



OBJECTIVES

This Policy details how the Melbourne Medical School in the Faculty of Medicine, Dentistry and Health Sciences allocates students to a clinical school zone (Metropolitan and Rural) at the point of offer into the course, and then to a primary clinical school within their clinical school zone (Metropolitan and Rural) for MD2 onwards. This policy also outlines the management of any appeals by students against this MD2 clinical school allocation.

PRINCIPLES

Equity

- Students' preferences for clinical schools will be considered.
- The zone and clinical school allocation processes will strive for a balance of students by gender, entry and fee category.
- There will be an independent and transparent appeals process for allocation to clinical schools within clinical zones for MD2 onwards. No appeals will be considered for clinical school zone allocation at the point of offer into the course.
- Melbourne Medical School is committed to rural medical workforce development.

Clinical School Zones

Students are allocated to clinical school zones at the time they are offered a place in the Doctor of Medicine (MD) course. If a student accepts a place in the Melbourne MD they also accept the allocation to a specific clinical school zone. These zones are:

- Metropolitan – Austin Hospital, Epworth Hospital, Northern Hospital, Royal Melbourne Hospital, St Vincent's Hospital and Western Hospital clinical schools.
- Rural – Rural Clinical School with nodes at Goulburn Valley Health Shepparton, Ballarat Health Services, Bendigo Health and Northeast Health Wangaratta.

Students who accept a place via the Rural Pathway are allocated the Rural Zone. The Faculty's contractual obligations to the Commonwealth Government preclude international and New Zealand students being offered places in the rural zone.

Appeals against clinical school zone allocation will not be permitted.

Clinical School Zone allocation process

- International applicants will be automatically allocated to the metropolitan zone due to the contractual obligations mentioned above.
- Prior to the Multi Mini Interviews, all domestic applicants will be provided information about the zones.
- Domestic applicants will be asked to submit a preference list for the zones.
- A random number will be assigned to all successful domestic applicants and the list will be sorted by the random number in ascending order.



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- Working down the list, allocations to the Rural Zone will be made to successful applicants who have listed the rural zone as their first preference until the Rural Zone capacity is met.
- In order to meet targets set by the Australian Government, from the 2019 intake onwards, if the rural zone capacity has not been met by first preference allocations, applicants who received preferential entry on the basis of their rural background, will then be allocated to the Rural Zone continuing down the list in ascending order until capacity is met.
- For all remaining unallocated successful applicants, allocations will be made in ascending order, with the applicant with the lowest random number awarded their first preference. This process will be continued until each clinical school zone capacity is met. Successful applicants who have a rural background but who did not receive preferential entry on the basis of their rural background and did not list the Rural Zone as their first preference, will be subject to this random allocation process.
 - Successful applicants will be informed of their allocated zone with their letter of offer.
 - Appeals against clinical school zone allocation will not be permitted. Acceptance of a place in the Doctor of Medicine is acceptance of the allocated zone.

Clinical School allocation process

- When accepting their offer, students will be provided with information about the clinical schools in their allocated clinical zone.
- Students will be asked to provide a preference list for the clinical schools in their clinical school zone after accepting their place in the course.
- Allocations will be made using an automated random, preference based, allocation system.
- Students will be informed of their clinical school allocation by the end of the first week of the course.

Clinical School allocation appeal process

- Students may appeal against their MD1-MD2 clinical school allocation in writing within ten working days of the allocation notification.
- Students in MD2-4 may appeal against their clinical school allocation under exceptional and unforeseen circumstances only. These appeals will be considered twice per year, at the end of semester 1 and again at the end of semester 2.
- Late appeals will not be considered.
- Appeals should be addressed and submitted to:
Clinical School Allocation Appeals Committee
Email: md-enquiries@unimelb.edu.au
- The Appeals Committee comprises the Head, Department of Medical Education (Chair), the Academic Programs Manager in the Department of Medical Education (or nominee) and two clinical school representatives (one from a metropolitan clinical school and one from the rural clinical school).
- An acknowledgement of receipt of the appeal will be sent to the student within three working days of its receipt.
- The student will be notified in writing of the outcome of the appeal within fifteen working days of the meeting of the committee.



- Appeals should comprise a one page cover letter outlining the reasons for the appeal, with supporting documentation attached. Appeals will not be considered without supporting documentation. Supporting documentation must be recent and up-to-date and may include, but is not limited to, letters from health care practitioners, documentation that verifies carer responsibilities and statutory declarations.
- Verbal appeals will not be considered.
- Appeals against clinical school zone allocation will not be permitted.
- If a student does not believe that the appeal has been adequately considered, they may follow the formal grievance procedures outlined in the University Policy Library:
 - Student complaints and grievances policy: <https://policy.unimelb.edu.au/MPF1066>

GUIDELINES FOR CONSIDERATION OF EXCEPTIONAL CIRCUMSTANCES

Appeals will only be considered in exceptional and unforeseen circumstances.

POSITIVE RURAL INTENT

Should a domestic student who accepted a place in a non-rural zone decide during the course that their educational and career needs would be better met by transferring to the Rural Clinical School, they may apply to the Clinical School Allocation Appeals Committee. Each case will be considered in consultation with the Rural Clinical School on grounds of merit and placement capacity.

NOTE: Students in the ERC program are required to undertake their clinical education in hospitals and community-based practices within the Northern Victoria Regional Medical Education Network. Students enrolled in the Extended Rural Cohort (ERC) program of the MD course must fulfill the rural commitment under which they enrolled. Appeals to transfer to a metropolitan clinical school will only be considered if the student has first been approved to withdraw from the ERC program (only considered in extreme cases).

Non-acceptable reasons for consideration of exceptional and unforeseen circumstances may include:

1. Family matters
 - Care of a family member that is not immediate family, and/or where the primary responsibility for that family member lies elsewhere (eg a sick grandparent where parents or other close family members are able to provide care).
 - Family connections to a particular hospital or clinical school.
2. Personal
 - Illness of a more general nature where appropriate treatment is readily available in the region of the clinical school
 - Other studies (students are not permitted to undertake concurrent studies in the clinical semesters)
 - Lack of a vehicle
 - Part-time employment



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- Volunteer commitments
- Leases and mortgages
- Friendship groups
- Religious facilities unavailable in the clinical school region
- Changes in circumstances after an ERC place is accepted, eg students must plan to be rural for the required semesters