review by 2023

	<ul style="list-style-type: none"> (i) Opportunities to reduce the number of EPAs to focus on high-quality, high relevance activities. (ii) Engaging Aboriginal and Torres Strait Islander and Māori expertise within the College to lead development in assessing culturally safe practice and care. (iii) Engaging the expertise of consumer and community stakeholders with lived experience in development of the EPAs. (Standard 5.2) 	Implementation by 2024 Operational by 2025
	<p>28. Develop and implement outcomes arising from the 2020 ACER Review recommendations in summative assessments to:</p> <ul style="list-style-type: none"> (i) Ensure robust blueprinting, standard setting, and calibration for all College assessments. (Standards 5.2.2 and 5.4) (ii) Enhance the quality and timeliness of individualised feedback to both pass and fail candidates. (Standard 5.3) (iii) Ensure special considerations are applicable to all aspects of assessment and examinations, including for emergency situations. (Standard 5.1.3) 	2025 Development and communication by 2024 Implementation by 2025
	<p>29. Respond to the 2020 ACER RANZCP Examination Review by reporting on the rationale for implementation or non- implementation of all recommendations to the College Board. (Standards 5.2 and 5.4)</p>	2024
Standard 6	<p>30. Finalise the monitoring and evaluation framework with a timely implementation plan, key performance indicators, demonstration of diverse stakeholder engagement in co- design and mechanisms to capture qualitative data. (Standard 6.1)</p>	2024 Development by 2023 Implementation by 2024
	<p>31. Implement regular and safe processes for trainees in smaller centres, specialist international medical graduates, Aboriginal and/or Torres Strait Islander peoples and Māori, employers and consumers to provide feedback on program delivery, development and program and graduate outcomes. (Standards 6.1.3 and 6.2.3)</p>	2024 Development by 2023 Implementation by 2024
	<p>32. Include lived experience content and influence on outcomes and actions taken in monitoring and evaluation reports. (Standard 6.3)</p>	2024 Development by 2023 Implementation by 2024
Standard 7	<p>33. Enhance existing selection into training policy and procedures by:</p> <ul style="list-style-type: none"> (i) Developing and implementing centralised mechanisms to ensure the validity, reliability, feasibility and consistent application of selection policies and criteria. There should be general uniformity of weighting and criterion across jurisdictions, and Branch and National Training Committees should clearly indicate weighting for each criterion. (ii) Making selection criteria with weighting for each criterion publicly available. (iii) Developing and implementing a centralised and publicly available selection policy related to Aboriginal and Torres Strait Islander and Māori equity and the needs of rural communities, mapped to roles of specialist practice and community needs. (Standard 7.1) 	2024 Development and consultation by 2023 Communication and implementation by 2024

	34. Develop and implement a strategy to enhance recruitment, selection, and retention of Aboriginal and/or Torres Strait Islander and Māori trainees, with appropriate cultural supports to enhance retention. This should include consultation and collaboration with relevant stakeholders. (Standard 7.1.3)	2024 Development and consultation by 2023 Communication and implementation by 2024
	35. Develop and implement, in consultation with trainees: (i) A centralised, long-term strategy to improve communication methods, with relevant evaluation to ensure continuous improvement. (ii) A policy and roadmap on timelines for the notification of changes to training program requirements. (Standard 7.3)	2024 Development by 2023 Implementation by 2024
	36. Enhance the culture of the College, guided by College leadership, that manifests genuine attention, transparency, and responsiveness to trainee concerns by: (i) Acknowledging and promoting the value of trainee contributions to the training program and the College.(Standard 7.2) (ii) Demonstrating central College support for those experiencing personal/and or professional difficulties.(Standard 7.4)	2025 Development by 2023 –2024 Implementation by 2025
	37. Develop and implement a centralised pathway to document and monitor allegations of discrimination, bullying and harassment with procedures to provide support to trainees. This should be developed in consultation with relevant stakeholders. (Standard 7.4.1)	2024 Development by 2023 Communication and implementation by 2024
	38. Review existing pathways for trainees to confidentially and safely raise issues and resolve training disputes, without fear of jeopardising their position in the training program, and implement changes to ensure the pathways are safe, accessible and centrally monitored. (Standard 7.5)	2024 Development by 2023 Communication and implementation by 2024
Standard 8	39. Develop, implement and evaluate centralised processes to: (i) Formally elicit and monitor feedback on performance of individual supervisors, Directors of Training and Directors of Advanced Training to identify areas for improvement and of underperformance, with appropriate feedback, intervention and support pathways. (ii) Ensure safe and confidential pathways for trainees to provide feedback on their individual supervisors, developed with trainee input. (Standard 8.1.4)	2025 Development, consultation and communication by 2023– 2024 Implementation by 2025
	40. Develop, implement, and centrally monitor mechanisms to address the tension for supervisors of undertaking both supervisory and assessment roles in the workplace. The approach should develop and implement mechanisms for calibration of supervisors across jurisdictions, managing conflicts of interest, training, and supervisor workloads and support. (Standards 8.1.1 and 8.2.1)	2026 Development and consultation by 2024 –2025 Implementation by 2026

	41. Address, in the Removal of Accreditation Policy and associated processes, the requirement that the Medical Council of New Zealand is informed about intention to limit or withdraw accreditation from training posts or programs. (Standard 8.2.1)	2023
	42. In the accreditation standards for training posts and programs: (i) (i) Include a requirement that a commitment to Aboriginal and/or Torres Strait Islander and Māori health and cultural safety be evident, to support a high-quality learning environment aligned to relevant learning outcomes, and to safeguard trainee wellbeing. (ii) (ii) Develop and implement mechanisms for remote supervision and other mechanisms to support training in rural and remote locations under the Rural and Remote Psychiatry Roadmap 2021 – 2031. (Standard 8.2.2)	2025 Development by 2023 Consultation and communication by 2024 Implementation by 2025
Standard 9	43. Develop and implement enhanced CPD requirements for culturally safe practice and addressing health inequities by partnering with Aboriginal and/or Torres Strait Islander and Māori communities and consumers groups on clear mandatory CPD requirements and resources to support participants to achieve requirements in Australia and Aotearoa New Zealand. (Standards 9.1.3 and 1.6.4)	2025 Development by 2023 Communication by 2024 Implementation by 2025
Standard 10	44. Provide outcomes and evidence of planned changes arising from the Comparability Assessment Framework Review to enhance and address the fitness for purpose of the SIMG assessment process in Australia and Aotearoa New Zealand, by: (i) Working with jurisdictions and health services to reduce variability in support for SIMGs, including consideration of establishing SIMG Directors of Training in all jurisdictions. (Standards 10.2, 1.6.4 and 8.1) (ii) Mandating requirements for SIMGS to develop and demonstrate their ability to provide culturally safe care. (Standard 10.2) (iii) Developing and implementing increased recognition of CPD and previous professional experience within the SIMG assessment process, to reduce reliance on demonstration of validity of specialist training qualification based on country of training. Consideration should be given to recognition of time in practice since completing primary specialist training. (Standards 10.2 and 9.1)	2025 Review by 2023 Consultation, development and communication by 2024 Implementation by 2025
	45. Develop, implement, and monitor mechanisms to address the relatively low examination and other assessment pass rates for SIMGs. (Standards 10.2 and 5.4)	2025 Development by 2024 Implementation by 2025
	46. Clarify requirements for attaining fellowship, including identifying any barriers to fellowship, for SIMGs in Aotearoa New Zealand to address equity of rights and opportunities that come with achieving fellowship. Ensure that there is clear communication with SIMGs and their supervisors on the differences between vocational assessment for MCNZ registration and the fellowship pathway. (Standard 10.4.1)	2024 Scoping and development by 2023 Communication and implementation by 2024

Recommendations

Standard	Recommendations
Standard 1	<p>A Consider, in relation to College objectives and the review of the governance structure:</p> <p>A</p> <ul style="list-style-type: none"> i. A skills-based Board, with positions for members with experience in corporate governance, members who are Aboriginal and/or Torres Strait Islander and Māori, and with lived experience. ii. Direct reporting of the Aboriginal and Torres Strait Islander Mental Health Committee, Te Kaunihera mo ngā kaupapa Hauora Hinengaro Māori, and the Community Collaboration Committee to the Board, to reflect the College's commitment to and importance of these stakeholders. iii. Appointment of an Aboriginal and/or Torres Strait Islander person as chair of the Aboriginal and Torres Strait Islander Mental Health Committee. iv. Trainee committees at branch level in Australia and national level in Aotearoa New Zealand national to facilitate wider trainee liaison and feedback to the Binational Committee for Trainees and enhance college engagement of and communication with its trainees. v. Improving trainee engagement at Board level by increasing the term of the Trainee Director to parity with other Directors. vi. Streamlining of the number of committees, with separation of governance and operational responsibilities for education and training. (Standard 1.1 and 1.2) <p>B Review remuneration practices for consumer involvement to align with health sector expectations. (Standard 1.1 and 1.6.4)</p> <p>B</p> <p>C Consider, in relation to the resourcing strategy, the inclusion of expertise for medical educators, and Aboriginal and/or Torres Strait Islander and Māori culture and health in senior staff positions. (Standard 1.5.1)</p> <p>C</p>
Standard 2	Nil.
Standard 3	<p>DD Structure and consolidate information about the training program and curriculum in documentation and on the College website to improve accessibility and understanding for trainees, supervisors, and other stakeholders. (Standard 3.1)</p> <p>EE Update the use the terms “cultural safety” and “cultural competence” in the curriculum and other College documents to reflect current practice. (Standard 3.2.9)</p>
Standard 4	<p>FF Identify ways the InTrain system may improve the College's ability to monitor the delivery of training program requirements centrally and systematically. (Standard 4.1 and 4.2)</p> <p>GG Recognise the contributions of local educators to the development and delivery of regional or localised education resources. (Standard 4.2.2)</p>
Standard 5	Nil.

Standard	Recommendations
Standard 6	Nil.
Standard 7	HH Communicate an immediate timeframe of delivery of the pro-rata fee payment system to trainees. (Standard 7.3)
Standard 8	II Investigate and enhance the functionality of InTrain to facilitate and monitor accreditation processes and outcomes. (Standard 8.2)
Standard 9	JJ Consider formalising a strategy to achieve increased reflection and reflective activities of higher educational quality within the CPD program. (Standard 9.1.6)
Standard 10	KK Explore opportunities to formalise the status of all SIMGs and increase their involvement in College governance and activities. (Standard 10.1 and 1.1)
	LL Utilise existing electronic systems so that SIMGs can document more easily their progress in meeting assessment requirements, and to support timely monitoring by the central College and communication with individual SIMGs on their progress. (Standard 10.2 and 10.4)