

## PEP WBA and Education Activity Guidance Document – Application for Alternatives and Exemptions

**Purpose:** This document is to be used as a Guidance Document when requesting alternatives to or exemptions from WBA during the PEP.

### PEP participant WBA requirements:

It is expected that PEP participants carry out their Work Based Assessment (WBA) whilst on the PEP program. The WBA supports the participant’s development, provides feedback on their program and helps them identify any areas for improvement. A key component of the WBA from the perspective of the participant is the opportunity to reflect on their performance and plan their ongoing learning. The benchmark for all assessment is that is expected of the participant at the point of RACGP Fellowship, giving participants a clear indication of their progress towards the end. Completion of WBA assessments is a requirement for the PEP participant to be issued a Provider Number for the post-education component of PEP, and from January 2022, completion of an RACGP approved Program (as indicated by completion of assessments) is a component of exam eligibility.

Work Based Assessment	What is required – 12 activities per term
Direct Observation (DO) using the Mini-CEX tool	Once per term (minimum four cases)
Clinical Case Analysis (CCA)	Once per term (minimum two cases): <ul style="list-style-type: none"> <li>• Case-based discussion</li> <li>• Random case analysis</li> </ul>
Additional WBA	Once per term: <ul style="list-style-type: none"> <li>• An additional 6 WBA assessments, as a combination of CCA and Mini-CEX (e.g. 2 and 4)</li> </ul>
Multi-source Feedback	Once per program: <ul style="list-style-type: none"> <li>• Colleague Feedback Evaluation Tool</li> <li>• Doctors’ Interpersonal Skills Questionnaire</li> </ul>

### Alternatives and Exemptions requests:

It is a requirement that PEP participants together with their training organisation, *complete their WBA before their program time in PEP ends*. It is essential that the participants and training organisation ensure that this is achieved and inform the RACGP early should there be any concerns completing requirements.

The RACGP is aware that there might be an instance where a training organisation or a participant might:

- i. be unable to complete a WBA in a term;
- ii. be unable to complete at least one DO in-vivo during the PEP;
- iii. have completed the WBA in another GP training program or context recently. This only pertains to the MSF or similar activity.

***In these instances, an [Alternatives and Exemptions Form](#) should be completed***. The PEP Medical Education team will review the request. Each request is reviewed on a case-by-case basis and will consider the recommended activities that the training organisation have suggested.

### Examples

Some of the instances where an alternative option or an exemption for a particular component of the WBA might be considered:

#### ***Direct observation:***

- The training organisation is unable to carry out the direct observation visit due to:
  - The participant's practice location such as an AMDS or remote location
  - Low patient numbers or little variation in patient presentations to a practice for a medical educator to provide useful feedback to the participant
  - The participant might have lost their employment with their current practice and is actively seeking employment at another location
  - A simulated direct observation has been recommended for educational purposes.

If an exemption for a direct observation in-vivo is requested, the training organisation and the participant must ensure that the requirement is met by an alternative modality (e.g. simulation). The financial and practice impact (eg. travel costs, time out of practice) of this is made clear to the participant and they have the choice to either then have a practice visit or complete the DO via an alternative modality. An exemption with regards to 'in vivo' DO should not be applied for prospectively and for the PEP entirety for those participants working exclusively afterhours as their practice circumstance may subsequently change allowing for in vivo DO.

***Multi-source Feedback:***

- A Multi-source feedback (MSF) that is current (within the past three years) that shows performance proximate to the advised benchmarks and includes completion of self-reflection and medical educator debrief. If the MSF is missing self-reflection and/or debrief then this can be done using the previously completed MSF. For the MSF, exemption should be applied for in the first PEP term to allow time for completion of a new MSF if an exemption is declined.