

RACGP Rural Generalist Fellowship Training Handbook

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Rural Generalist Overview

Welcome message

CEO welcome message

Welcome and congratulations on your decision to enter the RACGP's Rural Generalist Fellowship training program. The Rural Generalist Fellowship journey recognises the extra requirements and skills of rural general practitioners (GPs) and supports you to meet the diverse health needs of rural and remote communities. Whilst a GP with Fellowship of the RACGP (FRACGP) can practice unsupervised anywhere in Australia - the extra skills gained as part of the Rural Generalist Fellowship extend your scope of practice and support you to meet the diverse health needs of your community. The RACGP rural generalist qualification has robust and modern curricula aligned to the National Rural Generalist Pathway. With this qualification you will further develop your emergency medicine skills with the core emergency medicine training and extend your skills in a discipline of interest and community need with your choice of additional rural skills training (ARST) options. The RACGP is committed to supporting you through your training journey, equipping you with the knowledge, skills and experience you need to practise independently anywhere in Australia. During your time in rural generalist training, you'll treat a range of patient populations, train with experienced rural supervisors and mentors, and develop additional rural skills to broaden local options for safe, accessible and comprehensive care for Australia's rural, remote and very remote communities. The emphasis on community general practice will develop your diagnostic, communication, and therapeutic skills to manage whole of person care across the spectrum of life stages and presentations. This handbook includes all the information you need to complete the rural generalist components of general practice training. You will find information about the whole journey from enrolment through to Fellowship, information on your program team, training requirements, placement processes, additional support and more. The RACGP has been training rural GPs for over 60 years, so rest assured you are joining a supportive community of registrars, practising GPs, Rural Generalists and RACGP staff with experience and proven delivery in rural training. We will support you not only throughout your training but also during the rest of your career, giving you access to networks of like-minded individuals, ongoing training and professional development, access to a huge volume of high-quality resources including clinical guidelines and standards, and up-to-date general practice news and research. As the peak representative body with over 48,000 members, the College is advocating strongly for the profession by influencing public health policy for better health and wellbeing for all Australians. There are a range of opportunities within the RACGP and we encourage you to consider getting involved to bring your influence to the strategic direction of education, health policy and advocacy work with the various councils and committees within our faculties including state-based, Rural, GPs in Training, Aboriginal and Torres Strait Islander Health and Specific Interests. Welcome, we trust you will find your training a rewarding experience – and thank you for supporting rural communities! Georgina van de Water Chief Executive Officer

Acronyms

Acronyms

ACEM	Australian College of Emergency Medicine
ADF	Australian Defence Force
AGPT	Australian General Practice Training program
ANZCA	Australian and New Zealand College of Anaesthetists
ARST	Additional Rural Skills Training
CBD	Case Based Discussion
CoS	Consolidation of Skills
Core EMT	Core Emergency Medicine Training
cv	curriculum vitae
DOPS	Direct Observation of Procedural Skills
DRANZCOG Adv or Associate (Advanced Procedural) RANZCOG	Associate (Advanced Procedural) RANZCOG membership
DRGA or RGA	Diploma of Rural Generalist Anaesthesia or Rural Generalist Anaesthetists
EMAD or AACEM (Advanced)	Associateship in Advanced Emergency Medicine (ACEM)
EMD or AACEM (Intermediate)	Associateship in Intermediate Emergency Medicine (ACEM)
EMC	Emergency Medicine Certificate (ACEM)
FACRRM	Fellowship of Australian College of Rural and Remote Medicine

FARGP	Fellowship of Advanced Rural General Practice
FAQ	Frequently Asked Question
FRACGP	Fellowship of the Royal Australian College of General Practitioners
FRACGP-RG	RACGP Rural Generalist Fellowship
FSP	Fellowship Support Program
FTE	Full-time Equivalent
GP	General Practitioner
HETI	Health Education and Training Institute
ннѕ	Hospital and Health Services
LHD	Local Health Districts
LHN	Local Health Networks
ME	Medical Educator
Mini-CEX	Mini Clinical Evaluation Exercise
МММ	Modified Monash Model
NCP	National Consistent Payments
PHN	Primary Health Network
PMCV	Postgraduate Medical Council of Victoria
PSA	Program Support Administrator
QRGP	Queensland Rural Generalist Pathway
RACGP	Royal Australian College of General Practitioners
RACP	Royal Australasian College of Physicians
RACS	Royal Australasian College of Surgeons

RANZCOG	Royal Australian and New Zealand College of Obstetricians and Gynaecologists
RCA	Random Case Analysis
RDAA	Rural Doctors Association of Australia
RDN	Rural Doctors Network
RG	Rural generalist
RGC	Rural Generalist Consolidation
RGCU	Rural Generalist Coordination Units
RGCU NT	Rural Generalist Coordination Unit Northern Territory
RGPSA	Rural Generalist Program South Australia
RGPWA	Rural Generalist Pathway Western Australia
RPAO	Rural Programs Administration Officer
RPLE	Recognition of Prior Learning and Experience
RPM	Manager Rural Programs and Rural Generalist training
RVTS	Remote Vocational Training Scheme
тс	Training Coordinator
TMS	Training Management System
TRGP	Tasmanian Rural Generalist Pathway
VRGP	Victorian Rural Generalist Program
WBA	Workplace Based Assessment

Rural Generalist Overview

About the RACGP Rural Generalist Fellowship (FRACGP-RG) training

GPs are an integral part of our rural communities, and the skills they practice depend on the context in which they work and the specific needs of their communities. The term 'rural generalist' describes a rural GP who is working to an extended scope of practice with skill sets informed by the needs of the community they serve. Their skills encompass comprehensive general practice and emergency care and required components of other non-GP specialist care in hospital and community settings. Rural generalist medicine is a well-established model of care practiced by many GPs in rural and remote areas across Australia.

"A Rural Generalist (RG) is a medical practitioner who is trained to meet the specific current and future health care needs of Australian rural and remote communities, in a sustainable and cost-effective way, by providing both comprehensive general practice and emergency care, and required components of other medical specialist care in hospital and community settings as part of a rural healthcare team"

Collingrove Agreement, February 2018

Rural Generalist Fellowship

The RACGP's Rural Generalist Fellowship qualification is a recognised end point for rural generalist training by state and territory rural generalist programs. The Rural Generalist Fellowship is awarded in addition to the vocational Fellowship of the RACGP (FRACGP). It supports developing and recognizing additional rural skills to broaden local options for safe, accessible, and comprehensive care for Australia's rural, remote and very remote communities. The Rural Generalist Fellowship gives you the opportunity to develop more emergency medicine skills and procedural or non-procedural skills in the following areas:

- Aboriginal and Torres Strait Islander health
- Academic post
- · Adult internal medicine
- · Anaesthesia
- · Child health

- · Emergency medicine
- · Mental health
- · Obstetrics and women's health
- · Palliative care
- Surgery
- · Small Town Rural General Practice

Other additional skills may be considered on application to the RACGP Rural censor as part of an individually designed program. Under the Australian General Practice Training program the combination of both RACGP fellowships (FRACGP, FRACGP-RG) is a four-year (FTE) training program, with up to an additional two years available for leave and extensions for training where applicable. Practising GPs have two years FTE to complete the requirements of the RG Fellowship.

Pre-requisites

- Financial Member of the Royal Australian College of General Practitioners (RACGP)
- Working towards Fellowship of the Royal Australian College of General Practitioners (FRACGP) or a current fellow of the RACGP
- Must be enrolled with an RACGP approved training program if training towards FRACGP.
 - Australian General Practice Training (https://www.racgp.org.au/education/registrars/f ellowship-pathways/policy-framework/program-handbooks-and-guidance-documents/ agpt-registrar-training-handbook/your-agpt-program/welcome-to-the-agpt-program)
 - Fellowship Support Program (https://www.racgp.org.au/education/imgs/fellowship-pathways/fellowship-programs-for-imgs/fellowship-support-program)
 - Remote Vocational Training Scheme (https://rvts.org.au/training/handbook)

Registrars must choose to train towards FRACGP combined with RACGP's Rural Generalist Fellowship. The Rural Generalist Fellowship offers the greatest benefits when completed over the full period of the training program, with an integrated training plan, well before you start preparing for your FRACGP fellowship exams. Practising GPs may also choose to train towards the Rural Generalist Fellowship. You will need to apply for the rural generalist fellowship (https://www.racgp.org.au/the-racgp/faculties/rural/rural-generalist-fellowship/apply-for-the-racgp-s-rural-generalist-fellowship).

Overview of training requirements

To be awarded the Rural Generalist Fellowship under the AGPT program, you must have successfully completed:

- 12 months (FTE) hospital training
- 18 months (FTE) general practice training, of which at least 12 months must be in a rural general practice setting (MMM3-7) in a RACGP accredited training post.
- · 12 months (FTE) additional rural skills training (ARST) in a RACGP accredited training post
- 6 months (FTE) core emergency medicine training (core EMT) in an RACGP accredited training post

Registrars must choose to train towards FRACGP combined with RACGP's Rural Generalist Fellowship. You can opt-in or out of the rural generalist program at any stage of your training.

Enrolment Process for the Rural Generalist Fellowship

Preparing for Enrolment

Enrolment preparation

Below are some links that will guide you through information about the pathway to Fellowship and can assist you before enrolling into general practice training. The information provided is around topics such as eligibility, the Rural Generalist Fellowship and more. Becoming a GP – Pathway to Fellowship (https://www.racgp.org.au/education/students/starting-the-gp-journey/the-pathway-to-fellowship)

Eligibility FAQs (https://www.racgp.org.au/education/become-a-gp/train-to-be-a-gp/australian-general-practice-training) Rural Generalist Fellowship (https://www.racgp.org.au/the-racgp/faculties/rural/rural-generalist-fellowship/about-the-rural-generalist-fellowship)

RACGP Rural Generalist Fellowship FAQs (https://www.racgp.org.au/the-racgp/faculties/rural/rural-generalist-fellowship/about-the-rural-generalist-fellowship/about-the-rural-generalist-fellowship/faqs)

How to enrol into rural generalist training

For Registrars

Applying as an Australian General Practice Training (AGPT) program registrar

To apply for rural generalist training, you can find more information here (https://www.racgp.org.au/edu cation/become-a-gp/train-to-be-a-gp/australian-general-practice-training) and in the AGPT Application Handbook which includes information on the application process and eligibility. When you apply for the AGPT program, you can apply to join the Rural Generalist Fellowship in addition to your intent to train on either the general or rural streams. You may also opt into the Rural Generalist Fellowship at any time during your training by speaking with your rural program team. If you are already training towards the FRACGP and would like to opt into the Rural Generalist Fellowship, you can apply here application form (https://www.racgp.org.au/the-racgp/faculties/rural/rural-generalist-fellowship/apply-for-the-racgp-s-rural-generalist-fellowship) and your RACGP rural training team will be in contact with you.

Applying as a Remote Vocational Training Scheme Registrar

To apply as a Remote Vocational Training Scheme (RVTS) registrar, you can find more information (http s://www.racgp.org.au/the-racgp/faculties/rural/rural-generalist-fellowship/about-the-rural-generalist-fellowship) on eligibility and the application process. You will need to complete this application (https://www.racgp.org.au/the-racgp/faculties/rural/rural-generalist-fellowship/apply-for-the-racgp-s-rural-generalist-fellowship) form (https://www.racgp.org.au/the-racgp/faculties/rural/rural-generalist-fellowship/apply-for-the-racgp-s-rural-generalist-fellowship) and advise your RVTS training team of your intent to complete the Rural Generalist Fellowship training. As an RVTS registrar, you will be supported by RVTS in your general practice and rural generalist training. The RACGP rural generalist team will support your

enrolment into rural generalist training. You will be able to liaise with RVTS and your local rural generalist coordination unit to assist with finding suitable placements. The RACGP rural training team will be in contact with you to discuss your application.

Applying as a Fellowship Support Program (FSP) registrar

To apply for the Fellowship Support Program (FSP), you can find more information https://www.racgp.org.au/education/imgs/fellowship-pathways/fellowship-programs-for-imgs/fellowship-support-program) on the eligibility and requirements, and you can express your interest in the program. You will need to complete this <a href="https://www.racgp.org.au/the-racgp/faculties/rural/rural-generalist-fellowship/apply-for-the-racgp-s-rural-generalist-fellowship)) form (file:///C:/Users/Jordan.Hannaford/AppData/Local/Microsoft/Windows/INetCache/Content.Outlook/1E3FBVR5/form%20(https://www.racgp.org.au/the-racgp/faculties/rural/rural-generalist-fellowship/apply-for-the-racg) and advise your FSP training team of your intent to complete the Rural Generalist Fellowship training. The RACGP rural training team will be in contact with you to discuss your application.

For practising GPs

Applying for Rural Generalist Fellowship as a practising GP

To apply for the RG Fellowship as a practising GP and a Fellow of the RACGP (FRACGP), you will need to complete this application form (https://www.racgp.org.au/the-racgp/faculties/rural/rural-generalist-fellowship/apply-for-the-racgp-s-rural-generalist-fellowship) and liaise with the RACGP rural training team to complete the RG Fellowship. You may also be eligible to apply for recognition of prior learning and experience (https://www.racgp.org.au/the-racgp/faculties/rural/rural-generalist-fellowship/about-the-rural-generalist-fellowship/practising-gps) (RPLE). If you already hold the Fellowship in Advanced Rural General Practice (FARGP) and/or the Fellowship of Australian College of Rural and Remote Medicine (FACRRM), you can apply to transition to the Rural Generalist Fellowship until June 2024, via this application form (https://www.racgp.org.au/the-racgp/faculties/rural/rural-generalist-fellowship/applic ation-to-obtain). The RACGP rural training team will be in contact with you to discuss your application.

Applying for Rural Generalist Fellowship as a current FARGP trainee

If you are currently enrolled in the FARGP and would like to transition to the Rural Generalist Fellowship, you can do so at no additional cost until June 2024. You can complete this application form (https://www.racgp.org.au/the-racgp/faculties/rural/rural-generalist-fellowship/application-to-obtain) and the RACGP rural generalist team will be in contact with you to discuss your application. From July 2024 onwards, if you choose to transition from FARGP to the Rural Generalist Fellowship, you may be required to complete additional training, and administration fees will apply.

Induction to Training

Induction to Training

Training Induction

AGPT

At your induction meeting with your program team you will discuss your individual training plan, including information on your background and past experiences, your readiness for general practice and your goals for additional rural skills training (ARST). Together, you'll develop a training plan to guide your training journey. You'll cover topics such as:

- · your career aspirations
- · the requirements of rural training
 - your training plans, any particular requirements you may have and potential barriers to your training
 - your readiness for general practice terms, including spending at least 52 weeks fulltime equivalent (FTE) working in an MMM 3-7 location
- which ARST curriculums you would be interested in completing and relevance of the training to yourself and the community and where relevant prerequisites for the ARST
- costs of completing ARST
- potential locations for ARST and core emergency medicine training (core EMT) placements
- how you will satisfy curriculum requirements
- your eligibility for Recognition of Prior Learning and Experience
- any questions you may have and any other information you need to know for your training.

You will be able to review your training plan throughout your training in the Training Management System. Your RACGP rural training team and other local supports will arrange your induction meeting at a mutually convenient time.

You will have a dedicated RACGP rural training team working with and supporting you throughout your training. This may include, but is not limited to:

- Manager Rural Pathway and Rural Generalist Training (RPM)
- Rural Programs Administrative Officer (RPAO)
- Training Coordinator (TC)
- Program support administrator (PSO)
- Rural specific medical educator (ME)
- Supervisor (including non-GP specialists)
- · GP mentor

- Assessors
- · Cultural mentors

Please note: Most MEs work part time in general practice. If your ME is not available and you need urgent assistance, please contact your TC who will connect you with an available ME. Your regional rural program team may change if you transfer to a different region. You can look at 'Who's who in training' (https://www.racgp.org.au/education/registrars/fellowship-pathways/policy-framework/program-handbooks-and-guidance-documents/agpt-registrar-training-handbook/your-agpt-program/whos-whos-in-training) for additional information on the RACGP local, regional and national teams involved with your training.

Training Plan

Your training plan documents your broad training goals. In addition to your general practice training this may include:

- · Which ARST you plan to complete
- Your core EMT requirements and how you will complete this term
- · When and how you will complete each component of your training
- Where you are looking to complete your training and relevance of the training to yourself and the community

You will be able to review your training plan throughout your training in the Training Management System.

RVTS, FSP and Practising GPs

Initial Communications

Upon successful enrolment into the Rural Generalist Fellowship, you will receive communications from the RACGP rural training team. This initial communication will outline how to commence your training online and payment details relevant to your pathway. The RACGP rural training Team will provide you access to your online learning platform, GPlearning, where you will be able to find the relevant resources and be able to upload assessment items for your training.

Your RACGP Rural Training team

The following people will be supporting you throughout your training. This may include, but is not limited to:

- Supervisor (including non-GP specialists)
- · GP mentor
- Assessors
- · Cultural mentors

The Rural Generalist Coordination Units (RGCU) for your location may be able to assist you with identifying potentially suitable placements. The RACGP rural training team can refer you to the relevant RGCU.

Training Plan

Your training plan documents your broad training goals for your RG training. This may include:

- · Which ARST you plan to complete
- Your core EMT requirements and how you will complete this term.
- · When and how you will complete each component of your training.
 - Where you are looking to complete your training and relevance of the training to yourself and the community

You will be able to review your training plan throughout your training on your learning platform.

Additional Rural Support for Training

Additional Rural Support for Training

In addition to your local support from RACGP rural training teams, you will be able to access support from the rural generalist coordination units, local workforce agencies, primary health networks and local health networks in your state, as listed in the table below.

New South Wales

- Health Education and Training institute (https://www.heti.nsw.gov.au/education-and-training/our-focus-areas/rural-and-remote)
- NSW Rural Doctors Network (https://www.nswrdn.com.au/site/index.cfm)
- <u>Local Primary Health Networks (https://www.health.gov.au/initiatives-and-programs/phn/your-local-phn/nsw-phns)</u>
- New South Wales Health / Local Health Districts (https://www.health.nsw.gov.au/lhd/Page s/default.aspx)

Northern Territory

- Rural Generalist Pathway NT Health (https://health.nt.gov.au/professionals/rural-generalists)
- NT Rural Workforce Agency (https://www.ntphn.org.au/programs/rural-workforce-agency-nt/)
- Northern Territory PHN (https://www.ntphn.org.au/)
- Department of Health Northern Territory (https://health.nt.gov.au/)

Queensland

- Queensland Rural Generalist Pathway (https://ruralgeneralist.qld.gov.au/)
- Health Workforce Queensland (https://www.healthworkforce.com.au/disciplines/general-practitioner?source=google.com)
- Local Primary Health Networks (https://www.health.gov.au/initiatives-and-programs/phn/your-local-phn/qld-phn)
- Local Hospital and Health Services (https://www.health.qld.gov.au/system-governance/health-system/hhs/about)
- Queensland Health (https://www.health.qld.gov.au/system-governance/health-system/hhs/ about)

South Australia

- Rural Generalist Program South Australia (https://www.ruralgeneralist.sa.gov.au/)
- Rural Doctors Workforce Agency (SA) (https://www.ruraldoc.com.au/)
- Local Primary Health Networks (https://www.health.gov.au/initiatives-and-programs/phn/y our-local-phn/sa-phns)
- <u>South Australian Department of Health (https://www.sahealth.sa.gov.au/wps/wcm/connect/Public+Content/SA+Health+Internet/)</u>

Tasmania

- Tasmanian Rural Generalist Pathway (https://doh.health.tas.gov.au/gp/about_us/tasmania n_rural_medical_generalist_pathway2)
- HR Plus (https://www.hrplustas.com.au/)
- Tasmania Primary Health Network (https://www.primaryhealthtas.com.au/)
- Tasmanian Department of Health (https://www.health.tas.gov.au/)

Victoria

- Victorian Rural Generalist Program (https://www.vicruralgeneralist.com.au/)
- Rural Workforce Agency Victoria (https://www.rwav.com.au/)
- Local Primary Health Networks (https://www.health.gov.au/initiatives-and-programs/phn/y our-local-phn/vic-phns)
- Department of Health and Human Services Victoria (https://www.dhhs.vic.gov.au/)

Western Australia

- Rural Generalist Pathway WA (https://ruralgeneralist.health.wa.gov.au/)
- Rural Health West (https://ruralhealthwest.com.au/)
- Local Primary Health Networks (https://www.health.gov.au/initiatives-and-programs/phn/your-local-phn/wa-phns)
- Western Australia Department of Health (https://www.healthywa.wa.gov.au/Articles/A_E/C ontact-details-for-population-public-health-units)

National

- <u>National Rural Generalist Pathway (https://www.health.gov.au/initiatives-and-programs/national-rural-generalist-pathway)</u>
- Workforce Incentive Program (https://www.health.gov.au/our-work/workforce-incentive-program)

Recognition of prior learning and experience

Recognition of prior learning and experience

We recognise that you may start general practice or rural generalist training with many years of relevant experience. A process for recognition of prior learning and experience (RPLE) assesses relevant training and/or experience that can potentially meet some or all your education and training requirements for the RG Fellowship. We'll support you to apply for RPLE which, if approved, can reduce your total program time. You may apply for RPLE for any or all the training components of the RG Fellowship. The RACGP Rural and/or state censor will assess the evidence presented regarding your knowledge, skills and experience to determine if you are eligible for RPLE for relevant components of your training. Information on RPLE assessment criteria and the evidence requirements are listed on this web page (ht tps://www.racgp.org.au/the-racgp/faculties/rural/fellowship-in-advanced-rural-general-practice/about-the-fargp/practising-gps).

Fees and Financial Support

Fees

Fees

AGPT registrars

There is no registration fee for new applicants or current AGPT registrars. The additional rural skills training (ARST) assessment fee of \$2,800 (GST free) will be invoiced prior to the commencement of your ARST post. This fee is only payable for the ARSTs that the RACGP manages. The ARST fees for anaesthesia, obstetrics and emergency medicine are administered by the relevant medical college (ANZCA, RANZCOG or ACEM).

RVTS and FSP registrars

A registration fee of \$950 (GST free) is applicable to all RVTS and FSP registrars, in addition to the ARST assessment fee of \$2,800 (GST free).

Practising GPs

A registration fee of \$950 (GST free) is applicable to all practising GPs. If you are applying for recognition of prior learning and experience (RPLE) for your ARST, the ARST assessment fee may not apply to you.

GPs with FARGP

GPs with FARGP have until 30 June 2024 to apply for the Rural Generalist Fellowship via recognition of prior learning and experience. An application fee of \$675 (GST free) is applicable. From 1 July 2024, additional training and/or administration fees may apply.

Financial Support

Financial Support

Available Financial Support

Financial support available to rural generalist registrars

National Consistent Payments Framework (AGPT only) The National Consistent Payments (NCP) Framework outlines the support payment which is provided to eligible supervisors, practices and registrars involved in the AGPT program from semester one in 2023 and is administered by Services Australia. Information about the NCP Framework can be found on the Department of Health and Aged Care's website (https://www.health.gov.au/resources/publications/national-consistent-payments-frame work?language=en). You can also talk to your training coordinator for additional information. Flexible funding payments (AGPT only) The Australian Government provides funding to support training, address specific needs and build capacity in areas of workforce need. If you're placed in an MMM 6 or 7 location, or in a priority hard-to-fill location (as defined by the RACGP for each state), you may be eligible to apply for additional financial support. This additional funding can be used to attend specialist courses or for housing, internet or relocation costs. Information about flexible funds can be found in the AGPT Flexible Funding Policy (https://www.racgp.org.au/education/registrars/fellowship-pathways/poli cy-framework/education-policies/flexible-funds-policy) or you can speak to your RACGP rural training team. Flexible funding is not available for extension terms or for a second ARST post. ARST Flexible Funding Payments (AGPT RG only) AGPT Registrars on a Rural Generalist pathway are required to undertake accredited and approved Additional Rural Skills Training. Funding of up to \$6000 per registrar is available to assist with the cost of mandatory education and training to meet ARST requirements. Additional funding (all rural generalist registrars) Other additional funding, scholarships and grants may be available in each state from various funding sources. Please refer to your local organisations for further information. You may also be eligible for Workforce Incentive Program (https://www.health.go v.au/our-work/workforce-incentive-program) through the Department of Health and Aged Care.

Rural generalist training placements

Preparing for Placement

Preparing for Placement AGPT

As part of your rural generalist training, you need to complete a six-month placement for core EMT and a 12-month placement for your ARST. The process for managing these RG-specific placements is different to the general practice training term placement process and will vary between regions. The Rural Generalist Coordination Units (RGCUs) are external State based organistations that are funded to support rural generalist training via their coordinating function with their respective state or territory health department and other rural stakeholder organisations. However, the operation of RGCUs is quite different between regions and your RACGP rural training team will help you navigate the resources in your region. Finding a suitable placement for your training will involve discussions with your regional rural program team and your RGCU. Being proactive will increase the likelihood of securing your ideal placement. During your induction meeting, you and your RACGP rural training team will begin to identify the specialties you wish to train in and the location where you would like to complete your placements. You will liaise with your regional rural program team, local RGCU and training hospitals and/or clinics to coordinate your placement. The recruitment process will vary from state to state and you may be required to go through a competitive interview process for some ARST posts, either through an RGCU coordinated process or via the health facility where you wish to train. If you have already identified a placement, you will need to discuss this with your RACGP rural training team early to ensure that the hospital or clinic can meet the requirements of the curriculum and is appropriately accredited before you commence. For hospital-based posts in an accredited facility, the RACGP rural training team will need to check that the supervision and teaching plans are appropriate to accredit the post with RACGP for your placement. It is your responsibility to ensure that preparations for your placements are completed before your start in your training post. For AGPT registrars, refer to the Preparing for a placement page (https://www.racgp.org.au/education/registrars/fellowship-pathways/policy-framewor k/program-handbooks-and-guidance-documents/agpt-registrar-training-handbook/training-placements/ preparing-for-a-placement) for more information on what is needed in preparation for your placement. If you are training in anaesthesia, emergency medicine or obstetrics, you will need to ensure ARST training fees have been made to the relevant medical college. If you are completing an RACGP managed curriculum for your ARST, you will be invoiced prior to commencement of your placement (Refer to Fees (https://www.racgp.org.au/education/registrars/fellowship-pathways/policy-framework/program-handb ooks-and-guidance-documents/racgp-rural-generalist-training-handbook/fees-and-financial-support/fee s)).

Accreditation of placements

Your RACGP rural training team will liaise with you and your training post to ensure that the site is accredited. If the post is not already accredited, your RACGP rural training team will assess if all requirements can be met and if deemed potentially suitable, will commence the application process to accredit the post with the nominated health service. All new ARST posts will be required to be submitted for approval by the regional accreditation panel before commencing. Accreditation of your training post may include but not limited to considerations such as:

- · is there appropriate supervision throughout training?
 - does remote supervision need to be considered in your location (where applicable)?
- have you identified an independent assessor for your training post?
- does the training post have a relevant teaching schedule available?
- can the training post deliver all components of the curriculum including assessment?
 - if there are any gaps in what the training post can deliver, what is the plan for covering the entire curriculum?

In addition, for ARST training posts, this may involve accreditation by other specialist medical colleges for the specific discipline, such as ANZCA, ACEM, RANZCOG, RACP or RACS. To access a list of accredited posts for ARSTs, please speak to your RACGP rural training team.

Supervision during your rural generalist training

All accredited ARST posts will have a nominated supervisor. Should this change during your placement, it is your responsibility to notify your RACGP rural training team immediately. You can refer to the ARST training post requirements or the relevant curriculum for additional information.

Remote supervision

Remote supervision (https://www.racgp.org.au/education/gp-training/remote-supervision-1/remote-supervision-program#:~:text=About remote supervision,-Remote supervision aims&text=The RACGP remote supervision initiative,rural Australian towns for decades.) may be used in training sites where there is no accredited supervisor onsite, if appropriate. Remote supervision aims to provide high-quality training options for registrars to work in locations where there is limited or no regular onsite supervision. During remote supervision, registrars are primarily supervised by a supervisor who is offsite, using phone and videoconferencing to teach, support and ensure real-time assistance when needed. Training sites and supervisors will need to be accredited for remote supervision and adhere to the remote supervision guidelines to ensure registrar and patient safety.

Cultural mentors

Cultural mentors provide you with a source of cultural expertise, advice, and support. They will typically be a local Aboriginal or Torres Strait Islander health worker/practitioner, an Elder, or another respected member of the local Aboriginal and Torres Strait Islander community and may be filled by more than one individual over the course of your training. Their role is to provide advice and assistance in relation to:

- · cross-cultural communication skills and culturally safe clinical practices
- · understanding the cultural, political, and community-controlled context
- developing the attitudes, knowledge, and skills the candidate needs to work effectively in the community.
- · 'Bridging the cultural divide'.

Applying for placements

Your RACGP rural training team will be able to assist you in applying for core EMT and ARST posts. This may be done in collaboration with the RGCUs, particularly if the posts are hospital-based or involve other health department facilities. Depending on your location, you may need to apply via your region's RGCU or directly to your prospective training facility and supervisor. You are encouraged to continually update your training plan as you must keep your RACGP rural training team informed, even if you are already working with your RGCU to secure an accredited training post. This will ensure the post is appropriately accredited with RACGP prior to the commencement of your placement

Tips for preparing for your placement

Training requirements

- Familiarise yourself with your training requirements for your level of training. Check with your RACGP rural training team, and / or TC and ME.
- Registrars should ensure they update their training plan regularly in consultation with their ME.

CV and cover letter

Update your CV with your latest education and employment history and ensure it is presented
to a professional standard. You will be competing with other GP registrars and other trainees
for places and your CV is how you make yourself stand out.

Referees

 Contact your preferred referees, ask whether they would be happy to help, check if they have leave planned during the training post selection period, and confirm their preferred contact details.

Relocation

If you need to relocate for your ARST or core EMT training, contact your regional rural program team about available financial and other support you may be able to access which will vary from state to state.

Confirmation of placement checklist

Once you have a placement arranged, you will need to:

- inform your RACGP rural training team.
- · update your training plan details.
- ensure the training post is accredited before you start the placement. Your regional rural program team will assist you with this.
- ensure fees have been paid before you start your placement (as required).

Commencing your placement

At the beginning of a new placement:

- you will receive an orientation to the training site(s) and team.
- your training for the duration of the placement should be planned and the plan regularly updated in your logbooks
- you will have an initial period of supervision to determine the level of supervisor support you require to ensure safety.

Before you start, ensure that:

- you have the necessary provider number and other documentation required by the training site(s)
- you and the training site(s) have completed the RACGP placement contract (for community GP terms only)
- you have finalised your employment agreement with the training site(s).
- Provide a copy of your employment contract to your RACGP rural training team.

Exception to location requirements

For AGPT registrars

If you need to be granted an exception to your training location requirement, please refer to the <u>AGPT</u> (https://www.racgp.org.au/education/registrars/fellowship-pathways/policy-framework/program-handbooks-and-guidance-documents/agpt-registrar-training-handbook/training-program-requirements/training-location/exception-to-location-requirements) registrar training handbook (https://www.racgp.org.au/education/registrars/fellowship-pathways/policy-framework/program-handbooks-and-guidance-documents/agpt-registrar-training-handbook/training-program-requirements/training-location/exception-to-location-requirements) for more information and speak with your RACGP rural training team and/or TC.

For RVTS and FSP registrars and practising GPs

You are responsible for finding an appropriate training post and there is no location requirement applicable to you for your ARST, unless listed in the relevant curriculum. You will need to have completed at least 12 months in rural general practice or as per the RG RPLE requirements.

State-specific information

News South Wales

New South Wales

The New South Wales RGCU is the Health Education and Training Institute (HETI). (https://www.heti.ns w.gov.au/education-and-training/our-focus-areas/rural-and-remote) HETI works closely with local health districts, speciality health networks and public health organisations to support health professionals in their training. HETI's NSW Rural Generalist Medical Training Program (https://www.heti.nsw.gov.au/education-and-training/courses-and-programs/nsw-rural-generalist-medical-training-program) provides a coordinated training pathway to rural generalism in NSW. HETI provides a foundation year program to support training towards becoming a rural generalism, and will also assist those not in the program. HETI can help to identify available placements for ARSTs in the following disciplines:

- Anaesthesia
- · Child health
- · Emergency medicine
- · Mental health
- Obstetrics
- · Palliative care

Availability for ARSTs (https://www.heti.nsw.gov.au/education-and-training/courses-and-programs/nsw-rural-generalist-medical-training-program/junior-medical-officer) are made available from late July each calendar year for commencement the following clinical year. You can speak to your training coordinator to liaise with HETI or contact HETI directly at HETI-RuralGeneralist@health.nsw.gov.au (mailto:HETI-RuralGeneralist@health.nsw.gov.au).

Northern Territory

Northern Territory

The Northern Territory (NT) RGCU is within NT Health. It is working together with local and national stakeholders to establish the Northern Territory Rural Generalist pathway (https://ruralgeneralist.nt.gov.au/why-a-rural-generalist), to develop strong links between hospitals, primary care networks, Aboriginal Community Controlled Health Organisations and training providers. You can speak to your program team to liaise with the RGCU about your training.

Queensland

Queensland

The Queensland (QLD) RGCU is <u>Queensland Rural Generalist Pathway (https://ruralgeneralist.qld.gov.au/) (QRGP)</u>, and they can help to identify available placements for ARSTs in the following disciplines:

- · Adult internal medicine
- Anaesthesia
- · Child health
- · Mental health
- Obstetrics

Availability in these ARSTs opens in April/May each year for commencement the following year. ARSTs in emergency medicine, surgery and Aboriginal and Torres Strait Islander health are coordinated via Queensland Health's Resident Medical Officer Campaign. Applications open in June for commencement the following year. You can find information on the disciplines and locations of placements, key dates, processes and applications on the QRGP website (https://ruralgeneralist.qld.gov.au/current-trainees/). Your training coordinator will be able to assist you in liaising with QRGP to apply for your ARST placement.

South Australia

South Australia

The South Australian (SA) RGCU is Rural Generalist Program South Australia (https://www.ruralgeneralist.sa.gov.au/) (RGPSA). The RGPSA provides advice to medical graduates and general practice registrars with an interest in rural generalism. They also provide ongoing support to rural-based registrars to encourage retention of GPs in rural areas. RGPSA can help to identify available placements in all ARST disciplines. Eligibility, key dates and application processes can all be found on their website (https://www.ruralgeneralist.sa.gov.au/training-stages/advanced-skills-and-skills-consolidation/). You can speak to your program team to liaise with RGPSA about your training.

Tasmania

Tasmania

The Tasmanian (TAS) RGCU is the <u>Tasmanian Rural Generalist Pathway (https://doh.health.tas.gov.au/gp/about_us/tasmanian_rural_medical_generalist_pathway2)</u> (TRGP). The TRGP works with local and national stakeholders to develop strong links between hospitals, primary care networks, health

organisations and training providers. You can speak to your program team to liaise with TRGP about your training, or email tasrural.pathways@health.tas.gov.au (mailto:tasrural.pathways@health.tas.gov.au (mailto:tasrural.pathways@health.tas.gov.au).

Victoria

Victoria

The Victorian (VIC) RGCU is <u>Victorian Rural Generalist Program (https://www.vicruralgeneralist.com.a</u> <u>u/) (VRGP)</u>. VRGP supports a state-wide end-to-end training program for the rural generalist workforce to train, work and live in rural and regional Victoria. VRGP can assist with finding placements for ARSTs in the following disciplines:

- Anaesthesia
- · Emergency medicine
- · Mental health
- Obstetrics
- · Palliative care
- Paediatrics

Matching rural generalist trainees to VRGP Rural Generalist Advanced (RGA) positions is undertaken by the Postgraduate Medical Council of Victoria (PMCV). This process takes place around July. Key dates for applications and RGA matching can be found on the PMCV website (https://www.pmcv.com.au/202 3-rural-generalist-advanced-match/). You can find additional information on the process of matching and determine your priority group for matching in the VRGP RGA Skills Program Guidelines (https://www.vicruralgeneralist.com.au/assets/main/2022-Rural-Generalist-Advanced-Skills-Program-Guidelines.pd f). VRGP also offers the Rural Generalist Consolidation (RGC) program (https://www.vicruralgeneralist.com.au/rg-consolidation), which enables rural medical practitioners who have completed a procedural ARST with opportunities to maintain, refresh or update their additional skills and transition to becoming independent rural generalists. This program was previously known as Consolidation of Skills (CoS). Eligibility and guidelines can be found on their website (https://www.vicruralgeneralist.com.au/rg-consolidation). You can speak to your program team to liaise with VRGP and PMCV about your training.

Western Australia

Western Australia

The Western Australian (WA) RGCU is the <u>Rural Generalist Pathway Western Australia</u> (https://ruralgene ralist.health.wa.gov.au/) (RGPWA). RGPWA works closely with local and national stakeholders and helps facilitate the transition for rural generalist trainees through the various education and training components. The RGPWA also partners with existing organisations to enhance the professional experience in regional, rural and remote location. You can find out more about the <u>eligibility requirement</u> (https://ruralgeneralist.health.wa.gov.au/Rural-Generalist-Pathway-WA/Eligibility) for joining the RGPWA

and apply (https://ruralgeneralist.health.wa.gov.au/Rural-Generalist-Pathway-WA/Applications) via an application form. You can find out about the additional rural skills training opportunities (https://ruralgeneralist.health.wa.gov.au/Rural-Training-Opportunities/Advanced-Skill-Training) available through the RGPWA. You can speak to your program team to liaise with RGPWA about your training.

Training program requirements for the Rural Generalist Fellowship (FRACGP-RG)

Hospital training

Hospital training

If you're an AGPT registrar, you'll spend the first year of the program completing rotations in an accredited hospital unless eligible for RPLE. Hospital training gives you the foundation in a range of clinical disciplines relevant to general practice and helps you develop an understanding for the integration of primary and secondary levels of care. Four rotations are mandatory – medicine, surgery, emergency medicine and paediatrics. Before you begin your general practice terms, you must be able to demonstrate safe practice in these. For more information about hospital training and eligibility for RPLE refer to the AGPT registrar training (https://www.racgp.org.au/education/registrars/fellowship-pathway s/policy-framework/program-handbooks-and-guidance-documents/agpt-registrar-training-handbook/training-program-requirements/education-and-training/hospital-training) handbook (https://www.racgp.org.au/education/registrars/fellowship-pathways/policy-framework/program-handbooks-and-guidance-documents/agpt-registrar-training-handbook/training-program-requirements/education-and-training/hospital-training). If you are an RVTS or FSP registrar, you will be completing your training in accordance with your specific program requirements. If you are a practising GP and are already a Fellow, you will have already completed hospital training and will not need to provide additional evidence.

General practice training

General practice training

Depending on the training program you are enrolled in, you need to complete a minimum of 18 months FTE of general practice placements in an RACGP-accredited general practice training site under the guidance of an RACGP-accredited supervisor. You must complete at least 52 weeks of this training in an MMM 3–7 location either in one continuous block or in two six-month terms. You should be living and working in the rural community during your rural general practice placement. If you have completed your general practice training component prior to beginning your rural generalist training but have not completed a minimum of 52 weeks in an MMM 3–7 location, you will need to complete additional training in a suitable training site to meet this requirement. General practice placements should provide:

- exposure to a diverse range of patient presentations in terms of age, gender, socioeconomic status, and cultural and linguistic background
- adequate exposure to different general practice supervisors and management systems to satisfy the practice diversity requirements. Please see <u>training program requirements policy (ht</u> <u>tps://www.racgp.org.au/education/registrars/fellowship-pathways/policy-framework/training-program-policies/training-program-requirements-policy)</u>

• for rural general practice placements, one or more of the following opportunities in order to experience:

- GPs providing emergency/trauma services at the local hospital or similar healthcare facility.
- GPs providing other procedural and/or non-procedural services at the local hospital or similar healthcare facility.
- limited local access to specialists, including hospitals with salaried medical specialists and inpatient—outpatient allied health services.
- GPs providing after-hours services based on community needs.

Please note, if you plan to do your ARST post in Aboriginal and Torres Strait Islander health in a rural community, you may be eligible for RPLE for the rurality requirement of 52 weeks of rural general practice training, but this will not reduce your general practice training time. You need to ensure that the requirements for both have been or will be met prior to commencing the RPLE application process.

Training obligations

The <u>training program requirements</u> (https://www.racgp.org.au/education/registrars/fellowship-pathway <u>s/policy-framework/education-policies/training-program-requirements-policy)</u> underpin the operational policies. You can speak to your regional rural program team about additional training obligations that may apply in your region.

Core Emergency Medicine Training

Core Emergency Medicine Training

Core emergency medicine training (core EMT) is designed to provide you with the skills, knowledge and confidence to manage emergency situations in rural and remote environments. You'll be able to address unique rural challenges, provide high quality emergency medical care and lead healthcare teams in your community.

Core EMT requires a minimum of six months FTE spent in an accredited training post. You need to demonstrate satisfactory achievement of the outcomes outlined in the core EMT curriculum (https://www.racgp.org.au/getmedia/670116bb-f576-4bee-8706-3119fd08c1cb/Core-Emergency-Medicine-Training-Curriculum.pdf.aspx). Core EMT satisfies your extended skills training term requirement. However, if you want to complete an extended skills training term other than emergency medicine, you have the option of completing an extended skills term in addition to core EMT.

You can choose to complete core EMT immediately after your hospital training time, which enables you to contribute to the emergency roster in a rural hospital while training in a rural general practice. Alternatively, you can complete core EMT after, or even concurrently with, your rural general practice terms, which will give you an understanding of the context in which the emergency services are provided.

The RACGP recommends you work closely with your RACGP rural training team to develop the best training plan for your individual circumstances.

If you plan to complete your ARST in emergency medicine, you'll need to complete your core EMT training before starting your ARST placement, as it forms the foundation on which more advanced emergency skills are developed.

Completion of the Australian College of Emergency Medicine (ACEM) Emergency Medicine Certificate (EMC) will partially meet the requirements of core EMT. Additional rural context requirements must be met to receive full recognition; refer to ACEM Emergency Medicine Certificate and Rural Generalist Fellowship core-EM training gaps (https://www.racgp.org.au/FSDEDEV/media/documents/Faculties/Rural/ACEM-Emergency-Medicine-Certificate-and-RG-Core-EM-Training-gaps-document.pdf) for details prior to applying for RPLE (https://www.racgp.org.au/the-racgp/faculties/rural/fellowship-in-advanced-rural-general-practice/about-the-fargp/practising-gps).

Training post and supervision requirements

For an overview of the requirements for core EMT, please refer to the sections on the <u>Context and Content for the RACGP RG Fellowship Core Emergency Medicine Training (https://www.racgp.org.au/get media/670116bb-f576-4bee-8706-3119fd08c1cb/Core-Emergency-Medicine-Training-Curriculum.pdf.as px) in the curriculum (https://www.racgp.org.au/getmedia/670116bb-f576-4bee-8706-3119fd08c1cb/Core-Emergency-Medicine-Training-Curriculum.pdf.aspx).</u>

Workplace-based assessments for core EMT

Satisfactory completion of core EMT will be assessed by a suite of workplace-based assessments (WBA). The following WBA tools will be used to assess the candidate's competency:

WBA templates for core EMT (https://www.racgp.org.au/the-racgp/faculties/rural-generalist-fellowship/about-the-rural-generalist-fellowship/workplace-based-assessments)

Names of WBAs

Mini - CEX - mini clinical evaluation exercise

RCA – random case analysis

DOPS - direct observation of procedural skills

WBA Requirement	Assessor	Number of Assessments/ activities	When assessment/ activity should occur*
Mini-CEX	Independent assessor	1 session with 3 observations	Completed during months 4-5
	Supervisor	1 session with 3 case discussions	Completed during months 2-3
RCA	Medical educator or independent assessor	1 session with 3 case discussions	Completed during months 4-5
	Supervisor	1 session with 3 case discussions	Completed during months 2-3
DOPS	Medical educator or independent assessor	1 session with 3 case discussions	Completed during months 4-5
Logbook of core procedural skills	Signoff by supervising senior clinician or educator	Listed in logbook	Throughout training
Supervisor Reports	Supervisor	1	Middle of training (eg at 3 months)

Core Emergency Medicine Training

at 6 months

^{*} Timing of when assessments occur is based on 6 months of FTE training

Additional Rural Skills Training

Additional rural skills training

Completion of a minimum 52 weeks FTE of additional rural skills training (ARST) in an accredited training post is an essential component of training towards the Rural Generalist Fellowship. This additional training is designed to enhance your rural general practice by providing an opportunity to develop additional skills and expertise in a particular area, increasing your capability to provide secondary-level care to the community. Where possible, you should complete the training in a regional or rural location (MMM2-7); however, urban posts (MMM1) will be accepted depending on the availability of training posts for specific disciplines. Where a genuine community need is identified, you may develop an ARST discipline outside the list of approved disciplines to meet this need. This must meet the required standard for an ARST and be approved by the RACGP Rural censor before you start training. Applications should first be discussed with your ME and assessed by the your RACGP rural training team prior to seeking approval from the Rural Censor . You can select one of the following approved disciplines for your ARST training subject to funding and availability in your region. We recommend you consider both your own interests and the needs of your community when making your selection.

- · Aboriginal and Torres Strait Islander health
- Academic post
- · Adult internal medicine
- Anaesthesia
- Child health
- · Emergency medicine
- Mental health
- Obstetrics
- · Palliative care
- · Small Town Rural General Practice
- Surgery

Note that:

• if you plan to do your ARST post in emergency medicine, you must complete the core EMT prior to the commencement of the ARST component.

Curricula

Each ARST curriculum (https://www.racgp.org.au/the-racgp/faculties/rural/rural-generalist-fellowship/a rst-information-from-2022) sets out the competencies that need to be achieved. It also provides a framework for the teaching and learning of the critical knowledge, skills, and attitudes that rural GPs require to effectively deliver appropriate inpatient and outpatient care in rural and remote communities, where non-GP specialist support is often limited. These curricula are effective for all AGPT and RVTS registrars who started training from 2022 onwards and for FSP registrars from 2023. Current registrars who have remained enrolled in FARGP prior to 2022 and are yet to transition to the RACGP-RG, and who

have not yet commenced their ARST can choose to undertake these curricula or the https://www.racgp.org.au/the-racgp/faculties/rural/rural-generalist-fellowship/arst-information-pre-20 22). Additional rural skills training through other specialist colleges

Anaesthesia

RACGP registrars will complete the <u>Rural Generalist Anaesthesia training (https://www.racgp.org.au/the-racgp/faculties/rural/rural-generalist-fellowship/arst-information-from-2022)</u> (RGA) with the Australian and New Zealand College of Anaesthetists (ANZCA). In order for a registrar to be placed in an anaesthesia training post, the training site must be accredited with ANZCA and the RACGP.

Emergency medicine

The RACGP is working with the Australasian College of Emergency Medicine (ACEM) to implement the new ARST- emergency medicine curriculum for the RACGP Rural Generalist Fellowship. If you are commencing your emergency medicine ARST in 2024, you will still enrol in the existing ACEM Associateship in Advanced Emergency Medicine (AACEM) (https://www.racgp.org.au/the-racgp/faculties/rural-generalist-fellowship/arst-information-from-2022). In order for a registrar to be placed in an emergency medicine training post, the training site must be accredited with ACEM and the RACGP.

Obstetrics

RACGP registrars will complete the RANZCOG Associate Training Program (Advanced Procedural) (http s://www.racgp.org.au/the-racgp/faculties/rural/rural-generalist-fellowship/arst-information-from-2022) with the Royal Australian and New Zealand College of Obstetricians and Gynaecologists (RANZCOG). In order for a registrar to be placed in an obstetrics training post, the training site must be accredited with RANZCOG and the RACGP.

Completing a second ARST post

You may apply to complete a second ARST after completing all the other training requirements of your FRACGP & FRACGP-RG, provided there is sufficient training time remaining. For AGPT registrars, the cost of a second ARST will not be subsidised by the training program. Approval to undertake a second ARST must be granted by the rural censor prospectively.

You will also need to discuss this with your RACGP rural training team to include in your training plan and liaise with local RGCU, where relevant, to identify available training posts, noting that priority will be given to those completing their first ARST.

You can apply to the rural censor by emailing your RACGP rural training team outlining which ARST you would like to complete and why (in particular, how it will benefit your community).

For practising GPs, if you complete a second ARST after previously completing the RG Fellowship, you will receive an additional certificate rather than an additional or amended RG Fellowship parchment. You can complete a second ARST or apply for RPLE via the usual RPLE process. Fees apply.

Training post and supervision requirements

For an overview of the training post and supervision requirements for each ARST discipline, please refer to the ARST training post requirements. More information can also be found in the <u>rural generalist</u> training placements section (https://www.racgp.org.au/education/registrars/fellowship-pathways/polic y-framework/program-handbooks-and-guidance-documents/racgp-rural-generalist-training-handbook/pl acements-working-progress).

Blended Placements - Consolidation & Maintenance of Skills

To support an understanding of the context in which your additional rural skills training (ARST) will be applied, we recommend you undertake your ARST towards the end of your training, after completing the general practice terms, exams and Core EMT requirements.

However, the RACGP recognises that a registrar may be required or motivated to complete their ARST early, such as immediately after their hospital year. In these cases, the RACGP supports a more flexible approach to their GP training to ensure the registrar continues developing, consolidating, and maintaining the additional skills acquired as part of their RG training journey.

Whilst consolidation/maintenance of skills is not compulsory, it is encouraged particularly where registrars have completed a procedural ARST such as Anaesthetics, Obstetrics and Surgery to ensure they avoid the potential for deskilling and loss of competency in your chosen ARST discipline.

RGs who have undertaken an ARST early in their training, who wish to consolidate and/or maintain their skills in their chosen discipline may be eligible for a priority general practice placement match, to ensure placements are in the same community where they are using their additional rural skills.

In order to have time spent in consolidation and/or maintenance of additional skills recognised as training time, the registrar must work with their Rural Program team and have a targeted training plan developed and prospectively approved. Such a plan will need to include consideration of factors including:

- the registrar is not working more than 38 hours per week in total.
- the consolidation and maintenance posts are directly related to the registrar's ARST discipline, as well as training and career in general practice.
- The registrar will have ongoing support throughout their training from their supervisor(s).
- where the ARST is practised outside of their community general practice, both training sites must be accredited and appropriate supervision provided.

Your rural generalist coordination unit (RGCU) may also have specific consolidation of skills programs that may provide funding. This will differ from State to State, but where an RGCU has a program in place to support consolidation of skills placements, this should be discussed with your Rural Programs Team and Medical Educator with approval granted by RACGP prospectively.

The following guidelines apply to those registrars who require consolidation and/or maintenance of skills support following completion of their ARST discipline during their general practice training:

Consolidation of skills (registrar may incur additional training time)

CoS is defined as the period when the RG has completed their ARST training requirements and is supported in the practice of their additional rural skills to increase confidence towards independent practice. RGs have the option of an additional extended skills training placement (EST). This time may be used for CoS, particularly for procedural ARST disciplines.

Depending on the stage of training and other training placement requirements (teaching and admin time) up to 11 hours may count towards extended skills (CoS) training. This is reduced for GPT1 registrars as they have teaching time requirements of 3 hours per week which limits the time that may count towards extended skills training to no more than 8 hours per week.

This will be recognised as a concurrent placement; a part time standard GP clinical placement and a part-time extended skills (Cos) placement, noting the CoS placement is not required to meet the minimum part-time training requirements (14.5 hrs/week).

Rural Censor approval may be required.

Maintenance of skills (MoS)

Maintenance of Skills is defined as the continuing practice of additional rural skills as part of rural generalist practice where registrars have completed an ARST. RG placements may spend up to 20% of their training time practising their ARST discipline as part of rural general practice to maintain their skills. For a full-time registrar they may spend one day per week (up to 20% FTE) working in their ARST discipline and have this counted as part of their general practice training term (GPT). The MoS placement will be added as an 'additional site'.

Blended placements

Blended rural placements are specific to the registrar and must be approved by the Rural Censor before commencement.

For example, an RG working across a rural community general practice (0.5 FTE) and a rural hospital ED (0.5FTE) concurrently for 12 months, the time would meet the RG rural general practice time requirement provided the work is being completed in an MM3-7 location. The placement could be counted as:

- a part-time general practice training term completed over 12 months, and
- a part-time core emergency medicine training or extended skill term completed over 12 months.

The time working in the above activities is in addition to working in a comprehensive general practice.

Ultimately, the registrar must balance the consolidation (CoS) and maintenance (MoS) of ARST skills with all their other training requirements, including sufficient training in clinical general practice. This includes attending all scheduled workshops which take priority during the GP terms.

The RACGP will assess and approve training plans on a case-by-case basis and has discretion to grant further flexibilities in the registrar's training, if required.

Workplace-based assessments

Satisfactory completion of RACGP ARSTs will be assessed by a suite of workplace-based assessments (WBA).

The WBA assessment tools and requirements for each ARST discipline are outlined below, and more information is available in the relevant curriculum.

For the ARST disciplines managed by external colleges – anaesthesia, emergency medicine and obstetrics – please refer to the relevant curriculum for the assessment requirements.

Names of WBAs

Mini - CEX - mini clinical evaluation exercise

CBD - case based discussion

RCA - random case analysis

DOPS - direct observation of procedural skills

Aboriginal and Torres Strait Islander health

Aboriginal and Torres Strait Islander health ARST curriculum (https://www.racgp.org.au/the-racgp/faculties/rural/rural-generalist-fellowship/arst-information-from-2022)

WBA templates (https://www.racgp.org.au/the-racgp/faculties/rural/rural-generalist-fellowship/about-the-rural-generalist-fellowship/workplace-based-assessments)

WBA Requirement	Assessor	Number of Assessments/activities	When assessment/ activity should occur*
Mini-CEX	Supervisor	1 session with 3 observations	Completed during months 2-4
	Independent assessor	1 session with 3 observations	Completed during months 7-8
CBD	Independent assessor	2 sessions, each with 2 case discussions	Completed during months 4-6 and 9-11
RCA	Supervisor	2 sessions, each with 3 case discussions	Completed during months 2-4 and 7-8
	Medical educator or independent assessor	1 session with 3 case discussions	Completed during months 4-6
Logbook/cultural journal	Regular review by the supervisor and/or cultural mentor, and by the ME at each ME meeting	Refer to the ARST curriculum	Throughout training
Community Project	Regular review by the supervisor and/or cultural mentor, and by the ME at each ME meeting	Refer to the ARST curriculum	Throughout training
Supervisor Reports	Supervisor	1	Middle of training (eg at 6 months)
		1	End of training (eg at 12 months

Adult internal medicine

Adult internal medicine ARST curriculum (https://www.racgp.org.au/the-racgp/faculties/rural/rural-gene ralist-fellowship/arst-information-from-2022)

WBA templates (https://www.racgp.org.au/the-racgp/faculties/rural/rural-generalist-fellowship/about-the-rural-generalist-fellowship/workplace-based-assessments)

WBA Requirement	Assessor	Number of Assessments/activities	When assessment/ activity should occur*
CBD	Independent assessor	2 sessions, each with 2 case discussions	Completed during months 4-6 and 9-11
RCA	Supervisor	2 sessions, each with 3 case discussions	Completed during months 2-4 and 7-8
NGA	Independent assessor	1 session with 3 case discussions	Completed during months 4-6
DOPS	Supervisor	1 session with 3 case observations	Completed during months 2-4
	Independent assessor	1 session with 3 case observations	Completed during months 7-8
Logbook	Regular review by the supervisor and/or cultural mentor, and by the ME at each ME meeting	Refer to the ARST curriculum	Throughout training
Supervisor Reports	Supervisor	1	Middle of training (eg at 6 months)
		1	End of training (eg at 12 months

^{*} Timing of when assessments occur is based on 12 months of FTE training

^{*} Timing of when assessments occur is based on 12 months of FTE training

Child health

Child health ARST curriculum (https://www.racgp.org.au/the-racgp/faculties/rural/rural-generalist-fellowship/arst-information-from-2022)

WBA templates (https://www.racgp.org.au/the-racgp/faculties/rural-generalist-fellowship/about-the-rural-generalist-fellowship/workplace-based-assessments)

WBA Requirement	Assessor	Number of Assessments/activities	When assessment/ activity should occur*
Mini-CEX	Supervisor	1 session with 3 observations	Completed during months 2-4
Willin-GEX	Independent assessor	1 session with 3 observations	Completed during months 7-8
CBD	Independent assessor	2 sessions, each with 2 case discussions	Completed during months 4-6 and 9-11
RCA	Supervisor	2 sessions, each with 3 case discussions	Completed during months 2-4 and 7-8
	Independent assessor	1 session with 3 case discussions	Completed during months 4-6
Logbook	Regular review by the supervisor and/or cultural mentor, and by the ME at each ME meeting	Refer to the ARST curriculum	Throughout training
Supervisor Reports	Supervisor	1	Middle of training (eg at 6 months)
	Supervisor	1	End of training (eg at 12 months

^{*} Timing of when assessments occur is based on 12 months of FTE training

Mental health

Mental health ARST curriculum (https://www.racgp.org.au/the-racgp/faculties/rural/rural-generalist-fellowship/arst-information-from-2022)

WBA templates (https://www.racgp.org.au/the-racgp/faculties/rural-generalist-fellowship/about-the-rural-generalist-fellowship/workplace-based-assessments)

WBA Requirement	Assessor	Number of Assessments/activities	When assessment/ activity should occur*
Mini-CEX	Supervisor	1 session with 3 observations	Completed during months 2-4
WIIIIFGEX	Independent assessor	1 session with 3 observations	Completed during months 7-8
CBD	Independent assessor	2 sessions, each with 2 case discussions	Completed during months 4-6 and 9-11
RCA	Supervisor	2 sessions, each with 3 case discussions	Completed during months 2-4 and 7-8
	Independent assessor	1 session with 3 case discussions	Completed during months 4-6
Logbook	Regular review by the supervisor and/or cultural mentor, and by the ME at each ME meeting	Refer to the ARST curriculum	Throughout training
Supervisor Reports	Supervisor	1	Middle of training (eg at 6 months)
		1	End of training (eg at 12 months

^{*} Timing of when assessments occur is based on 12 months of FTE training

Palliative care

Palliative care ARST curriculum (https://www.racgp.org.au/the-racgp/faculties/rural/rural-generalist-fellowship/arst-information-from-2022)

WBA templates (https://www.racgp.org.au/the-racgp/faculties/rural/rural-generalist-fellowship/about-the-rural-generalist-fellowship/workplace-based-assessments)

WBA Requirement Assessor Number of When assessment/ Assessments/activities activity should occur*

Mini-CEX	Supervisor	1 session with 3 observations	Completed during months 2-4
	Independent assessor	1 session with 3 observations	Completed during months 7-8
CBD	Independent assessor	2 sessions, each with 2 case discussions	Completed during months 4-6 and 9-11
RCA	Supervisor	2 sessions, each with 3 case discussions	Completed during months 2-4 and 7-8
	Independent assessor	1 session with 3 case discussions	Completed during months 4-6
Logbook	Regular review by the supervisor and/or cultural mentor, and by the ME at each ME meeting	Refer to the ARST curriculum	Throughout training
Supervisor Reports	Superviser	1	Middle of training (eg at 6 months)
	Supervisor	1	End of training (eg at 12 months

^{*} Timing of when assessments occur is based on 12 months of FTE training

Small Town Rural General Practice

Surgery



Community Project

Community Project

Please note that it is mandatory if you are completing the Aboriginal and Torres Strait Islander health ARST to complete a community project. If you are completing STRGPT it is highly recommended, for other ARSTs should you wish to undertake a community project, please discuss with your training coordinator. The community project (https://www.racgp.org.au/the-racgp/faculties/rural/rural-generalist-fellowship/community-project) provides a valuable opportunity to get to know your community and improve health outcomes. Completed over 6–12 months during your time in a rural community, it includes a quality improvement activity undertaken within a general practice with the primary purpose to monitor, evaluate or improve the quality of healthcare delivered by the practice. The project report needs to demonstrate your ability to complete a community needs assessment, identify needs or gaps in the community, and demonstrate skills in planning, carrying out, evaluating and presenting a project.

Extended Skills

Extended Skills

If you are in the AGPT program and are looking to complete extended skills training in addition to core EMT, you must complete this term within the allocated timeframe. Speak with your RACGP rural training team to plan your training.

Leave and Extension of Program Time

Leave and Extension of Program Time

For APGT

You're entitled to a range of types of leave from your training program under the National Terms and (htt ps://gpra.org.au/ntcer/) Conditions for the Employment of Registrars (https://gpra.org.au/ntcer/). Additionally, an extension of program time may be granted in specific circumstances if you aren't able to fulfill the requirements for Rural Generalist Fellowship within the training time cap. For information on leave and extension of program time, refer to the AGPT registrar training handbook (https://www.racgp.org.au/education/registrars/fellowship-pathways/australian-general-practice-training-program-agpt/agpt-registrar-handbook/your-agpt-program/welcome-to-your-agpt-program).

For FSP, RVTS and Practising GPs

You may be entitled to various types of leave under your relevant training programs. Should your circumstances change, and you are unable to fulfill the requirements for Rural Generalist Fellowship, speak to your training program team about leave, extension or withdrawal.

Withdrawal from RG

Should you wish to withdraw from the RG training, you will need to discuss your situation with your RACGP rural training team to see if other options are available for completing your RG training. If there are no suitable options to continue your training, withdrawal from the RG Fellowship may be required. For AGPT, if withdrawing from the RG Fellowship, you will need to work with your RACGP rural training team, TC and ME to amend your training plan, and inform any other relevant stakeholders such as the training post, supervisor and RGCUs.

Fellowship

Fellowship

Once you've successfully completed your rural generalist training and met all the requirements for the award of FRACGP, the RACGP Rural censor will endorse your completion of training for admittance to Rural Generalist Fellowship. Once this is ratified by the Censor-in-Chief, you'll be admitted to FRACGP-RG and your ARST specialty will be included on your Fellowship parchment.

For AGPT registrars

As you approach Fellowship, you will follow the guidelines in the <u>AGPT registrar training handbook</u> (http s://www.racgp.org.au/education/registrars/fellowship-pathways/policy-framework/program-handbook s-and-guidance-documents/agpt-registrar-training-handbook/fellowship/requirements-for-fellowship/ap proaching-fellowship). Upon successful completion you will be awarded the Fellowship of the RACGP (FRACGP) with the additional Rural Generalist Fellowship.

For FSP and RVTS registrars

The Rural Training team will communicate with your training program team for completion of all training requirements. For the FSP requirements for Fellowship, refer to the <u>FSP registrar handbook</u> (https://www.racgp.org.au/FSDEDEV/media/documents/Education/FSP/FSP-Registrar-handbook.pdf)

For practising GPs

After completing rural generalist training, the RACGP rural training team will help you with the completion of training process.

Supplementary material

Resources

Resources

RACGP Rural Generalist Fellowship webpage (https://www.racgp.org.au/the-racgp/faculties/rural/rural-generalist-fellowship)

Recognition of Rural Generalist Medicine – Progress Update (https://www.racgp.org.au/the-racgp/faculties/rural/fellowship-in-advanced-rural-general-practice/about-the-fargp/recognition-of-rural-generalist-medicine)

Education policy and supporting documents (https://www.racgp.org.au/education/registrars/fellowship-pathways/policy-framework/education-policies/training-program-requirements-policy)

AGPT Registrar safety and support (https://www.racgp.org.au/education/registrars/fellowship-pathways/policy-framework/education-policies/training-program-requirements-policy%22%20HYPERLINK%20%22https://www.racgp.org.au/education/registrars/fellowship-pathways/policy-framework/program-handbooks-and-guidance-documents/agpt-registrar-training-handbook/registrar-safety-and-support/your-safety-and-wellbeing/work-health-and-safety)

FSP Registrar safety and support (https://www.racgp.org.au/education/registrars/fellowship-pathways/policy-framework/program-handbooks-and-guidance-documents/agpt-registrar-training-handbook/registrar-safety-and-support/your-safety-and-wellbeing/work-health-and-safety%22%20%EF%BF%BDHYPERLINK%20%22https://www.racgp.org.au/education/imgs/fellowship-pathways/fellowship-programs-for-imgs/fellowship-support-program/fellowship-support-program-resources/fsp-registrar-handbook/registrar-safety-and-support/your-safety-and-wellbeing)

Transition to the Rural Generalist Fellowship (https://www.racgp.org.au/the-racgp/faculties/rural/rural-generalist-fellowship/about-the-rural-generalist-fellowship/about-the-rural-generalist-fellowship-program)

Glossary

Glossary

Academic post	A 0.5 FTE research and medical education term undertaken as part of the AGPT program over 52 calendar weeks.
Accredited Australian or New Zealand hospital	e an Australian hospital accredited by a postgraduate medical council against the Australian Medical Council requirements, or a New Zealand hospital accredited by a postgraduate medical council against the Medical Council of New Zealand requirements.
Additional rural skills training (ARST)	A training term of 52 calendar weeks (FTE) in an accredited training post that provides the appropriate depth and breadth of experience necessary to meet the requirements of the particular ARST curriculum.
AHPRA medical registration	Registration with the Australian Health Practitioner Regulation Agency (AHPRA), which allows the registrant to practise medicine. Refer to the AHPRA website for more information.
Blended Placements	Blended rural placements are specific to the registrar and must be approved by the Rural Censor before commencement.
Completion of training	The formal end point of the program, as assessed by an exit interview and completion of training report.
Consolidation of skills	CoS is defined as the period when the RG has completed their ARST training requirements and is supported in the practice of their additional rural skills to increase confidence towards independent practice.
Core emergency medicine training	A mandatory component (minimum of 6 months) of the rural generalist training that is designed to strengthen rural general practice training by providing registrars with the skills and confidence to manage emergency situations in rural and remote environments.

Cultural mentor	A local Aboriginal or Torres Strait Islander health worker/
Guitural mentor	A local Aboriginal or Torres Strait Islander health worker/ practitioner, an Elder, or another respected member of the local Aboriginal and Torres Strait Islander community, and may be filled by more than one individual over the course of your training
Cultural safety	Cultural safety is determined by Aboriginal and Torres Strait Islander individuals, families and communities. Culturally safe practice is the delivery of safe, accessible and responsive healthcare free of racism through a health practitioner's ongoing critical reflection about knowledge, skills, attitudes, practising behaviours and power differentials.
Dual Fellowship	Fellowship with both the RACGP and the Australian College of Rural and Remote Medicine (ACRRM).
Extended skills training	A 26-calendar week (FTE) term that gives a registrar the opportunity to extend their skills in community general practice or pursue an area of interest relevant to general practice.
Extenuating and unforeseen circumstances	A circumstance that is outside of the registrar's control, can reasonably be considered to have been unforeseen, and can be shown to have a direct and significant impact on them. The RACGP considers extenuating and unforeseen circumstances on a case-by-case basis.
Fellowship	Admittance to either: • Fellowship of the RACGP (FRACGP), or • FRACGP and Rural Generalist Fellowship (FRACGP-RG).
Financial RACGP member	An RACGP member who has: • met the membership category requirements • had their complete membership application form accepted • paid their current membership fee in full.
Flexible funding	Australian Government funding to support training in MMM 6-7 and hard to fill locations.
Full-time equivalent (FTE)	For the AGPT program, the RACGP determines FTE to mean 38 hours per week spent in training, which includes all practice time, and education and training program activities.
General practice training terms	In the AGPT program, referred to as GPT1, GPT2 and GPT3. The extended skills term is sometimes referred to as GPT4.

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Local team	RACGP staff with local knowledge and relationships who support registrars from the time they enter the AGPT program through to Fellowship. The team includes a training coordinator, medical educator, cultural mentor and an administrator.
Maintenance of skills	Maintenance of Skills is defined as the continuing practice of additional rural skills as part of rural generalist practice where registrars have completed an ARST.
Member	A Fellow, Member, Associate, GP in training, Affiliate, Honorary Fellow or Honorary Member of the RACGP. Refer to the RACGP Constitution for more information.
Modified Monash Model	The Modified Monash Model (MMM) defines whether a location is a city, rural, remote or very remote. MMM 1 is a major city and MMM 7 is very remote. Overseas doctors (international medical graduates and foreign graduates of an accredited medical school) who are subject to section 19AB of the Health Insurance Act 1973 (Cwlth) must train on the rural pathway in MMM 2–7 areas. More information on MMM areas can be found on the Department of Health and Aged Care website.
National Consistent Payments Framework	From Semester one 2023, the National Consistent Payments (NCP) framework will provide support payments to supervisors, practices and registrars on the Australian General Practice Training (AGPT) program.
National team	RACGP staff with oversight of the overall AGPT program, providing high-level educational leadership. They may provide guidance and decision-making in particular circumstances, such as educational support and remediation, application for extended leave and managing critical incidents.
Program team	The training coordinator,medical educator or regional rural training team assigned to a registrar.
Program time	The length of time required to complete the AGPT.
Provider number	A Medicare provider number is given to eligible health professionals who are recognised for Medicare services, and allows them to claim, bill, refer or request Medicare services, A registrar must apply for a unique provider number prior to starting in a general practice placement.
RACGP Rural Generalist Fellowship	The award of Rural Generalist Fellowship (FRACGP-RG).

Glossary

Regional team	The team that manages a training region and provides support to the local team with specialised resources and expertise. Includes a registrar liaison officer and cultural educator. They may be involved in accreditation of training sites and educational workshops.
Registrar	A medical practitioner enrolled in the AGPT, FSP or RVTS program.
Remote supervision	A flexible model of supervision available upon application when no accredited supervisor is available.
Safety	The condition of being protected from or unlikely to cause danger, risk or injury. Educational safety is defined as a learning environment that values support, respectful communication, bidirectional feedback, reflection and the acquisition of new skills. It meets the learner's current level of competency and learning needs and facilitates growth and learning.
Second ARST	After completion of a ARST, a second ARST may be considered within the training period upon approval from the RACGP Rural Censor.
Supervisor	An accredited GP who works in an accredited training practice and takes responsibility for the education and training needs of the registrar while in the practice.
Training region	An area in which the RACGP delivers general practice training.
Training site	A health service accredited by the RACGP where the registrar may undertake their general practice training.
Training post	A health service, clinic or hospital accredited by the RACGP where the registrar may undertake their ARST or core EMT training.
Training stream	Subdivisions of the AGPT program: the general stream and the rural stream.
Wellbeing	The state of being comfortable, healthy or happy. Educational wellbeing is ensured when the registrar feels engaged, safe and supported in the learning environment.

Workplace-based assessments

Observation and assessment of a registrar's practice to track progression through training. Types of assessment include:

- early assessment for safety and learning (EASL)
- clinical case analysis
- multi-source feedback
- · mini-clinical evaluation exercise
- clinical audit
- external clinical teaching visit
- mid and end-term appraisals.