

# RACGP

## Fellowship Support Program

Change in circumstance instructions



RACGP

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# What is a change in circumstance

A change in circumstance (CIC) is an online form located in the Fellowship Support Program (FSP) portal. We require you to complete the form when your personal circumstances change.

Once the form is finalised, it will be forwarded to the relevant teams for their review and approval.

## Reasons to complete a CIC

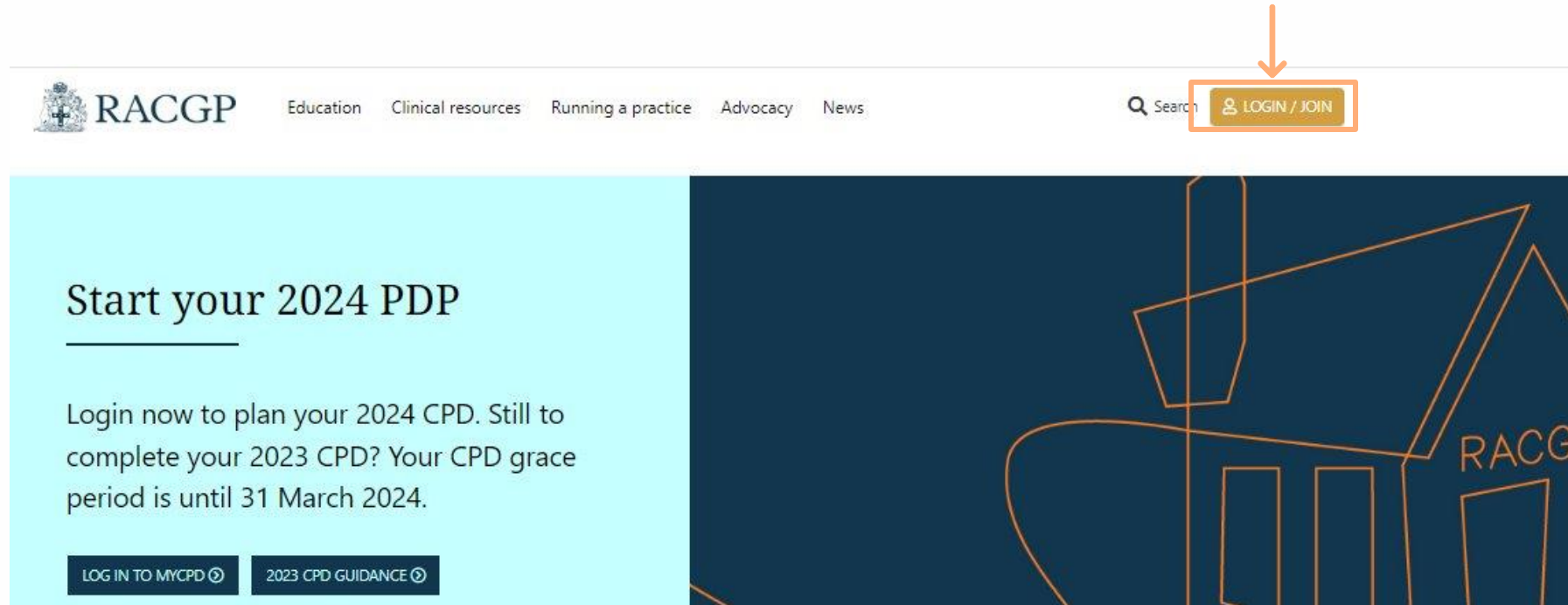
- If you wish to take leave
- Returning from leave
- Change in training site and/or adding an additional training site
- Change in supervisor or change of arrangement
- Change in working hours
- Change in Australian Medical Registration.

*It's important that you always keep FSP Admin up to date, as it can affect your education and exam sitting.*

# Where to locate the change in circumstance form on the FSP portal

## 1. Login to the RACGP website

To access the FSP portal, you need to login to the [RACGP website](#) with your username and password.



Where to locate the change in circumstance form on the FSP portal continued.

2. Once you're logged in, select **My Account** on the top right

The screenshot shows the RACGP website interface. At the top right, there is a search bar and a 'MY ACCOUNT' button. An orange arrow points to this button. Below the main navigation, there is a large banner for 'Start your 2024 PDP' with a light blue background and a dark blue background with orange lines. Below the banner, there are two buttons: 'LOG IN TO MYCPD' and '2023 CPD GUIDANCE'. On the right side, a dropdown menu is open, showing various account management options. An orange arrow points to the 'FSP Portal' option in this menu.

https://www.racgp.org.au

RACGP Education Clinical resources Running a practice Advocacy News

Q Search MY ACCOUNT

Start your 2024 PDP

Login now to plan your 2024 CPD. Still to complete your 2023 CPD? Your CPD grace period is until 31 March 2024.

LOG IN TO MYCPD 2023 CPD GUIDANCE

Manage account >

- myCPD >
- GPE Application >
- PEP Portal >
- Member Rewards >
- gplearning 20-22 >
- gplearning 23-25 >
- recruitGP >
- RACGP Shop >
- FSP Portal >
- Member Home
- Logout

3. Select **FSP Portal**

# Where to locate the change in circumstance form on the FSP portal

3. Click on the profile button and select 'Change in circumstances request'

The screenshot shows the FSP Registrar Dashboard. At the top right, there is a navigation menu with links for Portal Home, LMS Home, Resources, Help, Notifications (8), and Critical Incident. Next to these links is a user profile icon with a dropdown arrow, which is highlighted with an orange box. An orange arrow points down from this icon to a dropdown menu. The dropdown menu contains three items: 'My Profile', 'Change in circumstances request' (which is highlighted with an orange box), and 'Logout'. Another orange arrow points down from the top of the dropdown menu to the 'Change in circumstances request' option. Below the navigation menu, there is a section for 'FSP News' with the text 'No news to display' and a 'VIEW ALL NEWS >' button. The main content area is titled 'Portfolio' and contains four cards: 'Learning plan', 'Logbook', 'Assessments and Forms', and 'Documentation'. Each card has a brief description and a button with a right-pointing arrow. At the bottom, there is a section titled 'Contact My Support Team' with five circular icons representing Mentor, Assessor, Supervisor, Training Admin, and RACGP.

# When will I obtain an outcome for my change in circumstance request

Please use the following time frames as a guide for how long it may take to receive an outcome to your CIC request.

- Leave – 10 business days
- Supervisor change – on site supervision 10 business days
- Supervisor change – off site supervision 20 business days
- Training site change – six to eight weeks as this includes Medicare Australia's provider number processing times

# Change in circumstance categories

0% Survey Completion 100%



The online form is a survey-style format, asking you generic questions regarding the change you're applying for.

The following pages will break down each category and what's required.

When did you commence the FSP?

Please indicate which change in circumstance category you wish to submit for approval to RACGP:

- Leave
- Change of practice
- Change to Australian Medical Registration
- Change of working hours
- Change to supervisor
- Returning from Leave

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# Leave

To apply for leave, we ask you to indicate when you commenced on the program, then select 'Leave'.

**Tip!** Prior to submitting your leave, please read the leave section in the [FSP Registrar handbook](#) and [Leave policy](#).

*Not all leave needs a CIC request.*



When did you commence the FSP?

July 2023 ▼

Please indicate which change in circumstance category you wish to submit for approval to RACGP:

- Leave
- Change of practice
- Change to Australian Medical Registration
- Change of working hours
- Change to supervisor
- Returning from Leave

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## Leave continued.

Complete the questions and select the appropriate category for your leave.

You should refer to the [Leave Policy](#) to determine which category suits your needs.

**Tip!** If you're unsure which leave you're entitled to, please contact your program officer at [fspadmin@racgp.org.au](mailto:fspadmin@racgp.org.au)

*We're here to help you.*

Your first name:

Your last name:

Your RACGP ID:

Your email address:

Your practice details

Practice Name

Practice Address

Practice State

What type of leave are you submitting for approval? Please refer to [Leave Policy](#).

Category 1 - Leave from the Training Program

Category 2 - Additional leave from the Training Program

Category 3 - Australian Defence Force (ADF) service leave

Category 4 - Deferral of Commencement of Training

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## Leave continued.

You need to provide the nature of your leave and proposed start and end dates.

Please advise your program team that you will be going on leave, this includes your:

- supervisor
- practice manager
- medical educator – this is important as you may miss a small group learning session.



Please describe the nature of leave you are submitting for approval under category 2 leave. Please describe in less than 500 words. You may refer to [Leave Policy](#) for more information on this type of leave.

Proposed leave start date (dd/mm/yyyy)

Proposed leave end date (dd/mm/yyyy)

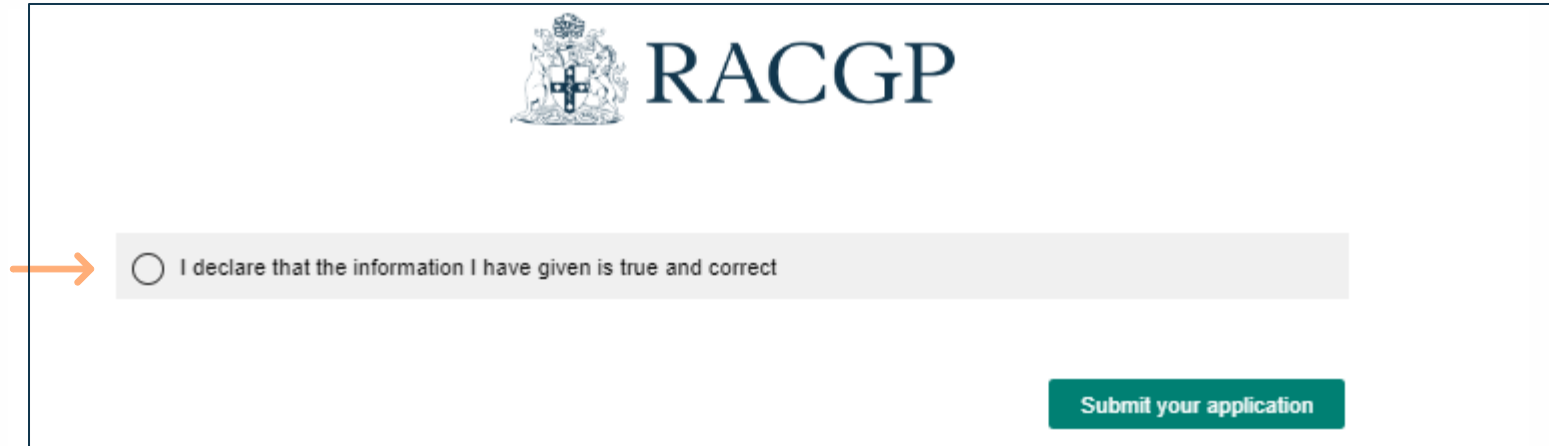
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## Leave continued.

Complete the declaration and your online form will be submitted.



 RACGP

I declare that the information I have given is true and correct

Submit your application

Once your form has been processed, you'll receive a formal outcome letter to acknowledge the leave you're taking.

When you return from leave, you'll be required to complete a 'Return from leave form' which is a category selection on the CIC form.

# Return from leave

We require you to inform us when you're returning from leave so we can prepare for your return and help you catch up on education.



When did you commence the FSP?

Please indicate which change in circumstance category you wish to submit for approval to RACGP:

- Leave
- Change of practice
- Change to Australian Medical Registration
- Change of working hours
- Change to supervisor
- Returning from Leave

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## Return from leave continued.

We require you complete all the fields in this section.



Your first name:

Your last name:

Your RACGP ID:

Your email address:

Your practice details

Practice Name

Practice Address

Practice State

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## Return from leave continued.

We require you complete all the fields in this section too.

This information informs us if you're returning earlier or later as requested.

Whether you're returning earlier or later the form will present you with further questions to answer. Please follow the questions until the end.



Which type of leave are you returning from?

Category 1

Category 2

Category 3

Category 4

What dates were you on approved leave?

Are you returning early from leave?

Yes

No



# Change of training site

This form will apply to you if you're to undertake the following:

- New training site in the same state (replacing your current training site)
- New training site in a different state (replacing your current training site)
- Adding additional training site
- Changing address of your current training site

Or

- Leaving one of your training sites (ie if you work in two training sites)

Applications for a change in training site or to work in an additional training site will not be accepted until three months after the commencement of training. Requests will be reviewed on a case-by-case basis following the extenuating and unforeseen circumstances guidelines.

**Tip!** Prior to submitting your CIC, please review the next slide which details what you need to provide us when completing the form for a change in training site.



## Change of training site continued.

When changing training sites please have the following information ready:

- New training site:
  - name
  - address
  - hours they've approved you to work
  - Modified Monash category (refer to [Health Workforce Locator](#))
- If it's in a distribution priority area (DPA) (refer to [Health Workforce Locator](#)),
- If they are accredited (you must provide a copy of the practice accreditation certificate)
- Letter of offer which must include the following:
  - date and signature by the Practice Principal (preferably), Senior Medical Director, CEO, Director or Practice Manager
  - practice letterhead
  - practice address
  - dates of employment
  - specify part-time or full-time work
  - total hours worked per week
  - duration of your weekly sessions (eg. Monday-Friday 9am-12.30pm & 1.30pm-5pm)
  - the exact nature of the work you are required to cover including duties performed
  - include the contact details for your supervisor

## Change of training site continued.

To commence the CIC for a change in training site, you need to answer general questions about the type of change, and then proceed with the rest of the form. This will take about 10-15 minutes to complete



When did you commence the FSP?

Please indicate which change in circumstance category you wish to submit for approval to RACGP:

- Leave
- Change of practice
- Change to Australian Medical Registration
- Change of working hours
- Change to supervisor
- Returning from Leave

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- New practice in the same state (this will replace your current practice)
- Add an additional practice in the same state
- New practice in a different state (this will replace your current practice)
- I am leaving one of my practices (remove a practice from your program)



# Change in Supervisor

In this section you will be able to:

1. Change your supervisor.
2. Advise that your supervisor is going on leave for more than 2 weeks.
3. Your supervisor arrangement is changing onsite/offsite.



When did you commence the FSP?

Please indicate which change in circumstance category you wish to submit for approval to RACGP:

Leave

Change of practice

Change to Australian Medical Registration

Change of working hours

Change to supervisor

Returning from Leave


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## Change in supervisor continued.

When submitting a CIC to **change your supervisor** you need to provide the following:

- A detailed explanation for why you are changing supervisor
- If you have a conflict of interest with the proposed new supervisor
- If your change in supervisor is due to a recent change in training site
- Supervisor details (refer to screenshot) 

Please note: The FSP promotes on-site supervision for the most effective in-practice education for registrars. In some exceptional circumstances an off-site supervisor may be approved at the RACGP's discretion.

Please provide new supervisor details

RACGP ID (if applicable)

First name

Last name

AHPRA medical registration

Email address

Contact phone number

Practice name

Practice address

Practice state

Will the new supervisor be located in the same practice as per your nominated practices?

On-site

Off-site

## Change in supervisor continued.

### Your supervisor arrangement is changing

Your supervisor may be moving onsite or off-site and it's important you make the correct selection as it will help the relevant team understand your request.

Please select the most relevant option:

My supervisor is moving from on-site to off-site

My supervisor is moving from off-site to on-site

Something else (please explain below)

Please provide supervisor details:

RACGP ID (if applicable)

First name

Last name

AHPRA medical registration

Email address

Contact phone number

Practice name

Practice address

Practice state

# Change in hours

Over the course of your training, you may wish to change your hours, from full-time to part-time or vice versa. See the definitions below of full-time and part-time.

**Full-time equivalent (FTE)** – The RACGP determines FTE to mean 38 hours per week and includes all practice time, education and training program activities – the composition of which will vary depending upon the GP in training’s stage of training.

**Part-time training** – The combined time spent in practice and undertaking out-of-practice education.

1. Time in practice is calculated pro rata against the definition of full-time general practice experience.
2. Part-time general practice must comprise:
  - a) A minimum of 14.5-hour working week, over a minimum of two days per week
  - b) A minimum of 10.5 hours in face-to-face, rostered, patient consultation time undertaking general practice activities.
3. Work periods of less than three consecutive hours, or less than four calendar weeks in any one practice, will not be considered.
4. Out-of-practice education hours may be in addition to time in practice.



When did you commence the FSP?

Please indicate which change in circumstance category you wish to submit for approval to RACGP:

Leave

Change of practice

Change to Australian Medical Registration

Change of working hours

Change to supervisor

Returning from Leave

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## Change in hours continued.

The change in hours form will ask you for your current work hours and your proposed new hours that you will be working each day.

Please ensure you inform your program team of this proposed change.



Practice Name

Street Address

Suburb

State

Postcode

Phone Number

Practice manager name

Practice email address

Current total hours worked per week

List the hours you currently work each day excluding meal breaks (e.g. Monday Session 1 From: 8am Session 1 To: 11.30am) Please use N/A as required

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Session 1 From:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Session 1 To:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Session 2 From:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Session 2 To:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Proposed total hours worked per week

List the new proposed hours you will be working each day excluding meal breaks (e.g. Monday Session 1 From: 8am Session 1 To: 11.30am) Please use N/A as required

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Session 1 From:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

# Change to Australian Medical Registration

If your medical registration changes at any time during your training, you must advise us via the CIC form. If you don't notify us of a change to your registration you may be reported for academic misconduct (refer to the [Academic Misconduct Policy](#)).

It's best to advise us as soon as you know that a concern has been raised about you with Ahpra so we can provide you with the appropriate support. FSP applicants with an Ahpra-approved supervisor and/or an Ahpra-approved training site location must match these for FSP purposes.

Refer to the [Ahpra website](#) for more information about possible outcomes when a concern is raised about you.

A change to your medical registration might include a restriction, condition, limitation, reprimand, supervision requirement, tribunal outcome, suspension, undertaking and/or other remark or change.



## Change to Australian Medical Registration continued.

The change to Australian Medical Registration form will ask you general questions, followed by you providing detailed information regarding the change and a copy of the Ahpra certificate from the [Ahpra website](#)



When did you commence the FSP?

Please indicate which change in circumstance category you wish to submit for approval to RACGP:

- Leave
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- Change to supervisor
- Returning from Leave

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Please describe the changes to your medical registration including status, conditions, notations or undertakings:

Please upload evidence of medical registration (a print out from the AHPRA website is sufficient)

Drop files or click here to upload

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If you have any questions regarding the CIC process, please contact us on the details provided below.

T: [1800 472 247](tel:1800472247)

E: [fspadmin@racgp.org.au](mailto:fspadmin@racgp.org.au)

For Supervisor payments and queries:

E: [fspoperations@racgp.org.au](mailto:fspoperations@racgp.org.au)