

National Framework for Prevocational (PGY1 & PGY2) Medical Training: Entrustable Professional Activities - FAQs for Prevocational Doctors

Currently the national Prevocational Framework, introduced in 2024, is focused on PGY1/2 doctors who have graduated from an Australian university. From 2026, the Framework will include mandatory Entrustable Professional Activities. At this stage IMGs are not required to have EPA assessments – however, individual health services may require IMGs to participate in EPAs.

From 2026 the assessment requirements for prevocational doctors will change to include Entrustable Professional Activities (EPAs). This is in addition to completing mid and end of term assessments in each term. In preparation for the mandated introduction of EPAs in 2026, EPAs will be implemented across the sites in 2025. This will allow everyone to become familiar with the EPA format and process before it is mandatory.

What is an Entrustable Professional Activity (EPA)?

An EPA describes the work regularly undertaken by prevocational doctors in their day-to-day clinical practice. The performance of an EPA can be assessed. The person undertaking the assessment makes a judgement about how safely the prevocational doctor can perform the activity i.e. their level of entrustability.

Why have EPAs been introduced for prevocational doctors?

EPAs have been introduced as part of the National Framework for Prevocational Medical Training and are intended to provide prevocational doctors with increased opportunities for direct observation of their clinical work and the provision of valuable feedback.

What are the EPAs within the National Framework for Prevocational Medical Training?

There are 4 EPAs – these cover the most important tasks undertaken by prevocational doctors:

1. EPA1 - Clinical Assessment
2. EPA2 – Recognition and care of the acutely unwell patient
3. EPA3 – Prescribing
4. EPA4 – Team communication, documentation, handover and referral

Each year the prevocational doctor must complete a minimum of 10 EPAs.

How is a prevocational doctor assessed on an EPA?

The assessment is an activity-based discussion between the prevocational doctor and the EPA assessor that occurs as part of the routine clinical work that you complete every day. The assessment is not a Pass or Fail assessment but is a judgement about entrustability.

Who can assess performance of EPAs?

At least one EPA in each term must be assessed by a term supervisor, specialist or equivalent. Additional EPAs can be assessed by specialists, registrars, nurses, allied health and pharmacists.

How does the assessment of an EPA work?

The prevocational doctor performs a work task. For example, for EPA1 the prevocational doctor might present a clinical summary and management plan. The EPA assessor observes all or part of this task. The prevocational doctor and the assessor then discuss the performance of the task, and the assessor signs off on the assessment form. The assessment form will be documented in the prevocational doctor's Clinical Learning Australia (CLA) ePortfolio record of learning.

How many EPAs does a prevocational doctor need to complete?

A minimum of 10 EPAs need to be completed each year by PGY1 and PGY2 doctors. The EPAs, and the required number of EPAs, are the same for PGY1 and PGY2 doctors.

Over the year the prevocational doctor must complete 4 assessments of EPA1 (one each term), and 2 assessments of EPAs 2, 3 & 4. A minimum of 2 EPAs are completed in each term.

Will the assessment of EPAs be time consuming?

The clinical tasks within the EPAs will already be occurring during the routine work that the prevocational doctor will be undertaking. The additional time taken to discuss the performance of the EPA is expected to be around 10 minutes.

How does the assessment of EPAs affect the overall end of year judgement of a prevocational doctor's performance?

At each site there is a THS Assessment Review Panel that makes a judgement on whether a prevocational doctor has met all the Prevocational Outcome Statements at the required standard to progress to the next stage of training. EPAs are just one piece of information, along with term assessments and other learning activities that help to inform this judgement. There is no requirement to 'pass' a minimum number of EPAs.

More information about EPAs?

The AMC website provides a comprehensive overview of EPAs and the forms used for EPAs:

<https://www.amc.org.au/wp-content/uploads/2022/07/Section-2B-Entrustable-professional-activities-1.pdf>

This 5 minute video produced by the AMC is specifically aimed at providing essential information about EPAs to prevocational doctors:

<https://vimeo.com/838904496>

This guide is intended to be read once you are familiar with the National Framework for Prevocational Medical Training. You may find the following AMC resources useful:

A brief summary of the Framework:

<https://www.amc.org.au/wp-content/uploads/2023/08/Flyer-Guide-for-PGY1-and-PGY2-doctors.pdf>

A comprehensive overview of the Framework:

<https://www.amc.org.au/accredited-organisations/prevocational-training/new-national-framework-for-prevocational-pgy1-and-pgy2-medical-training-2024/>