Standard 1 - The registrar is suitable and ready to commence in a general practice training program

Rationale

Commencement into a training program requires:

- candidates to be fully informed about the program in order to make an informed decision about their career choice and application for training
- an entry process that aims to select candidates based on eligibility and suitability for commencement in general practice training in that they are likely to be successful in achieving Fellowship and become competent GPs.

Selection processes may vary between programs, but the overall principles are consistent. These include that:

- assessment is valid, reliable, merit based and free from discrimination or bias
- processes are regularly reviewed and evaluated to ensure they remain valid, reliable and equitable, ensuring that biases are addressed.

Each registrar brings their own professional and life experiences. This includes their experiences in undergraduate training, previous work as a medical practitioner in Australia or overseas or transferable skills from a different career. These different life experiences mean registrars begin their program at different levels of competence.

The training program must ensure that a registrar has essential competencies to commence in general practice. The Progressive capability profile of the general practitioner describes a set of competencies that the doctor is expected to be able to demonstrate to commence in general practice at the Entry milestone. The competencies include clinical skills, such as the ability to identify and manage red flags and emergencies, and professional skills and behaviours, such as the ability to self-reflect, communicate clearly and respectfully with others, and cultural awareness. There is good evidence that prior unprofessional behaviour correlates with future unprofessional behaviour and consequent disciplinary action by medical boards. Essential competencies can also relate to breadth of experience and exposure to patient populations with specific attributes.

There is some evidence that selection assessments can predict later performance in exams. ^{2,3} Performance in the selection assessments, and details from selection, such as previous experience, provide a baseline for registrars, supervisors and medical educators. The baseline assists in planning an individual learning program and is used in future assessments to determine progression through the training.

Outcome	Criteria
1.1 Training program details are clear, transparent and accessible	1.1.1 Details about the training program are publicly available
	1.1.2 Requirements for eligibility into the training program, including any exemptions, are clearly communicated to the candidate prior to selection

Guidance

Information about a program may be available in a variety of formats, but must include:

- time required to complete the program
- costs of the program
- training opportunities, including flexibility in working and training arrangements and options to extend skills; this may include catering to specific circumstances (eg cultural needs)
- career and program supports, including case management, available within the program for specific groups (eg registrars working in rural areas, Aboriginal and Torres Strait Islander registrars, international medical graduates (IMGs) and registrars with additional needs)
- any mandatory requirements within the program (eg training in rural, remote or outer metropolitan areas)
- support for educational or professional concerns
- the selection process and the eligibility criteria for selection
- any prerequisites, such as the competencies and experience required to commence training at a general practice training site
- recognition of prior learning and experience (RPLE) opportunities
- pastoral and educational supports and mentorship available in the program
- educational program, including mode of delivery
- circumstances in which removal from the program may occur.

Outcome	Criteria
1.2 The process for selection ensures that selected candidates are supported, eligible and have the competencies required to commence training	1.2.1 The selection process is in accordance with national and international standards for postgraduate training
	1.2.2 The selection process is clear, transparent and accessible
	1.2.3 Selection is based on the expected RACGP competencies at the point of commencement, including the professional attributes expected of a doctor entering general practice training
	1.2.4 Selection supports access for Aboriginal and Torres Strait Islander doctors to train in general practice
	1.2.5 Selection supports access for candidates to train in areas of workforce need

Guidance

- Candidates must be informed of the selection criteria, and the processes for selection, including those related to reconsiderations or appeals of decisions made.
- The selection process will include an assessment of both eligibility and capability. Eligibility is about having the required credentials and prior experience. Capability is about having the competencies required to commence RACGP training for Fellowship as detailed at the Entry milestone in the *Progressive capability profile of the general practitioner*. These competencies include knowledge, skills and attitudes. Professional attitudes are particularly important to assess.
- Candidates who identify as Aboriginal and Torres Strait Islander doctors or those who wish to train in an area of workforce need may be given particular consideration and support in the selection process. This is in line with the National Agreement on Closing the Gap⁴ and workforce initiatives.

Outcome	Criteria
1.3 The registrar is ready to commence training	1.3.1 The registrar demonstrates eligibility to commence training
	1.3.2 The registrar demonstrates achievement of the required competencies, including the essential safety requirements, before commencing at a general practice training site
	1.3.3 Assessment of the registrar's competence and suitability for commencing training informs the selected registrar's training plans
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Guidance

- Commencement of training requires the candidate to have met the eligibility and selection criteria of the program.
- Evidence of the competencies required must be documented and available to registrars and the program team.
- In some programs, where there is the option to complete further hospital training, selection may focus
 on eligibility and registrar ability to meet the baseline defined competencies before commencing in
 general practice.
- Where the training program requires the registrar to commence directly into a general practice, the
 registrar needs to meet the competencies described in the Entry milestone of the *Progressive capability*profile of the general practitioner, and the training program could provide details about how these
 competencies would be met.

Related policies and resources

Policies

- Training program requirements policy
- Training program entry policy
- · Dispute, reconsideration and appeals policy
- GP in training diversity, equity and inclusion policy
- Training transfer policy

Resources

• Progressive capability profile of the general practitioner

RACGP Standards for general practice training (4th edition)

Suggested evidence

Supporting documentation

- · Selection criteria
- Details of the selection process, which may included process map or work instruction
- Policies and procedures related to the selection process
- Outlines of information sessions or other communications that detail the selection process, including web-accessible information
- Information on mandatory requirements
- Outline of the training or support offered to interviewers/assessors, including recognising bias
- Processes for assessing selection competencies
- Advice about and documentation of completion of basic life support (BLS) and advanced life support (ALS) courses
- Handbooks

References

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- 2. Heggarty P, Teague PA, Alele F, Adu M, Malau-Aduli BS. Role of formative assessment in predicting academic success among GP registrars: A retrospective longitudinal study. BMJ Open 2020;10(11):e040290. doi: 10.1136/bmjopen-2020-040290.
- 3. Stewart R, Cooling N, Emblen G, et al. Early predictors of summative assessment performance in general practice post-graduate training: A retrospective cohort study. Med Teach 2018;40(11):1166–74. doi: 10.1080/0142159X.2018.1470609.
- 4. Commonwealth of Australia, Department of the Prime Minister and Cabinet. National Agreement on Closing the Gap. Australian Government, 2020. Available at https://www.closingthegap.gov.au/national-agreement/national-agreement-closing-the-gap [Accessed 9 August 2023].

Table of standards, outcomes and criteria

A downloadable version of the table of standards, outcomes and criteria will be available on the webpages.

Standard 1 – The registrar is suitable and ready to commence in a general practice training program

Outcome	Criteria
1.1 Training program	1.1.1 Details about the training program are publicly available
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selected candidates are supported, eligible and have	1.2.2 The selection process is clear, transparent and accessible
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	1.2.5 Selection supports access for candidates to train in areas of workforce need
1.3 The registrar is ready	1.3.1 The registrar demonstrates eligibility to commence training
to commence training	1.3.2 The registrar demonstrates achievement of the required competencies, including the essential safety requirements, before commencing at a general practice training site
	1.3.3 Assessment of the registrar's competence and suitability for commencing training informs the selected registrar's training plans

Glossary

Areas of need	An area of need refers to a community or population group that has particular health needs that may be related to the population itself or to its access to health and other services.
Career advice	This refers to advice and information provided to an individual about their career, including a career in medicine and/or a career in general practice.
Continuing professional development	The RACGP describes continuing professional development as the learning activities that GPs engage in to develop, maintain and enhance their professional skills.
Cultural safety and competence	Cultural safety is determined by Aboriginal and Torres Strait Islander individuals, families and communities. Culturally safe practice is the delivery of safe, accessible and responsive healthcare free of racism through a health practitioner's ongoing critical reflection about knowledge, skills, attitudes, practising behaviours and power differentials.
Direct supervision	The supervisor has oversight of every case. Cases are reviewed by observing consultations, reviewing a consultation before the patient leaves, or reviewing consultation notes with the registrar.
High-stakes decisions	High-stakes decisions are those that have significant consequences in terms of progression towards and attainment of completion of a course.
Indirect supervision	The supervisor does not review every case. Cases are brought for supervisor review by the registrar according to an agreed clinical supervision plan. The adequacy of the supervision plan is monitored by periodically conducting a review of a selection of cases.
In-practice education	This refers to education that takes place in community general practice under supervision.
Medical registration addenda	Medical registration addenda include, but are not limited to, restrictions, conditions, limitations, reprimands, supervision requirements, tribunal outcomes, suspensions, undertakings and/or any other remarks or changes on a Registrar's medical registration. See Ahpra's website for more information.
Mentor/mentoring	A mentor is someone who can answer questions and give advice. They share what it means to be a GP and is someone who listens and stimulates reflection.
Out-of-practice education	Education that occurs outside of regular clinical practice, including workshops, self-directed learning, peer learning and exam preparation.
Pastoral care and support	Care that assists an individual to maintain their intellectual, emotional, physical, social and psychological wellbeing. Such care respects individuality, diversity and dignity.

Priority placements Placements that prioritise certain cohorts of registrars based on predetermined criteria. Random case analysis Random case analysis (RCA) is the term used for the discussion of a recent registrar consultation selected by the supervisor. Importantly, the record is chosen by the supervisor (hence, 'random'), involves a discussion (hence, 'case' rather than 'record') and considers the decisions and outcomes of the consultation (hence, 'analysis'). RCA is a well-established tool for teaching and supervision in general practice training. Remote supervision Supervision is primarily provided by a supervisor who is offsite, using a model of supervision that provides comprehensive and robust support and training. Remote supervision may be considered when onsite supervision cannot be provided by an accredited supervisor. Special training environments Special training environments (STEs) are sites that offer training opportunities with a limited case mix and different operational arrangements. ADF bases are considered STEs because ADF registrars may train there for some training time, but the site does not offer the full range of patient ages and presentations expected of comprehensive general practice. Stakeholders A stakeholder is an individual or organisation that has an interest in the training program and can either affect or be affected by the program. Training sites A health service accredited by the RACGP where the registrar may undertake their general practice training. Underserved populations Groups within our population who experience disadvantages and higher rates of illness and death than the general population through inadequate access to medical care. Examples include, but are not limited to, people who live in rural and remote areas, the elderly, those with low literacy, people living in lower socioeconomic areas, Aboriginal and Torres Strait Islander peoples and people involved in the justice system. Workplace-based Observation and assessment of a registrar's practice to tra		
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Acronyms

ADF	Australian Defence Force
AGPT	Australian General Practice Training
Ahpra	Australian Health Practitioner Regulation Agency
ALS/BLS	Advanced life support / basic life support
AMC	Australian Medical Council
AMS	Aboriginal Medical Service
ARST	Advanced rural skills training
CPD	Continuing professional development
FSP	Fellowship Support Program
IMG	International medical graduate
MBA	Medical Board of Australia
PEP	Practice Experience Program
QA	Quality assurance
QI	Quality improvement
RACGP	The Royal Australian College of General Practitioners
RG	Rural generalist
RVTS	Remote Vocational Training Scheme
WBA	Workplace-based assessment