

In-practice teaching and teaching plan

Teaching time

The registrar's designated supervisor is responsible for ensuring that the registrar receives their mandated minimum teaching time, whether from them or another member of the supervisory team.

Teaching time includes both formal and informal teaching activities, and the amount of time required depends on the registrar's stage of training.

Minimum teaching times for each full-time registrar

| GP term | Total time | Included scheduled and uninterrupted time |
|---------|---|---|
| GPT1 | 3 hours per week | 1 hour per week |
| GPT2 | 1.5 hours per week | 1 hour per fortnight or 30 min per week |
| GPT3 | 1 hour per fortnight or 30 min per week | 1 hour per fortnight or 30 min per week |

For part-time registrars, the expected teaching times will be reduced pro rata according to their training time. In part-time GPT1 placements, the one hour scheduled and uninterrupted teaching time should be preserved, even though the expected minimum 3 hours of teaching will be reduced.

Scheduled and uninterrupted formal teaching sessions

Most of the scheduled sessions should be one-on-one teaching that addresses your registrar's individual learning needs, for example, observation of consultations, review of medical records, feedback, assessment, and critical incident review.

Teaching sessions should ideally be scheduled in the first hour of a consulting session or before consulting starts in the morning. Scheduling teaching sessions at lunchtime or at the end of the day is not ideal as these times are prone to interruptions or participants running late.

Not all scheduled teaching sessions need to be delivered by the supervisor. For example, a registrar with learning needs in the initial management of diabetes might sit in with a diabetes educator for an initial consultation with a patient recently diagnosed with diabetes.

How each training site coordinates the provision of teaching will reflect the number and type of learners and educators at the site. A teaching plan includes: a calendar of scheduled teaching activities; required assessment activities, and activities planned to address an identified learning need. It also provides the means to record completed teaching activities.

In-practice teaching activities

General practice training in Australia follows an apprenticeship model with a registrar learning 'on the job'. In this context, a supervisor's prime teaching role is to enhance and deepen the learning that occurs through clinical work.

The teaching you provide will be mainly directed by the individual learning needs of your registrar.

The following teaching methods are used to enhance workplace-based learning.

Direct observation

There is no better way for you to teach consultation and communication skills than by directly observing their interactions with patients. Direct observation, or 'sitting in', is known to be acceptable to the patient, as well as highly regarded as a learning experience by learners. Sitting in on consultations early and often in the training term is strongly encouraged.

Problem case discussion

This teaching method tends to be the predominant method used, especially early in general practice training. Your registrar brings a 'problem case' to discuss with you. This provides an opportunity to teach core knowledge, as well as to improve clinical reasoning skills and management of uncertainty.

Random case analysis

In random case analysis (RCA), a supervisor selects a recent registrar record for discussion. Unlike problem case discussion, where the registrar chooses a patient to discuss, a 'random' selection method allows identification and exploration of areas in which the registrar either doesn't recognise they have a clinical knowledge gap ('unconscious incompetence') or doesn't wish to reveal ('conscious incompetence') they have a knowledge gap. As a result, RCA has educational utility for all stages of learners, and across all levels of competence. Although RCA can be used to explore all domains of general practice, it is a particularly effective method for exploring a registrar's clinical reasoning and record-keeping skills.

Inbox review

Reviewing test results by going through a registrar's email inbox is an effective way of monitoring rational test ordering and provides a lead-in to a broader case discussion. Inbox review is valuable for exploring how a registrar is managing uncertainty and their understanding of the appropriate use of screening tests.

Teaching topics

There is no requirement to provide specific topic tutorials as part of in-practice teaching. However, if it meets the registrar's learning needs, discussion of a topic may be appropriate. There are many helpful resources for teaching a topic, including:

- the [2022 RACGP curriculum and syllabus for Australian general practice](#) that is designed for use by registrars and educators and can be a useful resource for a supervisor's teaching. It supports your role as a 'meaning maker' – helping with the application of knowledge rather than being a transmitter of knowledge. There are 42 units covering important general practice clinical presentations and patient populations. Each one includes a case consultation example and learning strategies that are specifically designed for use with supervisors. None of these are mandatory to use in practice but may complement the registrar's work-based learning.
- GPSA has [teaching plans](#) that cover a wide range of clinical presentations.

Registrars are also provided with out-of-practice educational activities during their training. Being aware of the content of these activities may help inform the in-practice teaching plan.

Informal teaching activities

In addition to the scheduled uninterrupted teaching, activities that make up the balance of the mandated teaching time for GPT1 and GPT2 registrars may include:

- orientation to the practice
 - opportunistic and planned case discussions during and at the end of the day
 - group teaching sessions with other registrars and students
 - procedural skills education
 - cultural education
 - provision of feedback
 - completion of assessments
 - evaluation of teaching
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Teaching plan

This document is for use between the designated supervisor and the registrar. It should be made available to all members of the supervision team. The teaching plan is completed by the designated supervisory and documents when teaching will occur and any intended activities during the teaching session. It is not the same as a learning plan which might be completed by a registrar to record their learning needs and how they plan to address these.

Dedicated teaching time should be scheduled for a time that is not likely to be interrupted or subject to the participants running late. Try to avoid lunchtimes and end of the day. First thing in the morning or the start of a session will work better.

| Practice name | Registrar name | Designated supervisor |
|---------------|----------------|-----------------------|
| | | |

Teaching session schedule

When and where is the dedicated teaching time routinely scheduled, and who will be delivering this teaching.

Practices, particularly those with multiple supervisors, may find it useful to keep a calendar or chart to display activities each week. This will also act as a prompt to plan at least a week ahead. Required assessment activities can be scheduled well ahead of time. Either use the document below or create your own in-practice teaching plan document.

Teaching activity schedule

| Week | Date | Time | Activity/content | By whom |
|------|------|------|--|---------|
| 1 | | | <i>E.g. Orientation plan. Consultation observation for early safety assessment</i> | |
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