

Pre-approved alternative model: Blended supervision for temporary situations

RACGP Education Services | Quality and Compliance



1. Introduction

This document outlines the structure and requirements of the pre-approved alternative Blended Supervision Model (Temporary). The model can be used by training organisations to provide supervision to general practitioners in training (GPiT) where their onsite supervisor is unexpectedly unavailable for a period of up to two months. It is a blended model using both onsite and offsite supervision resources to support a GPiT's training.

This model fits within the framework for 'alternative models for training', which sits alongside The Royal Australian College of General Practitioners (RACGP) *Standards for general practice training* (3rd edition). This pre-approved alternative model has been evaluated and pre-approved for use by training organisations in specific circumstances. Within this framework, training organisations are able to implement this model in consultation with their state censurers without having to undergo the full approval process each time.

The purpose of the model is to enable training to occur when the traditional onsite supervision by an accredited GP supervisor is not possible for a temporary period.

2. Scope

This model of alternative supervision requires the training to be undertaken in an accredited training post, which may be a singular or composite post. It is intended for the situation where the traditional onsite supervision requirements cannot be met for a limited time period, such as when a supervisor is temporarily unavailable due to unforeseen circumstances.

3. Definitions

Blended supervision is a model using both onsite and offsite supervision resources to support a GPiT's training. The supervision responsibilities are distributed between members of a supervision team, which comprises accredited GP supervisors, other health professionals and operational support staff.

A temporary situation is defined as up to two months.

3.1 Situations where this model might be applied

This model aims to support the GPiT to continue in their training post and reduce disruption or the need to extend training time.

A range of circumstances may result in a situation where a supervisor is unexpectedly not available onsite. These include unexpected personal or family illness, the application of Australian Health Practitioners Regulation Agency conditions, or a supervisor leaving the practice.

The decision whether to institute this model needs to consider a range of issues that will affect patient and GPiT safety, and the GPiT's training progression. These are:

- the GPiT's level and status of training
- whether the GPiT is preparing to sit an exam
- the length of time remaining at the placement
- the length of time the GPiT has been working in the practice
- the period of time the practice is likely to have no accredited supervisor onsite
- the support the GPiT receives from the practice
- whether there are other Fellowed GPs at the practice who could be accredited.

4. The Blended Supervision Model

The Blended Supervision Model incorporates appropriate onsite supervision and offsite supervision resources.

- Onsite supervision may be available via another GP onsite not already accredited as a supervisor or via non-GPs such as an experienced practice nurse.
- Offsite supervision is provided remotely by an accredited supervisor at another practice or potentially by a medical educator with the training organisation.

The circumstance and all options must be discussed with, and agreed to, by the GPiT. All aspects of supervision must be considered and appropriate roles clarified and responsibilities understood. A supervision plan must be developed covering:

- teaching (if required)
 - clinical supervision including processes for management of patients requiring urgent care
- case discussion
- debriefing and mentoring
- feedback and assessment (if required)
 - support – clinical and pastoral responsibilities should be undertaken by the training organisation with increased monitoring of the GPiT.

5. Eligibility and selection criteria

The following must be considered and assessed by the training organisation regarding the application of the model. If an alternative model fulfils the following criteria, it should be eligible for the notification process.

Eligibility

5.1 The training practice and its resources

- The practice provides appropriate support systems including administrative support and other health professionals (eg appropriately trained nursing staff or another GP).
- The GPiT has worked in the practice for some time and is familiar with its systems, including management and referral of urgent cases, and contact persons for help if required.

5.2 IT and communication channels

The following must be available for use by the GPiT and supervisor:

- phone and internet access
- mobile device (tablet or smartphone).

5.3 The proposed supervision team

- Local personnel agree to their clearly defined responsibilities.
- Remote supervisors are accredited and agree to their role within the supervision plan.
- Supervisors and local personnel have ready access to training organisation support.
- There are clear processes to provide feedback and raise concerns.

Selection criteria

5.4 GPiTs

The GPiT:

- must be suitable for remote supervision, including adequate clinical experience and personal attributes that would ensure safe practice
- must be at supervision level 3 or 4
- has demonstrated clinical competency in previous assessments
- wants to remain in the practice while their accredited supervisor is unavailable.

6. Associated documents and forms

- Guidelines for use of pre-approved alternative models of training
- Notification for use of a pre-approved alternative model of training

7. Resource

The Royal Australian College of General Practitioners.
RACGP Standards for general practice training. 3rd edn.
East Melbourne, Vic: RACGP, 2021.

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