



College of Intensive Care Medicine
of Australia and New Zealand
ABN: 16 134 292 103

Document type: Training
Date established: 2002
Date last reviewed: 2014

INTENSIVE CARE SERVICES FOR AREAS OF NEED

This document outlines the process developed by the College of Intensive Care Medicine (CICM) for Area of Need (AON). AON is a term that applies to a medical position and not a geographical area. The position can be located within a public health service (e.g. a public hospital) or a private service deliverer where local, state and/or national advertising has failed to attract a locally registered medical practitioner. Additionally it must be demonstrated that the delivery of health services is adversely affected by the vacancy.

1. INTRODUCTION

1.1 General

CICM works with employers, health authorities and Medical Boards to establish whether a particular post should be designated as AON. In addition, the College provides advice on the appropriateness of the post to provide intensive care services, assesses the suitability of applicants to the post, and facilitates the provision of intensive care services to the population served by the AON post. The AON process supports the principles presented by the [Australian Medical Council \(AMC\)](#).

AON should not be seen as an alternative pathway to specialist recognition. If the AON appointee is an overseas trained specialist, this document should be read in conjunction with the Assessment of Overseas Trained Intensive Care Specialists document.

1.2 Objectives

The objectives of the AON process are:

- 1.2.1 To work with employers to maximise the attractiveness of the post to Australian intensive care specialists.
- 1.2.2 To confirm that an AON post meets minimum standards to deliver safe intensive care services.
- 1.2.3 To facilitate the provision of suitably trained intensive care specialists to work in identified AON positions.
- 1.2.4 To assess the standard and suitability of an applicant for the job description of the specific AON post.
- 1.2.5 To fast track appointments in AON posts in intensive care medicine.
- 1.2.6 To follow through to assessment for specialist recognition those applicants who are OTS.

2. AREA OF NEED POST

2.1 Establishment of a post

The establishment of a post in intensive care medicine for AON status is a workforce issue and should be addressed by relevant health authorities, such as the AMC, [Medical Board of Australia \(MBA\)](#), the local communities and the College. An AON post is intended to meet identified intensive care service needs for which no Australian intensive care specialist can be appointed, and as such is generally intended as a limited-term provision. Employers who have difficulty filling a post should review their management strategies to address:

- 2.1.1 Minimum standards for the delivery of safe intensive care services as defined in relevant CICM documents.
- 2.1.2 Salary packages that appropriately remunerate for the intensive care services required having regard to the location of the post.
- 2.1.3 Working hours that do not compromise patient safety because of fatigue.
- 2.1.4 Adequate leave and provision of locum services.
- 2.1.5 Opportunities for appointees to undertake continuing professional development.
- 2.1.6 Requirements for oversight and where appropriate, direct supervision.
- 2.1.7 Other human resource issues such as accommodation and work environment.

2.2 Employer responsibilities

The employer of a declared AON post is required to provide:

- 2.2.1 A detailed job description of the post together with key selection criteria.
- 2.2.2 A brief description of how it can provide oversight and direct supervision, and support for continuing education and maintenance of professional standards. The College is willing to assist in meeting these requirements.
- 2.2.3 A statement affirming it has addressed all the issues noted in 2.1.
- 2.2.4 Compliance with current AMC and MBA procedures and requirements.

2.3 AON Criteria

CICM use the following criteria to determine AON status:

- 2.3.1 Minimum standards for safe intensive care services as outlined in Policy Document IC-1 Minimum Standards for Intensive Care Units are met.
- 2.3.2 The post has been impossible to fill despite nationwide advertising and attention to the conditions of service outlined in 2.1.
- 2.3.3 The expected patient load and anticipated outcomes are such that an intensive care facility is more appropriate than transferring critically ill patients to another centre.

- 2.3.4 Oversight, and where appropriate, direct supervision arrangements are available or can be organised.
- 2.3.5 The College will not recognise an AON post as being suitable to provide intensive care services if the criteria for support in 2.1 cannot be met.

3. ASSESSMENT OF AON APPLICANTS

Employers and local health authorities will seek registration from the relevant State Health Authority to have the position declared as an AON prior to the commencement of the assessment process. The AON assessment is distinct from the OTS assessment process and although preferred, an interview is not mandatory. An applicant to an AON post who is considered to be an OTS is eligible to be separately assessed for specialist recognition under the OTS assessment process.

3.1 Assessment Process

The Assessment Process is a fast-track paper-based assessment that applies to overseas-trained doctors with temporary or permanent resident visas. An early decision will be made following receipt of all relevant documentation. The AON assessment will match the applicant's qualities with the requirements of the post as given by the job description and key selection criteria. Consideration will be given to the expected complexity of intensive care problems and the probability of having to work independently.

The AON assessment will be conducted by the Censor, the Deputy Censor and the relevant Regional Committee Chair using the following criteria:

- 3.1.1 A specialist degree and practice as a specialist in intensive care in another country. There should be certified documentation of medical registration as a specialist in intensive care medicine in another country (if the specialty is recognised). Consideration is given to the curriculum vitae, references and any other documents that portray the candidate's previous practice as an intensive care specialist. Documentation must satisfy the requirements of the AMC and may be required to undergo [Primary Source Verification \(PSV\)](#).
- 3.1.2 Training in intensive care is equivalent with CICM training in its duration, structure and content, assessments and supervision.
- 3.1.3 Experience as a specialist in terms of management of patients with adequate case mix and severity of illness, use of equipment and procedures, and compliance with standards of good intensive care practice as promoted in CICM policy documents.
- 3.1.4 Participation in continuing education and quality assurance activities. A continuous involvement in recent years is important.

4. OUTCOME OF THE ASSESSMENT

The College will recommend to the relevant health authority one or more of the following outcomes:

- 4.1 The applicant is suitable for the appointment to practise in intensive care medicine without direct supervision. The applicant may be appointed if the post is able to provide for the following conditions:

- a) Oversight must be provided by an intensive care specialist appointed as an advisor by the College for the first six months in the post. The advisor and the appointee are required to maintain regular contact. If the applicant is pursuing Fellowship of the College via the OTS pathway, this time may be accredited. The aim of oversight is to provide advice and support and these will be made available to the College and relevant Medical Board.
 - b) An on-site visit of the appointee's practice by an intensive care specialist nominated by the College after two months in the post is required (this may be done by the specialist providing oversight if appropriate). The aims of the visit are to review the appointee's performance in the post and to provide advice and support. If applicable, the employer will be responsible for all costs associated with the visit, refer to the College fee page for further information. The College may forward the report of the visit to the employer or relevant health authority if required.
 - c) The appointee must proceed to OTS specialist assessment after six months in the post.
- 4.2 The applicant is suitable for appointment to practise in intensive care medicine but only under supervision. He/she is ineligible to proceed to OTS specialist assessment. The applicant may be appointed if the post is able to provide on-going oversight by an intensive care specialist who is available within the hospital or within 30 minutes travelling time. The purpose of oversight is to provide advice, support and direct supervision. The supervisor will submit reports to the College if required.
- 4.3 The applicant is not suitable for appointment to practise in intensive care medicine. The College will recommend to the employer and the relevant health authority that the applicant is unsuitable for appointment because of inadequate training and experience for that specific post.

5. PROMOTION OF RURAL INTENSIVE CARE SERVICES

The College supports all measures to encourage intensive care specialists to seek to work in rural areas.

*Last reviewed by JFICM: October 2002
 Republished by CICM: 2010
 Revised by CICM: July 2014*

This professional document has been prepared with regard to general circumstances, and it is the responsibility of the practitioner to have regard to the particular circumstances of each case, and the application of this document in each case. Professional documents are reviewed from time to time, and it is the responsibility of the practitioner to ensure the current version has been obtained. Policy Documents have been prepared according to the information available at the time of their preparation, and the practitioner should therefore have regard to any information, research or material which may have been published or become available subsequently.

Whilst the College endeavours to ensure that documents are as current as possible at the time of their preparation, it takes no responsibility for matters arising from changed circumstances or information or material which may have become available subsequently.

www.cicm.org.au

© This document is copyright and cannot be reproduced in whole or in part without prior permission.