

# Standard 8 – The registrar completes the training program and is eligible to apply for Fellowship

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## Rationale

The end point of training is to be admitted to Fellowship. At this point, the registrar is certified as competent to work unsupervised in comprehensive general practice anywhere in Australia and is eligible for Ahpra registration as a specialist GP. Registrars completing the program will have the required clinical skills, professional attitudes and behaviours expected of a competent Australian GP. The competency expected at the point of Fellowship is defined by the Statement of Fellowship Outcomes in the [Progressive capability profile of the general practitioner](#).

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Outcome	Criteria
<b>8.1 The registrar is competent to commence working as an unsupervised specialist GP in Australia having met RACGP requirements for Fellowship</b>	8.1.1 The registrar has demonstrated satisfactory completion of the educational and training requirements of the training program
	8.1.2 The registrar has successfully completed all assessments
	8.1.3 The registrar has demonstrated the professional behaviour expected by the RACGP and the public of a GP practising in Australia

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## Guidance

To be admitted to Fellowship, it is expected that the registrar must have completed:

1. The requirements for Fellowship as defined in policy and detailed in the relevant handbooks. This will require satisfactory completion of all components of the training program and the RACGP summative assessments.
2. Sufficient experience in comprehensive general practice.
3. A standard of professionalism as expected by the profession, professional colleagues and the community and defined by the [Good medical practice: a code of conduct for doctors in Australia](#) from the Medical Board.

Registrars are expected to hold medical registration without addenda at the time of applying for Fellowship. In instances where there are addenda, the application for Fellowship will be considered by the Council of Censors in line with the *Fellowship policy*.

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## Relevant policies and resources

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### Policies

- *Requirements for Fellowship policy*
- *Fellowship policy*
- *Fellowship exams policy*

### Resources

- RACGP Constitution
- RACGP membership code of conduct
- *Good medical practice: A code of conduct for doctors in Australia*

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## Suggested evidence

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- Completion of training processes
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# Glossary

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<b>Areas of need</b>	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.
<b>Career advice</b>	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.
<b>Continuing professional development</b>	The RACGP describes continuing professional development as the learning activities that GPs engage in to develop, maintain and enhance their professional skills.
<b>Cultural safety and competence</b>	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.
<b>Direct supervision</b>	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.
<b>High-stakes decisions</b>	High-stakes decisions are those that have significant consequences in terms of progression towards and attainment of completion of a course.
<b>Indirect supervision</b>	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.
<b>In-practice education</b>	This refers to education that takes place in community general practice under supervision.
<b>Medical registration addenda</b>	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 <a href="#">Ahpra's website</a> for more information.
<b>Mentor/mentoring</b>	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.
<b>Out-of-practice education</b>	Education that occurs outside of regular clinical practice, including workshops, self-directed learning, peer learning and exam preparation.
<b>Pastoral care and support</b>	Care that assists an individual to maintain their intellectual, emotional, physical, social and psychological wellbeing. Such care respects individuality, diversity and dignity.

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<b>Priority placements</b>	Placements that prioritise certain cohorts of registrars based on predetermined criteria.
<b>Random case analysis</b>	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.
<b>Remote supervision</b>	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.
<b>Special training environments</b>	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.
<b>Stakeholders</b>	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.
<b>Training sites</b>	A health service accredited by the RACGP where the registrar may undertake their general practice training.
<b>Underserved populations</b>	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.
<b>Workplace-based assessment</b>	Observation and assessment of a registrar's practice to track progression through training.

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# Acronyms

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