



RACGP

Rural

*Application for Recognition of Prior Learning for
Advanced Rural Skills Training - Mental Health*

Fellowship in Advanced Rural General Practice (FARGP)

Practising GPs are eligible for Recognition of Prior Learning (RPL) for several learning outcomes of the FARGP Advanced Rural Skills Training (ARST) Curriculum for Mental Health. This application form will assist both the Practising GP and the Rural Censor to determine eligibility for RPL for each relevant learning outcome.

Please refer to the FARGP ARST Curriculum for Mental Health [click here](#) for the full list of learning outcomes and assessments.

Section A: Candidate information

Title First name Surname RACGP no.

Section B: Learning outcomes

Please indicate which learning outcomes you are applying for RPL, with an explanation of how you have achieved each one. Supporting documentation should be supplied where possible (please see the curriculum for more detail on suggested forms of documentation).

Please note: these outcomes must have been achieved in the past 10 years.

No.	Learning outcome	How this has been achieved
1.2.3	Develop a comprehensive professional referral network	
3.2.1	Collaborate with mental health consumer organisation	
3.2.2	Collaborate with carer organisation	
3.2.4	Describe the differing mental health resources in rural and remote areas	
3.3.3	Increase community awareness of mental health issues as a means of reducing the associated stigma and discrimination	
4.1.2	Manage patient confidentiality	
5.1.2	Define and describe the use of power of attorney and advanced health directives	
5.1.3	Outline the steps required to apply for guardianship	
5.1.4	Outline relevant reporting responsibilities for child protection, domestic violence and substance abuse in your state	

Please note: the continuity of care learning outcome (2.3.6) is not applicable to practising GP candidates.

Section C: **Other information**

Are there any other components of the curriculum which you believe you should be granted RPL? Please give a detailed explanation and provide supporting documentation where appropriate.

Section D: **Declaration**

RPL application

I declare that the information provided in this application for RPL for the FARGP ARST mental Health is true and accurate.

Signature of delegate

Date

How to lodge your application

Please complete this form and:

Email fargp@racgp.org.au or

Post to **RACGP Rural**
100 Wellington Parade,
East Melbourne VIC 3002 or

Fax **03 8699 0598**

For more information call **1800 636 764** or
email fargp@racgp.org.au