

registrar handbook

2012.1



gp training in paradise



north coast
GP training

This handbook is to be read in conjunction with the Australian General Practice Training - Guide for GP Registrars published by Australian General Practice Education and Training, available at www.agpt.com.au/Registrars/Guide/

Table of Contents

Table of Contents	2
welcome	5
registrar checklist	7
acronyms throughout the handbook	9
1.0 introduction to north coast gp training	11
1.1. Overview	11
1.2. North Coast GP Training staff	13
1.3. North Coast GP Training Board	14
1.4. North Coast GP Training membership	16
1.5. Australian Standard Geographical Classification - Remoteness Areas system (RA)*	17
2.0 the north coast region	19
3.0 overview of the australian general practice training program	21
3.1. Mandatory hospital experience	22
3.2. GP Term 1 (GPT1)	24
3.3. GP Term 2 (GPT2)	26
3.4. GP Term 3 (GPT3)	27
3.5. Extended skills in General Practice	28
3.6. Practice allocation process	29
3.7. Summary of training matrix	30
3.8. AGPT program end point qualifications and fellowships	31
3.9. FRACGP and ACRRM vocational training – comparison table	32
4.0 other important aspects of the agpt program	33
4.1. Aboriginal health training	33
4.2. Emergency training	34
4.3. Academic posts	35
4.4. Mandatory elective units	36
4.5. Other elective training	37
4.6. Recognition of prior learning (RPL)	38
4.7. Re-enrolment	39
4.8. Remuneration	40
4.9. Applying for completion of training and fellowship	41
4.10. Extension of training while awaiting fellowship	42
4.11. AGPT Leave policy	43
5.0 roles and responsibilities	45
5.1. Responsibilities of the registrar	45
5.2. Responsibilities of Director of Training to the registrar	46
5.3. Responsibilities of medical educators to the registrar	47
5.4. Responsibilities of supervisors and the practice to the registrar	48
5.4.1. Practice based supervision and teaching	48

5.4.2.	Educational release	49
5.4.3.	Provision of feedback	49
5.4.4.	Number, range and type of registrar services (case load and case-mix)	49
5.4.5.	Employment of the registrar	50
6.0	registrars in the practice	51
6.1.	Training practices	51
6.2.	National minimum terms and conditions	52
6.3.	Registrar medical indemnity insurance	53
6.4.	Registrar medical registration	54
6.5.	Registrar Medicare provider numbers	55
6.6.	Admitting rights	56
7.0	communication	57
7.1.	Addresses	57
7.2.	www.ncgpt.org.au	58
7.3.	The North Coast Post	59
7.4.	Study groups	60
7.5.	Who to contact	61
8.0	education and training resources	63
8.1.	Curriculum	63
8.2.	Learning planner	64
8.3.	Electronic Resources	65
8.4.	Texts	66
8.5.	NCGPT resource library	67
8.6.	GPLearning	68
8.7.	RRMEO	69
8.8.	RACGP John Murtagh library	70
8.9.	Australian Family Physician (AFP)	71
8.10.	Continuous Home Evaluation Clinical Knowledge (CHECK) program	72
9.0	registrar assessment and evaluation	73
9.1.	Training appraisal (TA) visits	73
9.2.	Formative Assessment and Clinical Teaching (FACT) visit	74
9.3.	Full day release and workshop evaluations	75
9.4.	Direct observation of registrar (by a supervisor)	76
9.5.	Feedback	77
10.0	racgp fellowship (fracgp)	79
11.0	acrrm fellowship (facrrm)	81
12.0	opportunities for other qualifications and experience	83
12.1.	Hospital	83
12.2.	Academic	84
12.3.	Extended skills training	85
12.4.	Advanced Rural Skills Post (ARSP) RACGP	86

12.5.	Aboriginal health training posts	87
12.6.	GP Procedural Training Program (GPPTP)	88
12.7.	Fellowship in Advanced Rural General Practice (FARGP)	89
12.8.	Enhanced rural training	90
12.8.1.	Emergency courses	90
12.8.2.	Other courses to extend skills	91
13.0	important dates	93
13.1.	NCGPT educational calendar	93
13.2.	FRACGP examination dates	95
13.3.	FACRRM examination dates	96
14.0	registrar support	97
14.1.	Financial assistance	97
14.1.1.	Relocation assistance	97
14.1.2.	Rental assistance	97
14.1.3.	Travel and accommodation (training related)	97
14.1.4.	Course fees	97
14.1.5.	General Practice Rural Incentive Payments Scheme (GPRIPS)	97
14.1.6.	HECS reimbursement scheme	99
14.2.	Registrar safety	100
14.3.	Registrar well-being	101
14.4.	Remediation	102
14.5.	Registrar and supervisor dispute resolution	103
14.6.	Registrar criteria for transfer	104
15.0	registrar representation	107
15.1.	Registrar Liaison Officer(s) (RLO)	107
15.2.	Registrar Support Officer (RSO)	108
15.3.	General Practice Registrars Australia (GPRA)	109
16.0	commonly asked questions	111
17.0	attachments	115
17.1.	Attachment one: NCGPT privacy policy use of personal information	115
17.2.	Attachment two: General Practice Training Program national minimum terms and conditions for GPT1 and GPT2 registrars 2011	117

welcome

Welcome to the Australian General Practice Training Program on the north coast of New South Wales.

This handbook is for registrars training with North Coast GP Training.

North Coast GP Training offers lifestyle flexibility in a sought after location as well as high quality, innovative GP training in a rural environment.

In this package you will find information you may require during the course of your training with North Coast GP Training.

Remember we are here to support you. Please contact the team at any time for any assistance, advice or just for a friendly chat.

After reading through this handbook please use the registrar checklist following this page and ensure you complete all necessary program requirements.

We believe you have made a fantastic choice in joining us and we hope you agree.

We wish you a successful and happy time with North Coast GP Training.



John Langill
Chief Executive Officer

registrar checklist

- For information on your training sessions, check the educational calendar at www.ncgpt.org.au. These sessions are compulsory (unless otherwise stated). Ensure you arrive promptly and sign in.
- Check your email regularly for important information on your education and training. If you do not have an email address please contact the Registrar Support Officer at NCGPT.
- Set dates at commencement of the term with the supervisor to evaluate learning plans and progress.
- Attend a meeting with your medical educator or training advisor to discuss your term (four weeks into your term). NCGPT will contact you to arrange this meeting.
- Commence and/or maintain log book of educational activities, training, procedural skills and certifications.
- Commence and/or maintain learning planner. Discuss with your supervisor at weeks four, 12 and 20.
- Know your essential texts - purchase them or use the NCGPT libraries.
- Apply for any scholarships or allowances you might be eligible for. See section 14.1 Financial assistance for further information on funding opportunities.
- Book early for courses such as EMST, ALS and APLS as they are often booked out well in advance. See section 12.8.1 Emergency courses for further information on these courses.
- Apply for recognition of prior learning within the first six months of training.
- If pursuing the Fellowship of ACRRM please contact ACRRM and work with your medical educator to determine your RPL status for ACRRM Fellowship (within the first 12 months of entry into the training program).
- Enrol early in FARGP if you are intending to attain this fellowship.
- Submit claim forms for half day release workshop attendance (as required).
- Re-enrol for each training year (re-enrolment takes place in December of each year).
- Prior to the commencement of each term complete and return the Application for a Medicare Provider Number and Application for a General Practice Registrar placement.
- Prior to the commencement of each term ensure both your medical registration and medical indemnity insurance's are current.
- Contact North Coast GP Training T: 02 6681 5711 or speak with your supervisor if you have any questions or require assistance regarding any aspect of your training.
- Attendance at educational events is mandatory.
- NCGPT must be informed immediately of any change in term or employment conditions/hours.**
- All NCGPT Practice Registrars will be provided with a subscription to Up to Date for 2 years.
- Arrange your doctor's bag equipment and drugs. Registrars are expected to provide their own stethoscope, auroscope and ophthalmoscope. GPT1 registrars should discuss equipment needs with their supervisor.
- Registrars will be provided with a NCGPT dermatoscope for use during their first year of training. It must move with the registrar if they change practices after the first six months. It must be returned to NCGPT at the end of the twelve months.

acronyms throughout the handbook

AGPT

Australian General Practice Training

ACRRM

Australian College of Rural and Remote Medicine

RACGP

Royal Australian College of General Practice

DOT

Director of Training

ME

Medical Educator

RLO

Registrar Liaison Officer

RSO

Registrar Support Officer

RPL

Recognition of Prior Learning

FACT

Formative Assessment and Clinical Teaching

TA

Training Appraisal

AHPRA

Australian Health Practitioner Regulation Agency

CEO

Chief Executive Officer

ES

Extended Skills

ARSP

Advanced Rural Skills Post

FARGP

Fellowship of Advanced Rural GP

AST

Advanced Skills Training

CCT

Core Clinical Training

1.0 introduction to north coast gp training

1.1. Overview

North Coast GP Training Ltd (NCGPT) was established in December 2002 under a Commonwealth Government initiative to provide regionally based, vertically integrated innovative general practice vocational education.

An award winning GP regional training provider, North Coast GP Training has won national awards for:

- GPET Regional Training Provider of the Year
- GP Training Curriculum Innovation Award
- Staff Excellence Award
- Innovation Award
- GPET GP Registrar of the Year
- RACGP National Rural Faculty GP Registrar of the Year
- GPET Supervisor of the Year
- ACRRM Rural Registrar of the Year

Our Vision

Through excellence and progressive approaches to general practice training, NCGPT aspires to a future where all North Coast communities have access to high quality GP centered primary care.

Our Mission

North Coast GP Training is dedicated to delivering personalised, supportive and innovative general practice education and training to the general practice workforce and to contributing to better health outcomes for the communities of the NSW north coast through:

- Attracting, training and retaining highly skilled, enthusiastic and committed GP registrars
- Delivering the highest quality education and support to our program participants, their supervisors and training practices
- Working in partnership with others to provide integrated, sustainable and innovative training programs.

Core values

- Respect for our program participants, colleagues and stakeholders
- Integrity in our actions and interactions with others
- Support for those in our programs, our staff and our partner organisations
- Excellence in all that we do

Geographical boundaries

The North Coast GP Training region stretches from Laurieton in the south to the Queensland border in the north and west to the Great Dividing Range.

Governance

NCGPT is a membership based organisation with a board of directors elected by independent GPs working in the North Coast region.

Regional offices

The head office of NCGPT is based in Ballina with regional offices and staff in Coffs Harbour and Port Macquarie

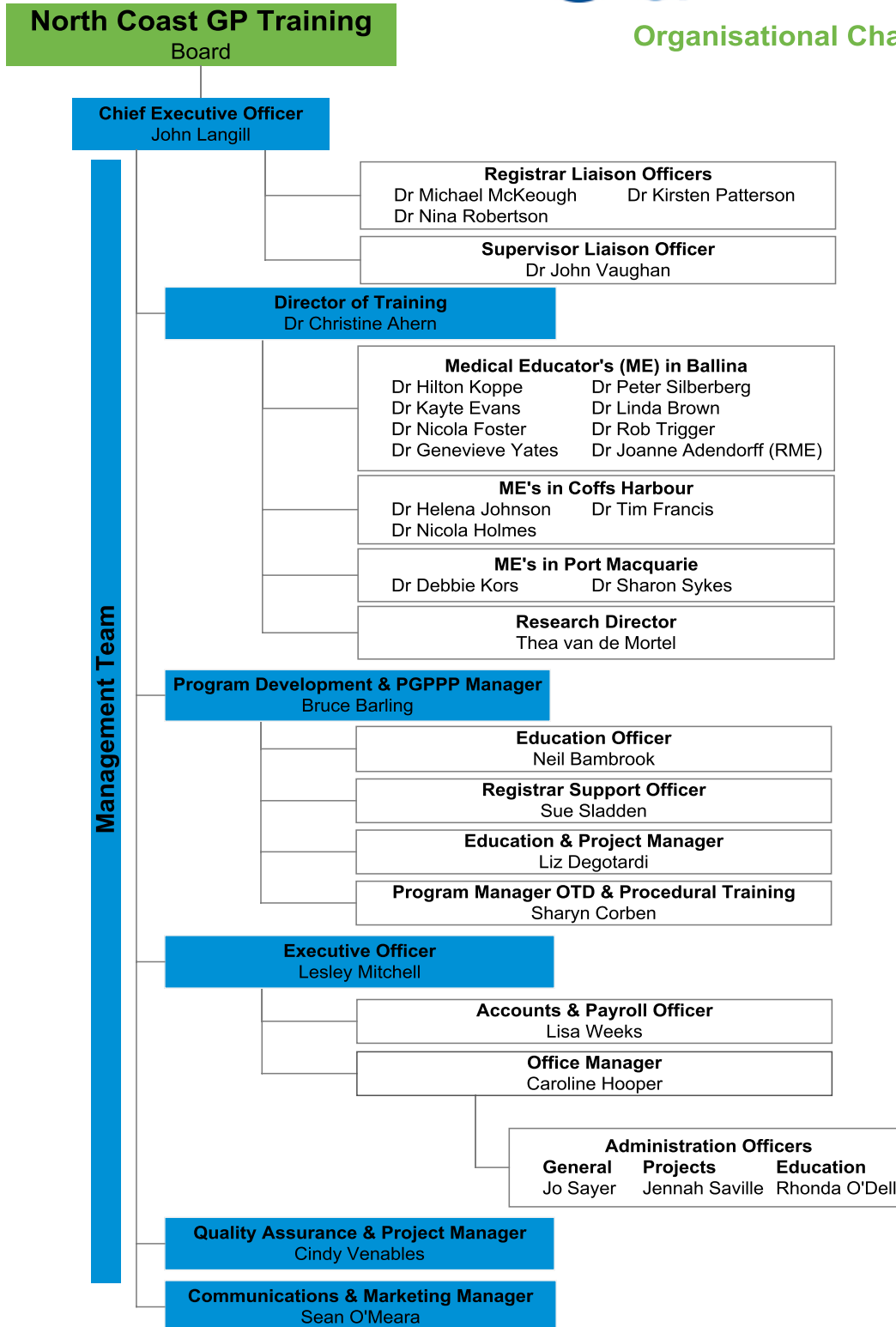


1.2. North Coast GP Training staff

North Coast GP Training employ a range of professional and qualified staff to ensure the needs of the training program are met. The organisational structure is as follows:



Organisational Chart



1.3. North Coast GP Training Board

North Coast GP Training is a membership organisation with a board consisting of independent GPs and one non-GP member elected by the regional membership.

The Directors are based throughout the Hastings Macleay, Mid North Coast, Northern Rivers and Tweed Valley areas.

The Board of Directors guide the current and future direction of general practice training on the north coast. The current board members are:

Dr David Gregory (Chair)

Dr Nick De Marco (Director)

Dr Chris Jambor (Deputy Chair)

Dr Sue Page (Director)

Dr John Kramer (Director)

Dr John Moran (Director)

Dr Tim Francis (Director)

Mr Gary Southey (Director)

North Coast GP Training team

North Coast GP Training employs a range of staff to ensure that registrar's training needs are met. The role of the training team is to help registrars achieve their learning objectives, advise registrars on their training needs, undertake Formative Assessment and Clinical Teaching (FACT) visits and provide education programs and activities for registrars and supervisors. NCGPT also works closely with General Practice Education and Training (GPET), the Royal Australian College of General Practitioners (RACGP) and the Australian College of Rural and Remote Medicine (ACRRM) to ensure the training program is relevant and up to date with the standards set out by the aforementioned bodies.

Director of Training (DOT)

The Director of Training is an experienced GP who coordinates the activities of the medical educators. While this position is based in Ballina, the DOT provides advice and information about training needs to registrars in all regions.

Regional Medical Educators (ME)

NCGPT medical educators are all experienced GPs with educational experience. They are based in Ballina, Coffs Harbour and Port Macquarie. Regional medical educators organise and facilitate workshops, full day educational release programs, undertake visits to the registrars practice, provide professional support and offer assistance and progress reports. Their primary role is to help registrars achieve the stated learning objectives of training. The medical education team also assist and advise supervisors on the requirements of their role as supervisors for NCGPT. Medical educators and the Director of Training may be approached at any time for advice during training or on matters affecting training.

Education Officer (EdO)

The education officer, based in Ballina, assists the Director of Training and medical educators to develop and maintain a high quality training program. The education officer is also responsible for coordinating workshops, the day release program and learning planners.

GP Supervisors

NCGPT supervisors are selected, experienced GPs who work in RACGP, ACRRM and NCGPT accredited training practices. As this is a vocational training program, GP supervisors provide the majority of the teaching to GPT1 and GPT2 registrars. They provide registrars with one on one teaching, close supervision, support, feedback and advice. They also provide general support and guidance to registrars especially in familiarising the registrar with the local area and support to assist the registrar and their family.

Registrar Support Officer (RSO)

The Registrar Support Officer is based in Ballina and is the key point of contact and support for NCGPT registrars and their families with regards to their placement in communities throughout the NCGPT region. The RSO also maintains data entry, organises social events and assists registrars as needed.

GP Mentors

NCGPT mentors are experienced GPs who provide registrars in GPT3 and GP Extended Skills with guidance, supervision and practical help.

Consultants and specialists

A variety of other staff are employed by NCGPT who have expertise in a particular field. These people include medical specialists, Aboriginal Cultural educators and consultants.

For further information on the training team see www.ncgpt.org.au/the-crew

1.4. North Coast GP Training membership

Becoming a member of North Coast GP Training allows you to take more than just a passing interest in your training. NCGPT values its members and the contributions they make.

Membership is available to general practitioners who:

- a) Live within the region and are supervising or training registrars, medical students or PGPPP
- b) Are registrars in vocational training for general practice
- c) Are undertaking (or been accepted to undertake) approved continuous professional development activities.

Benefits of membership:

- a) Elect the Board of NCGPT
- b) Greater choice and flexibility in designing a career path
- c) Innovation and choice in the way training is delivered and managed in the region
- d) Ability to make and extend links for lifelong learning via university and division involvement in training
- e) Industry representation - a forum to express views, concerns and issues
- f) Access to NCGPT library
- g) Receive NCGPT publications.

Membership is free. An application form has been provided for you with your welcome pack. Contact the NCGPT Registrar Support Officer (RSO) if you do not have a membership application form and would like to become a member.

1.5. Australian Standard Geographical Classification - Remoteness Areas system (RA)*

Please note: not all towns listed below have an accredited GP training practice. General registrars can be placed anywhere within the NCGPT region. Registrars on the rural pathway are restricted to locations RA2 and RA3, as listed below.

RA 1

Tweed Heads

RA 2

Lismore, Nimbin and Goonellabah, Port Macquarie (including Laurieton & Wauchope) Alstonville, Ballina, Casino, Coffs Harbour, Grafton, Lennox Head, Woolgoolga, Bangalow, Brunswick Heads, Byron Bay, Coraki, Evans Head, Harwood Island, Iluka, Kempsey, Kyogle, Maclean, Mullumbimby, Murwillumbah, Ocean Shores, Woodburn, Yamba.

RA 3

Bellingen, Dorrigo, Nambucca Heads, Bonalbo, Urbanville, Woodenbong, South West Rocks.

*** Please note that as of 1st July 2010 the RRMA classification system has been replaced with the Australian Standard Geographical Classification - Remoteness Areas system (RA).**

2.0 the north coast region

The north coast region is a vibrant blend of people, landscapes, rural and regional lifestyles.

The region is renowned as a surfing nirvana and for its exuberant identity, performing arts (e.g. music festivals), crafts, colourful weekly markets, fresh produce and leisure activities.

This combination of cultural and physical appeal has made the north coast the state's fastest growing region and a draw card for travellers from Australia and overseas.

The north coast is blessed with a sub tropical climate. Average summer and winter temperatures are 27 and 18 degrees Celsius respectively.

The region is serviced by airports in Port Macquarie, Grafton, Coffs Harbour, Ballina and Lismore with international airports at Coolangatta and Brisbane.

People move to this region for a more relaxed way of life. They experience all the benefits of rural or regional living, yet are still within driving distance of Sydney, Brisbane or the Gold Coast for weekend breaks.

The NCGPT region has a population of approximately 488 538 and covers a geographical area of 35 813 sq. kms.

There is one area health service in the region - The North Coast Area Health Service (NCAHS).

There are four networks/divisions of general practice within the NCGPT region:

- Tweed Valley General Practice Network (TVGPN)
- Northern Rivers General Practice Network (NRGPN)
- Mid North Coast Division of General Practice (MNCDGP)
- Hastings Macleay General Practice Network (HMGPN)

They are primarily responsible for supporting GPs in their role as providers of health care and ensuring effective interaction with other health services, community groups and the public.

There are 21 hospitals in the region. These hospitals are of varying levels ranging from large base hospitals e.g. Lismore to smaller district hospitals e.g. Ballina.

There are approximately 500 general practitioners working in the area and approximately 70 GP registrars at any given time. A high standard of health is provided to the community, and training in the north coast practices and hospitals is excellent.

There are two university departments operating in the region – Northern Rivers University Department of Rural Health (NRUDRH) based in Lismore, and the University of NSW Rural Clinical School campuses based in Coffs Harbour and Port Macquarie.

NCGPT registrars are expected to live within the north coast region.

See <http://www.ncgpt.org.au/visit-the-north-coast> for further information on the beautiful north coast region.

3.0 overview of the Australian general practice training program

The Australian General Practice Training Program (AGPT) takes a minimum of three years full time to complete. Part time training is also supported by NCGPT.

RACGP requirements

Registrars are required to satisfactorily complete 12 approved training units (normally requiring three years of training). Each training unit is equivalent to three months full-time training.

1st yr	Mandatory hospital term* (12 months, four units).
2nd yr	GPT1 (six months, two units) and GPT2 (six months, two units)
3rd yr	GPT3 (six months, two units) and extended skills term (six months, two units)

AND

	Fellowship Royal Australian College of General Practitioners examination (FRACGP)
4th yr (optional)	Fellowship in Advanced Rural General Practice (FARGP) (two Advanced Rural Skills Posts each six months, two units).

* Registrars who come to our region with considerable hospital experience may apply for recognition of prior learning (RPL) which may reduce training time by up to one year (see section 4.6 Recognition of prior learning). RPL must be approved prior to applying to sit for the FRACGP exam.

Note: all registrars are required to complete the Aboriginal health curriculum and an approved advanced life support course.

Successful completion of the Fellowship Royal Australian College of General Practitioners exam (FRACGP) is a requirement for all registrars. Training for the FRACGP takes a minimum of three years. After six months of full time equivalent, supervised general practice terms (providing requirements for the hospital term have been met), registrars may sit the first component of the FRACGP.

The Fellowship of Australian Rural General Practice (FARGP), an extended fellowship with a rural focus, may also be achieved via the NCGPT training program. Completion of the FARGP involves a fourth year of training. For detailed information on the Australian General Practice Training Program please refer to the 'Australian General Practice Training - Guide for GP Registrars' published by General Practice Education and Training (GPET). This guide can also be downloaded from www.agpt.com.au

ACRRM requirements

Training towards a Fellowship of the Australian College of Rural and Remote Medicine (FACRRM) registrars are required to complete a minimum of four years full-time or equivalent part-time training in practices and posts accredited by ACRRM. Completing assessments, online RRMEO modules and approved emergency courses.

Recognition of Prior Learning (RPL) is also available to registrars undertaking the ACRRM training program.

1st yr	PRR1 Core Clinical Training accredited hospital (12 months).
2nd and 3rd yr	PRR2 (12 months), PRR3 (12 months) Primary Rural and Remote Training
4th yr	PRR4 (12mths) Advanced Specialised Training

3.1. Mandatory hospital experience

This term is, in addition to, the hospital intern year and must be undertaken in an accredited hospital. Registrars must check with NCGPT that a proposed placement is accredited. A minimum of four hospital units are required to be undertaken in an Australian hospital as part of the AGPT. They must include:

Paediatrics (including emergency department experience):

- a) Which includes a high proportion of paediatric emergency attendances with appropriate supervision from paediatricians, and/or appropriately experienced general practitioners and/or emergency physicians in RACGP accredited hospitals;
- b) Where there is a significant focus on the recognition, diagnosis and management of the seriously ill child.

General surgery (or equivalent)

General medicine (or equivalent)

Accident and Emergency rotations (or equivalent)

Please note: Advanced Life Support (ALS) training prior to applying for RACGP fellowship is an essential component of registrar training and may be undertaken in the hospital year.

In addition to these experiences, registrars must obtain hospital experience in at least three additional areas whilst in hospital practice. These areas must have relevance to general practice and fit within the overall learning needs of the registrar. Some examples of hospital disciplines of relevance may be:

- | | |
|-------------------------------|--|
| a) Anaesthetics | i) Ear, nose and throat |
| b) Dermatology | j) Geriatrics |
| c) Ophthalmology | k) Infectious diseases |
| d) Orthopaedics | l) Prevocational general practice |
| e) Psychiatry | m) Other relevant hospital experience may be approved by the DOT in consultation with the state RACGP censor if it aligns to the educational and experience requirements of the registrar. |
| f) Rehabilitation | |
| g) Urology | |
| h) Obstetrics and gynaecology | |

Experience in child and adolescent health must be gained by registrars before entering their first accredited GPT1 general practice term unless otherwise approved by an NCGPT medical educator. For further information contact the Director of Training

TERM FOCUS:

- **On JMO curriculum with special attention to areas that relate to general practice**
- **Taking more responsibility and becoming comfortable with autonomy**
- **Increased focus on personal needs and plans for the future**
- **Mastering time management**
- *** Book into, or complete an EMST / ALS / APLS course now if available.**

Other educational requirements in hospital time

Doctors in their hospital term are required to:

- Meet and discuss (face to face or by phone) their learning plans and future plans with a nominated NCGPT medical educator on at least two separate occasions.
- Participate in regional educational activities as permitted by hospital commitments

Hospital terms are organised by the registrar directly with an RACGP or ACRRM accredited hospital. For advice and assistance contact the Director of Training at NCGPT.

Please note: If a hospital term is not approved by RACGP and/or ACRRM, it will not count towards training.

3.2. GP Term 1 (GPT1)

This term is undertaken in accredited general practices throughout the NCGPT region. Registrars receive direct supervision and teaching from the supervisors – this is a 6 month FTE placement.

Time requirements for GPT1

During this term there is expected to be a high level of supervision, graduated responsibility and an increasing patient load.

1. Onsite supervision to be available 80% of the time from the supervisor,
2. Telephone access to be available at all times,
3. A minimum of three hours face to face teaching per week.

Teaching activities for GPT1

In order to meet the standards for general practice training the following (or equivalent) must be achieved during GPT1:

1. Early formulation/modification of the learning plan (with a medical educator and supervisor). The learning plan is to be reviewed at regular intervals with the supervisor in consultation with the medical educator.
2. Early review of the registrars' learning objectives for GPT1 in consultation with the supervisor and/or medical educator. Recommended at weeks five, 12 and 20.
3. Three hours of structured teaching per week with supervisor. During the weeks that the registrar attends structured three day workshops or receives a FACT visit the structured teaching with the supervisor is not necessary.
4. Discussion with the supervisor of specific cases causing problems for the registrar.
5. Other in practice educational activities such as observation of the supervisor's consultations by the registrar, clinical meetings and demonstrations of practice procedures.
6. Participation in education release programs to the equivalent of one session (i.e. one half day per week) and includes:
 - a) Full day orientation to rural general practice,
 - b) Three day regional workshop, early in term
 - c) Full day educational release meetings,
 - d) Three day regional workshop, later in term
 - e) One day Aboriginal Cultural Awareness workshop (can be undertaken in GPT1 or GPT2).

Note: rural rotators are required to confirm their educational commitments with their (home) regional training provider.

7. The equivalent of two half day sessions of direct observation of registrar consultations (by supervisors and/or medical educators) for feedback and assessment purposes. These will be achieved through two FACT visits during GPT1. Registrars will be contacted by NCGPT to arrange these visits.
8. Participation in formative assessment. Formative assessment is direct feedback to registrars on their progress and performance in developing and mastering consultation, diagnostic and patient management skills by GP supervisors.
9. A training appraisal will be given by an ME.
10. Registrars may approach the NCGPT DOT or MEs at any time for advice on training.

TERM FOCUS

- **Introduction to general practice**
- **Transition from tertiary level health care to primary and secondary levels**
- **Efficient management of early patient presentation**
- **Gatekeeper role**
- **Patient centeredness**
- **Continuity of care**
- **Communication skills**
- **Procedural skills**
- **Membership of health care team**
- **Business management skills**
- **Consider forming a study group in preparation for the FRACGP exam**

3.3. GP Term 2 (GPT2)

This term is undertaken in accredited general practices throughout the NCGPT region. Registrars receive direct supervision and teaching from the supervisors – this is a 6 month FTE placement.

Registrars are able sit the AKT segment of the RACGP exam during GPT2. For further information visit www.racgp.org.au/exam

Time requirements for GPT2

During this term there is expected to be a high level of supervision, graduated responsibility and an increasing patient load. An orientation will be given at each new practice.

1. Onsite supervision to be available 50% of the time from the supervisor,
2. Telephone access to be available at all times,
3. A minimum of 1.5 hours face to face teaching time per week with your supervisor.

Teaching activities in GPT2

In order to meet the standards for general practice training the following (or equivalent) must be achieved during GPT2:

1. Early formulation/modification of the learning plan (with medical educator and supervisor). Recommended at weeks five, 12 and 20.
2. One and a half hours of structured teaching per week with supervisor. During weeks that the registrar attends structured three day workshops or receives a FACT visit the structured teaching with the supervisor may be unnecessary.
3. Discussion with the supervisor of specific cases causing problems for the registrar.
4. Other in-practice educational activities such as observation of the supervisor's consultations by the registrar, clinical meetings and demonstrations of procedures, consulting.
5. Participation in education release programs to the equivalent of one session (i.e. one half day per fortnight) and includes:
 - a) Full Day Rural Orientation (extra requirement for new registrars),
 - b) Full day educational release meetings,
 - c) One day Aboriginal Cultural Awareness workshop (can be undertaken in GPT1 or GPT2),
 - d) Other activities as required by NCGPT.

Note: rural rotators are required to confirm their educational commitments with their (home) regional training provider.

6. The equivalent of two half day sessions of direct observation of registrar consultations (by supervisors and/or medical educators) for feedback and assessment purposes. These will be achieved through two FACT visits during GPT2. Registrars will be contacted by NCGPT to arrange these visits.
7. Participation in formative assessment. Formative assessment is direct feedback to registrars on their progress and performance in developing and mastering consultation, diagnostic and patient management skills by GP supervisors.
8. A training appraisal will be given by an ME.
9. Registrars may approach DOT or ME at any time for advice on training.

TERM FOCUS

- **Increased level of responsibility**
- **Less supervision**
- **Full patient load**
- **Build on knowledge and skills learnt in GPT1 term**
- **Consider forming a study group in preparation for the FRACGP exam**

3.4. GP Term 3 (GPT3)

During GPT3 registrars are more self-directed in their learning, and are expected to participate in all activities available to GPs i.e. continuing professional development activities. It is generally in this phase of training that registrars prepare and sit for the FRACGP examination.

While no formal training is mandatory, registrars are expected to attend local GP educational events and are welcome to attend NCGPT educational events, by negotiation with their supervisor.

Please note that training must still be undertaken in an accredited practice. An orientation process will take place if commencing placement with a new practice.

Time requirements in GPT3

During this term the registrar is being prepared for independent practice and is placed in an approved practice with a mentor.

1. Onsite supervision
2. Telephone access to be available at all times,
3. There is no formal face to face teaching required by the supervisor, however, one hour of structured teaching time, that has been agreed by the medical educator or supervisor, must be undertaken by the registrar. It can be satisfied by completing a learning activity assessed as a category 1 RACGP QA&CPD activity of no less than eight hours duration*.

* This requirement is part of the 2005 RACGP Training Standards. Registrars who commenced their training on or after 1 January 2008 are required to train towards the 2005 standards. Registrars who commenced their training before 1 January 2008 will continue to train to the 2001 standards where no structured teaching time is required by the registrar in GPT3.

Teaching activities in GPT3

In order to meet the standards for general practice training the following (or equivalent) must be achieved during GPT3:

1. Early formulation/modification of the learning plan (with medical educator and supervisor).
2. Participation in educational activities such as review of the registrar's consultations by direct observation and discussion.
3. Discussion with the supervisor of specific cases causing problems for the registrar.
4. The equivalent of one half day session of direct observation of registrar consultations (by supervisors and/or medical educators) for feedback and assessment purposes. This will be achieved through one FACT visit during the GPT3 term. Registrars will be contacted by NCGPT to arrange this visit.
5. Participation in formative assessment. Formative assessment is direct feedback to registrars on their progress and performance in developing and mastering consultation, diagnostic and patient management skills by GP supervisors.
6. May contact the DOT or ME at any time for advice

TERM FOCUS:

- **Form a study group in preparation for the FRACGP exam - if you haven't already.**
- **Attend pre-examination seminars**

3.5. Extended skills in General Practice

Registrars are required to undertake extended skills training relevant to general practice. Extended skills training may be undertaken in a variety of different settings, or in the general practice setting.

An extended skills training unit taken outside general practice may be undertaken at any time during the registrar's training. Extended skills training in general practice can only be undertaken after the completion of GPT1, GPT2 and GPT3. Extended skills training units must be approved by NCGPT's Director of Training and are arranged on an individual basis.

The following disciplines may be available:

- Aboriginal Health
- Anaesthetics
- Complementary Medicine
- Drug and Alcohol
- Emergency Medicine
- Mental Health
- Sexual Health
- Obstetrics
- Palliative Care
- Paediatrics
- Sports Medicine
- Academic Registrar Posts – public health and research
- RLO or RRADO posts
- Extended skills in general practice

To arrange your extended skills training term, contact the NCGPT Director of Training.

Registrars may request to have terms undertaken outside of Australia accredited as extended skills. Such terms must be approved by the RACGP/ACRRM censor prospectively if they are to count towards training.

Please speak to the DOT and allow sufficient time for this process, if you have such a request.

3.6. Practice allocation process

NCGPT allocates Registrars to Practices prior to each training term taking into account registrar preferences and circumstances. **Under RACGP standards, registrars are required to move training practices at least once during the training period.**

The main steps taken by NCGPT in the Practice Allocation Process are outlined below:

- Step 1:** New registrars are surveyed at the time of their initial intake interview to determine their preference for training location.
- Step 2:** Continuing registrars are asked for their training location preference in April for T2 and in September for T1 each year.
- Step 3:** Practices are asked to indicate the number and level (GPT1, 2 or 3) of registrars that they can accommodate. (Step 3 occurs at the same time as Step 2 above).
- Step 4:** The registrar/practice matching process is undertaken by the Director of Training, Senior MEs and the Registrar Support Officer.
- Step 5:** Registrars and practices are notified of the outcome of the matching process.
- Step 6:** Registrars are requested to contact their allocated practice to arrange an interview. After the interview, if the registrar and practice agree to proceed, the registrar is responsible for completing all paperwork and submitting it in a timely fashion to obtain a provider number

As an accredited training provider under the RACGP's Standards NCGPT must ensure we, and our registrars, comply with the requirements of Standard P26 (see below). Although we acknowledge that moving practices can be unsettling for registrars at any time, our experience shows that the best time to implement the requirement to move practices is after a registrars' GPT1 term.

Note 1: RACGP Standard P.26 Requiring a Minimum of Two GP Placements during training

Standard P.26 of the RACGP's Standards for GP Education and Training (Programs and Providers 2005) states:

"The general practice training provider must ensure that registrars are supported in securing at least two different general practice placements of high quality during their training."

3.7. Summary of training matrix

RACGP summary of training

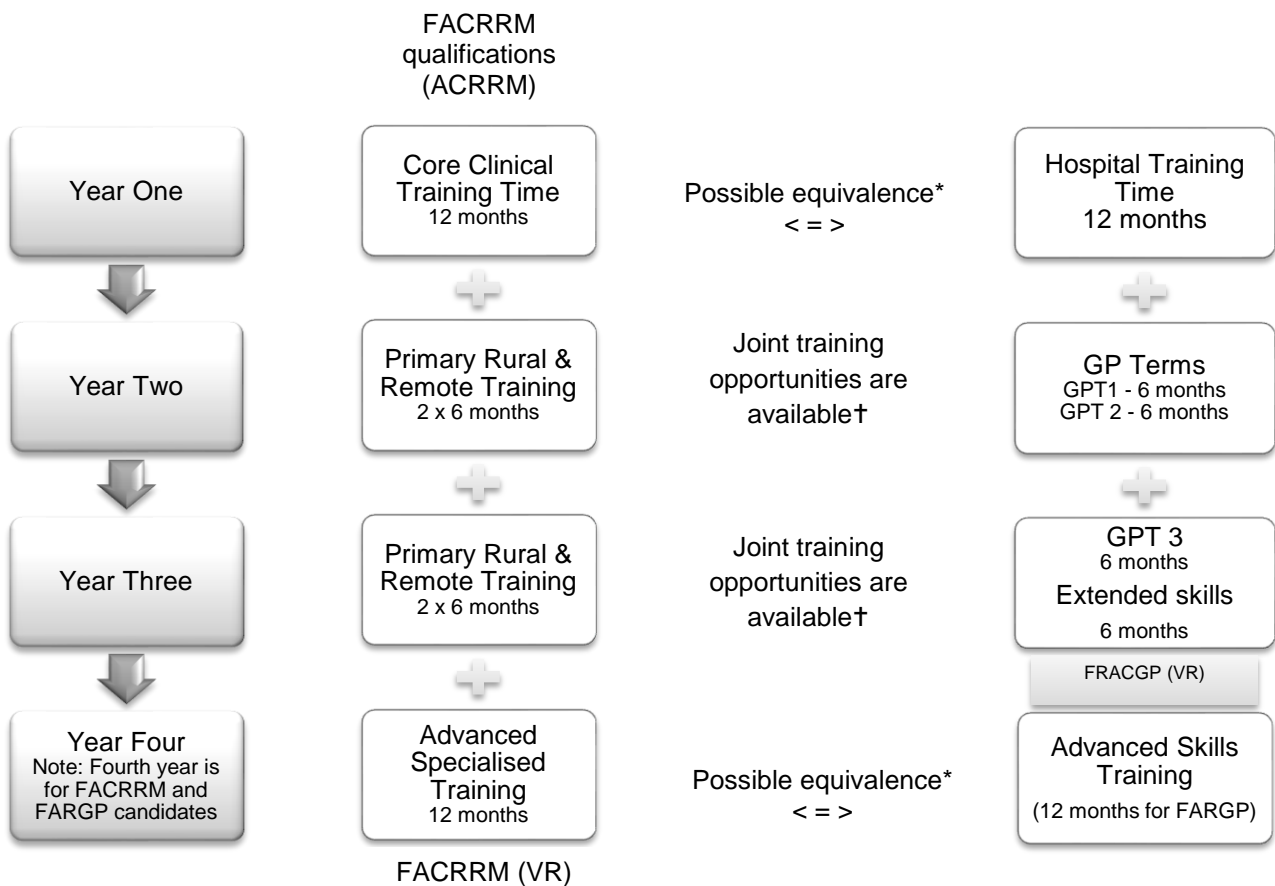
Parameters	GPT1	GPT2	GPT3 & Extended Skills in General Practice
Training Practice Accreditation	Must be accredited with RACGP and/or ACRRM as a training practice		
Supervision	At least 80% of time to be onsite; remaining 20% to be contactable by phone	At least 50% of time to be onsite; remaining 50% to be contactable by phone	Supervision 25% of time onsite consistent with GP registrar's current experience. Should be contactable 100% of the time.
In practice teaching with GP Supervisor*	Three hours of regular, set aside teaching time each week during rostered, paid work time.	One and a half hours of regular, set aside teaching time each week during rostered, paid work time.	None formally required, but informal teaching by mentor encouraged.
Direct Observation of GP Registrar's consultations by supervisor	Should occur regularly throughout the term. Qualifies for TIP payment	Should be regularly undertaken. Qualifies for TIP payment	None required but encouraged. Qualifies for TIP payment
Formative Assessment and Clinical Teaching (FACT) Visits	Two per six month term, usually by a medical educator/supervisor	Two per six month term, usually by a medical educator/supervisor	One per six month term, usually by a medical educator/supervisor
Training Appraisal (TA) visits	One per six month term, usually by a medical educator	One per six month term, usually by a medical educator	One per six month term, usually by a medical educator
Learning planner in 2012	Supervisor required to assist in the development of the learning planner		
Supervisor training in 2012	Supervisor required to attend one day of training per year	Supervisor required to attend one day of training per year	Supervisor required to attend one day of training per year
Education Release Program*	GP registrar released for educational activities for the equivalent of one session per week. GP registrars to be paid by the teaching practice for attendance.	GP registrar released for educational activities for the equivalent of one session per fortnight. GP registrars to be paid by the teaching practice for attendance.	None required. However, GPT3 registrars are invited and encouraged to attend.
Workshop program	Two workshops, each lasting three days, are held over the six months of GPT1. GP registrars are paid for attendance by the teaching practice. These workshops are compulsory		
Aboriginal cultural Awareness workshops	GP registrars are required to attend a one day workshop once in either GPT1 or GPT2. GP registrars are paid for attendance by the teaching practice. These workshops are compulsory		
Basic Life Support (BLS)	GP registrars are required to complete and satisfactorily pass the BLS within the 3 years prior to the closing date for applications to sit the FRACGP examination		
Advanced Life Support (ALS)	GP registrars are required to complete and satisfactorily pass the ALS to be granted completion of training status.		
Time in practice*	26 weeks with a maximum of three weeks of leave for all purposes	26 weeks with a maximum of three weeks of leave for all purposes	GPT3 (six months) to be completed in general practice. Plus completion of an extended skills term (six months) which may be undertaken in the general practice setting.
Eligibility to sit RACGP Fellowship exam	After six months of full time equivalent supervised general practice terms (providing requirements for the hospital term have been met), registrars may sit the first component of the RACGP fellowship exam (AKT).		
Eligibility to sit ACRRM fellowship examination	ACRRM candidates should contact the ACRRM medical educator for advice about eligibility and assessment.		
Recognition of prior Learning (RPL)	RPL may be used for shortening the length of time in training or to obtain time credit for previous learning in required areas. Must be submitted within first 6 months of training.		

3.8. AGPT program end point qualifications and fellowships

* Credit given for AGPT training already undertaken towards one fellowship, prior to undertaking a second or third fellowship.

† Can be achieved in dual accredited practices or posts.

Please note: although this table is presented in a linear format, both colleges have flexible training options to enable registrars to plan their training around their own needs and interests. See the college websites for more information.



3.9. FRACGP and ACRRM vocational training – comparison table

AGPT	RACGP vocational training	ACRRM vocational training
Training can commence	Post PGY 2 (after intern year plus one additional hospital year, which can be undertaken before or after enrolment in AGPT)	During or post PGY 2
AGPT selection	Required to commence training	Required to commence training
Status of qualification	FRACGP – recognised vocational training qualification	FACRRM – recognised vocational training qualification
Endpoint of training	Vocational recognition (VR)	Vocational recognition (VR)
Membership requirements	Required for examination purposes	Required to commence training
Education framework	College – based curriculum and standards	College – based curriculum and standards
Training model	Apprenticeship training model	Apprenticeship training model
Training delivery and support	RTP/supervisor delivered training and support with specific additional support from college offered to registrars	RTP/supervisor/college (via RRMEO) training and support offered to registrars
Length of training	Three year training program, of which 18 months must be in an approved 'general practice' setting	Four year training program occurring predominately in rural and remote settings
Core training	GPT1 + GPT 2 + GPT3	Primary rural and remote training
	18 months – completed over 3 semesters each of 6 months	24 months – completed over 4 semesters each of 6 months
Focus – skills training term	Extended skills training (focus: general practice)	Advanced specialist training (AST) (focus: rural generalist)
Requirements – skills training term	6 months – can be done in either an approved community-based general practice or in an approved hospital training post	12 months – can be done in either an approved community-based general practice or an approved hospital training post. At least two Emergency Courses accredited by ACRRM.
Equivalence in skills training	Advanced specialised training may be recognised for extended skills training purposes in some circumstances	Extended skills training may be recognised for advanced specialised training purposes in some circumstances
Training flexibility order of completion	Some flexibility – extended skills (hospital) – before/during/after core training, extended skills (community) – after GPT1-3 completed	Fully flexible – no required order (core hospital training must be completed first)
Training locations	General Pathway RA 1-5 locations Rural Pathway 2-5 locations	RA 2-5
Assessment	College examinations	Formative and summative assessment tasks throughout training At least four RRMEO modules that include assessment Procedural Skills logbook
Part-time training RPL	Part-time training available (2 days per week for time to count towards training) and limited RPL (for recognition of equivalent hospital training time and extended skills)	Part-time training available (2 days per week for time to count towards training) and RPL available – for all stages of training.
Additional training options	Registrars can undertake an additional (fourth) year of rural-orientated training to gain the FARGP qualification	There are no additional options. FACRRM is a four-year inclusive program.

4.0 other important aspects of the agpt program

4.1. Aboriginal health training

All registrars are required to satisfy the requirements of the Aboriginal Health Curriculum Statement (contained in the RACGP curriculum) as a completion of training requirement.

A cultural training day is offered in GPT1 and GPT2 to all registrars in each node.

NCGPT offers posts in Aboriginal Medical Services (AMS) throughout the region including Ballina, Casino, Coffs Harbour, Grafton and Kempsey. Aboriginal health training offers registrars the opportunity for a rewarding cultural experience as well as excellent medical exposure. For further information contact NCGPT.

Aboriginal health posts may be undertaken in GPT 1, 2, 3 and Extended Skills terms (RACGP) or Primary Rural and Remote Training (ACRRM). AHT may be undertaken as an ARST as part of FARGP, and AST if working towards the FACRRM.

4.2. Emergency training

Completion of an Advanced Life Support (ALS) certificate is mandatory during training. This certificate may be offered by NCGPT at the Foundations and Emergency full day release in each region.

As a rural training provider, NCGPT also encourages registrars to attend approved emergency courses offered by other organisations. Such emergency courses equip registrars to practice in rural settings, and in particular increase competence and confidence for those working as VMOs in the emergency departments of small rural hospitals. VMO positions are an integral part of many rural general practice placements.

Course fees, but not travel and accommodation costs, will be reimbursed following the successful completion of the course **if prior approval** has been sought from the NCGPT Director of Training. In order to receive reimbursement the following items must be sent to NCGPT:

- Application for course reimbursement (available at www.ncgpt.org.au/content/registrars)
- Copy of course tax invoice (receipt) from original payment made by you
- Copy of your successful certificate of attendance

4.3. Academic posts

NCGPT will help to arrange academic posts throughout the region. These posts provide salary funding for up to six months of full time academic training in addition to or during the current three years of training. They are for registrars interested in pursuing a career in academic general practice. Applications are sought twice per year. For further information see the AGPT Policies 2011 <http://www.agpt.com.au/Policies/test/>

Can I do an academic term part-time?

Most registrars do the academic post part-time over 12 months, combined with clinical work. You need to do 2 or 3 clinical sessions per week (check the guideline document). The minimum academic time is 3 sessions per week, although most registrars do more than this. Hence the minimum overall loading is 0.5 although this is currently under review.

How do I apply?

There are two rounds of applications. Check the website for details, but they usually close around March and September. The application forms are on the website for you to download and you need to fill out all the sections of the application. If you are having trouble or need some advice please contact the RRADO.

4.4. Mandatory elective units

Registrars are required to complete a minimum of three years active training while enrolled in the AGPT program (unless granted time reduction by recognition of prior learning for hospital and/or extended skills experience).

Registrars who are granted RPL without time reduction for some or all of their post-intern year of hospital training, are still required to complete three full years of the training program and must complete an equivalent number of mandatory elective units to make a minimum of 12 active units¹ (16 units for those pursuing Advanced Rural Skills Posts (ARSP)).

These units may be undertaken in general practice but this may only be done after the completion of all other required time i.e. GPT1, GPT2 and GPT3.

Time requirements for mandatory elective units

During this term the registrar is being prepared for independent practice and is placed in an approved practice with a mentor.

1. Onsite supervision for 25% of the time and telephone access to be available 100% of the time from the mentor.

Teaching activities in the mandatory elective units

In order to meet the standards for general practice training the following (or equivalent) must be achieved during the mandatory elective term:

1. Early formulation/modification of the learning plan (with medical educator and mentor).
2. Participation in educational activities such as review of the registrar's consultations by direct observation and discussion.
3. Discussion with the supervisor of specific cases causing problems for the registrar.
4. The equivalent of one half day session of direct observation of registrar consultations (by supervisors and/or medical educators) for feedback and assessment purposes. This will be achieved through one FACT visit during the term. Registrars will be contacted by NCGPT to arrange these visits.
5. Participation in formative assessment. Formative assessment is direct feedback to registrars on their progress and performance in developing and mastering consultation, diagnostic and patient management skills by GP supervisors.
6. Registrars may contact DOT or ME at any time for advice.

¹ An active unit is equal to 13 weeks of FTE training, this does **not** include recognition of prior learning **without** time reduction. Censor approved RPL **does** count towards active units.

4.5. Other elective training

Elective training in addition to the minimum requirements for training may be taken by registrars:

- Who require extra or particular training experience e.g. for registrars who have been unsuccessful in the FRACGP or FACRRM examination,
- Who wish to gain skills for particular areas of practice,
- To increase their breadth of experience,
- To develop special interests in addition to Special Skills,
- Who are new parents returning to work. Registrars who have completed 12 months of GP terms are eligible.

Elective time needs to be approved prospectively taking into consideration the individual's training needs and the nature of the post. Posts can include hospital, extended skills or advanced rural skills posts. They can also include clinical work such as aviation medicine, occupational health, school medical service or academic work related to general practice.

This term can be arranged by contacting the NCGPT Director of Training.

While elective training may broaden your knowledge and skills, it does not count as part of the time requirements for attainment of the FRACGP.

4.6. Recognition of prior learning (RPL)

As an adult learner, registrars may have had previous experience in accredited hospital or other posts that may be recognised as ²relevant prior learning for general practice. Applications for RPL must be made in the first six months of training. Application forms are available from the NCGPT Registrar Support Officer, Sue Sladden T: 02 6681 5711 E: sues@ncgpt.org.au

Application forms must be submitted to the NCGPT Director of Training once completed.

² RPL may be approved with or without reduction in training time. The decision to grant RPL rests with the RACGP/ACRRM state censor, following recommendation by the NCGPT DOT and local medical educators.

4.7. Re-enrolment

Re-enrolment is an annual process by which a registrar applies to continue being a member of Australian General Practice Training.

This process occurs in December of each year. To be eligible for re-enrolment the registrar must meet all training requirements by the end of the training year. These requirements include:

- Satisfactory completion of the registrar's learning plan and objectives,
- At least two meetings with a medical educator or other designated person to review learning plans and objectives,
- Satisfactory performance in any other required formative assessment,
- Satisfactory participation in NCGPT's educational program as evidenced by attendance and participation.

Re-enrolment forms are posted out with a copy of RIDE report for checking of details.

These forms must be submitted to the NCGPT Director of Training by the closing date. Failure to enrol after two weeks (from the closing date) may result in the loss of the registrar's place in the training program. If the registrar plans to be on leave of absence, a leave application form must be submitted with the request for re-enrolment.

Failure to communicate with the training provider may also result in loss of placement in the training program.

When part time training is requested, a part time training application must be submitted with the request for re-enrolment.

For further information see the AGPT Policies 2011 <http://www.agpt.com.au/Policies/test/>

4.8. Remuneration

During hospital training, registrars are paid according to the RMO/HMO award in their state.

During GPT1 and GPT2, registrars are employed by the teaching practices. The national minimum terms and conditions for GPT1 and GPT2 document provide guidelines for practices and registrars when negotiating remuneration and other employment conditions. See 17.2 attachment 2.

During GPT3 registrars and practices negotiate on terms and conditions suitable for both parties. For advice or assistance contact North Coast GP Training.

4.9. Applying for completion of training and fellowship

Registrars receive a letter from the RACGP confirming their successful completion of the College Exam, and a Fellowship Application Form. Registrars now need to complete the Fellowship Application Form and return it to the College along with the following documents, when they have met all training requirements:

1. A copy of the College letter confirming their successful completion of the exam.
2. A completed Fellowship Application
3. A copy of their current medical registration
4. A copy of their completion of training letter from NCGPT
5. A copy of the RIDE printout, as provided by NCGPT

Post to:

RACGP, NSW Faculty,
PO Box 534
North Sydney NSW 2060

Once the NSW Censor has approved your application it will be forwarded to the RACGP National Office for ratification by the Censor/–in-Chief. Once ratified the RACGP will then forward you a confirmation letter along with the Health Insurance Commission Provider Number Application Form for you to complete and return it to the HIC for processing.

For ACRRM at successful completion of all formative and summative assessments, registrars are asked to submit a completion of training form available on the ACRRM website at www.acrrm.org.au

This form requires endorsement by NCGPT prior to submission to ACRRM.

Post to:

ACRRM
GPO Box 2507
Brisbane QLD 4001

4.10. Extension of training while awaiting fellowship

Registrars who have successfully completed the AGPT program and have passed the college examination may seek an extension of training while they await award of fellowship.

A maximum of 6 months can be approved so registrars are expected to complete their application for fellowship in a timely manner as NCGPT cannot assist in obtaining a provider number past the 6 month extension granted.

Extensions of training while awaiting fellowship will only be provided for registrars who:

- a) Maintain medical registration in the appropriate state(s);
- b) Immediately advise NCGPT of any change to their medical registration;
- c) Maintain adequate and appropriate professional indemnity insurance;
- d) Apply to GPET for an extension of their provider number in a timely manner to ensure continuity of access for their patients to Medicare rebates;
- e) Provide current contact details to NCGPT;

Note: a maximum extension of six months can be applied for, unless the registrar is enrolled in the FARGP.

4.11. AGPT Leave policy

Please be aware that there is a new leave policy for the cohort that started GP training from 1st January 2011. You can access this policy by going to the AGPT website at <http://www.agpt.com.au/Policies/test/> and selecting the Leave Policy.

If you have any questions regarding the policy you can either contact GPET directly or Sue Sladden, North Coast GP Trainings registrar support officer.

5.0 roles and responsibilities

5.1. Responsibilities of the registrar

General requirements are:

1. Learning the job - actively seeking relevant experiences to achieve competence,
2. Attending meetings and making contact with educational staff at least twice per year to:
 - Review achievements from the previous learning plan
 - Review incoming formative assessment data
 - Identify new learning objectives and learning needs
 - Plan career and learning strategies
 - Address issues of concern to the registrar,
3. Participation in educational activities as required by NCGPT,
4. Participation in formative assessment as required by NCGPT,
5. Participation in any required assessment as required by NCGPT,
6. Disclose and discuss with their supervisor/medical educator any medical condition which might place themselves or their patients at risk.
7. Maintain communication with NCGPT and inform us in a timely manner of any change in circumstances which may impact on your training.

5.2. Responsibilities of Director of Training to the registrar

1. Develop the educational program in consultation with Medical Educators,
2. Oversee selection and placement of registrars,
3. Oversee training delivery,
4. Advise on selection and suitability of training options for registrars,
5. Monitor and assess performance of supervisors and other educators,
6. Monitor registrar wellbeing and progress,
7. Participate in the assessment of applications for leave, RPL, transfer etc.

5.3. Responsibilities of medical educators to the registrar

1. Contribute to the development of the Education program
2. Liaise with, and support registrars,
3. Monitor and assist registrar progress including conducting:
 - FACT visits
 - TA contacts
4. Deliver teaching,
5. Assess registrar performance
6. Coordinate and participate in local educational events and activities,
7. Monitor learning plans.

5.4. Responsibilities of supervisors and the practice to the registrar

5.4.1. Practice based supervision and teaching

The training practice will ensure that a supervisor:

1. Is accessible to the GP Registrar at all times

For GPT1

- Provides direct, on-site supervision of the registrar for a minimum of 80% of the registrar's working time (100% supervision is recommended for the first month); and
- Is available by telephone for the remaining 20% of the time, during which the supervisor should be able to attend if required.

For GPT2

- Provides direct, on-site supervision of the registrar for a minimum of 50% of the registrar's working time; and
- Is available by telephone for the remaining 50% of the time, during which the supervisor should be able to attend if required.

For GPT3

- Provides direct, on-site supervision of the registrar for a minimum of 25% of the registrars working time.
 - Is available by telephone the remaining 75% of the time, during which supervisors should be able to attend if required.
2. Is available to the registrar during the registrar's clinical duties to provide clinical advice and assistance when required as per item one above.
 3. Establishes, with the registrar, educational objectives early in the term which are documented in the registrar's learning plan by the fourth week of the term.
 4. Provides practice-based teaching each week in accordance with the RACGP Standards for General Practice Education and Training 2005. In meeting the requirements for formal structured teaching, the teaching method provided is flexible. However, the following minimum criteria need to be noted:
 - For a full time GPT1 Three hours of teaching per week of which 2 hours should be formal set aside teaching
 - For a part time GPT1 1.5 hours of teaching per week of which 1 hour should be formal set aside teaching
 - For a full time GPT2 1.5 hours of teaching per week of which 1 hour should be formal set aside teaching
 - For a part time GPT2 0.75 hours of teaching per week of which 0.5 hour should be formal set aside teaching
 - For a full time GPT3 1 hour of teaching per week self directed by registrar
 - For a part time GPT3 ½ hour of teaching per week self directed by registrar

After, for a part time GPT3

- Opportunistic, adhoc, "on the run" or corridor teaching is actively encouraged and may provide for up to one third of the required teaching time. This could include discussion of an interesting case, providing demonstration of or supervision for a procedural skill, or prompt advice in response to a registrar enquiry. The NCGPT TIP (Teacher Incentive Program) provides extra support for supervisors who practice excellent teaching skills, including comprehensive orientation, observation and feedback, teaching procedural skills and case discussion and exam preparation specifically for GPT3's.

- A maximum of one third of the minimum required teaching could take place outside of the training practice

Note: If no practice supervisor is available for the purposes outlined in items 1-5 above, the training practice will provide a substitute supervisor(s) who is/are approved by NCGPT for these purposes.

5. The training practice in conjunction with the registrar will maintain a brief summary outlining the content of, and the time spent on, teaching activities each week. This information is to be recorded in the registrar's learning planner, and reviewed by the NCGPT from time to time.

5.4.2. Educational release³

In accordance with GPET policies and guidelines the training practice will ensure that the registrar is released during paid time to attend the required educational activities.

Educational release times are as follows:

- Full time GPT1 registrars the equivalent of one session per week
- Full time GPT2 registrars the equivalent of one session per fortnight
- Part time GPT1 registrars¹ the equivalent of one session per fortnight
- Part time GPT2 registrars the equivalent of one session per month

5.4.3. Provision of feedback

Throughout the term the supervisor should develop and engage in an effective feedback process (both formal and informal) with the registrar.

Both the supervisor and registrar will provide feedback to each other through the use of structured assessment. The feedback forms are to be completed at the end of the first, third and fifth months of the GP term, this should be discussed with your supervisor.

The supervisor should actively seek input from the registrar throughout the term in the form of questions and concerns that the registrar may have.

5.4.4. Number, range and type of registrar services (case load and case-mix)

The training practice will ensure that the range of patients seen by the registrar is:

1. Appropriate to the registrars' level of experience,
2. As far as possible, representative of the attending practice population (e.g. age, gender, reason for presentation, acute care, on-going care, billing category etc).

The training practice will ensure that the number of patients seen by the registrar is:

1. Appropriate to the registrar's level of experience and the educational intent of the training environment,
2. Within the following guidelines:

GP Term (level of training)	Expected average number of patients per hour	Maximum number of patients in any one hour	Minimum number of A1 consults per F/T week (pro-rata for P/T)
GPT1 First six months	2-3	4	50
GPT2 Second six months	3-4	4	50
GPT3 Six months	3-4	4	50

³ Refer to the national minimum terms and conditions for GPT1 & 2 registrars 2011 for a description of "part time" and associated conditions. See attachment two.

5.4.5. Employment of the registrar

The training practice will ensure that:

Registrars undertaking a GP term in the training practice are employed by the training practice. Registrars are not to be regarded as 'self-employed' or 'contract' workers. Employment and tax laws relevant to an 'employee' apply to the registrar. NB: where exceptional circumstances require this requirement to be modified, e.g. for VMO status at some rural hospitals, NCGPT must be notified.

A written employment agreement is negotiated between the training practice and the registrar that at a minimum satisfies the national minimum terms and conditions for GPT1 and GPT2 registrars 2012. The national minimum terms and conditions document can be viewed from the NCGPT website at the Registrar page www.ncgpt.org.au/content/registrars

Rostering for both ordinary and on-call hours will be equitable with other practice doctors and will, wherever possible, be developed by negotiation with the registrar.

The registrar receives a formal orientation to the training practice and community.

6.0 registrars in the practice

6.1. Training practices

There are currently approximately 47 accredited training practices in the NCGPT region. Towns range from classifications of RA 1 to RA 3. All practices within the region are classed as RA1 to RA3.

The region is divided into four training areas. These are Tweed Valley, Northern Rivers, Mid North Coast and Hastings Macleay.

Tweed Valley area

Accredited training practices are available in Murwillumbah.

Northern Rivers area

Towns in which accredited training practices are available include Ballina, Bangalow, Brunswick Heads, Byron Bay, Casino, Goonellabah, Lennox Head, Ocean Shores, Maclean, Mullumbimby and Tintenbar.

Mid North Coast area

Towns in which accredited training practices are available include Bellingen, Coffs Harbour, Grafton and Woolgoolga, Dorrigo, Urunga.

Hastings Macleay area

Towns in which accredited training practices are available include Kempsey, Laurieton, North Haven and Port Macquarie.

6.2. National minimum terms and conditions

The terms and conditions of registrar employment is governed by the national minimum terms and conditions for GPT1 and GPT2 registrars 2012. See attachment two.

The national minimum terms and conditions is also available to download from the NCGPT website www.ncgpt.org.au/content/registrars

6.3. Registrar medical indemnity insurance

Registrars are required to maintain an adequate level of medical indemnity insurance cover throughout their training. A copy of this must be provided to the practice prior to commencement of training. Insurance must fully cover the registrar for the type of practice and procedural activity involved as well as for actions in negligence. It is advised that registrars discuss their individual circumstances with their insurer. See General Practice Registrars Australia (GPRA) www.gpra.org.au for further information.

Please note the following clarification of indemnity risks (provided by United Medical Protection):

1. Under the current GP Registrar Scheme and NSW law a registrar is required to hold their own indemnity insurance.
2. Where an employed doctor (Dr B) provides negligent treatment, legal proceedings can be brought against Dr B only, or the employer (Dr A) only, or both Drs A and B, or against the medical practice company or partnership.
3. Proceedings against Dr A only may include the following allegations:
 - Failure to properly train Dr B
 - Failure to properly supervise Dr B
 - Inappropriate delegation to Dr B
 - Failure to have a proper system or treating protocol in the practice
 - Liability as an employer for Dr B's negligent act (vicarious liability)

6.4. Registrar medical registration

Registrars are required to ensure their medical registration is current **at all times during their training**.

The registration of Medical Practice's has recently been nationalised and now comes under the auspices of Australian Health Practitioners Regulation Agency (AHPRA).

Registrars who's registration has lapsed may not under any circumstances undertake general practice activities.

6.5. Registrar Medicare provider numbers

Registrars are required to ensure that they apply to Medicare Australia for a Medicare Provider Number and Recognition as a General Practitioner **prior to the commencement of each term.**

The appropriate forms will be mailed to you when they are due for completion. It is the registrar's responsibility to complete these and return them to the appropriate body. The application for a Medicare Provider Number form must be returned to Medicare Australia and the application for recognition as a GP must be returned to NCGPT.

If a provider number is not allocated, patients are not eligible for a Medicare rebate for any of the following services:

- The consultation with the registrar
- Any investigations ordered
- Consultations with any doctor or agencies patients are referred to.

This clearly has serious consequences for the patients and practice.

6.6. Admitting rights

In some practice placements registrars are provided with the opportunity for admitting rights at local hospitals, reducing the need for after hour's house calls.

Registrars who are required to provide emergency department services at small rural hospitals must apply for VMO rights to these hospitals. Practice staff will advise the timing and process for this.

Some hospitals e.g. Ballina require special registration under the DVA system in order to attract payment for DVA patients. Registrars are advised to check this with the practice and hospital prior to commencing this work.

Supervisors must give a comprehensive orientation to a registrar attending a particular hospital for the first time. The supervisor is required to be present for 100% of patient encounters for the first two registrar shifts.

All registrars with VMO rights must attend an emergency workshop yearly.

Registrars are not expected to work more shifts or undertake more AH work than the other doctors in the practice.

7.0 communication

7.1. Addresses

Email

Registrars are required to advise an email address upon acceptance to the NCGPT training program. It is through email that registrars (including those in their hospital term) will receive all communications including important information regarding training and administration.

It is the responsibility of registrars to check their email regularly, and to maintain their inbox, in order to keep up to date with training program activities. Please ensure that you set your junk email permissions to an appropriate level so that you receive all correspondence from NCGPT staff emails (or alternately add NCGPT staff emails to your safe list and check your junk email regularly).

Phone

Registrars are required to provide a phone number(s) for NCGPT staff to contact during regular business hours.

Home

From time to time we will also require to send things of relevance by snail mail. So please ensure you provide your current home address, and notify NCGPT when you move.

7.2. www.ncgpt.org.au

The NCGPT website offers:

- Easy downloadable forms,
- Your educational calendar,
- A variety of education and reference links.

7.3. The North Coast Post

The North Coast Post is a monthly newsletter providing articles of interest, education and training updates, relevant information, upcoming event and educational information as we as reference to useful links.

The newsletter is designed specifically to provide GP registrars and supervisors with up to date, current information regarding the training program and NCGPT news.

7.4. Study groups

Getting together with other registrars who are studying for the RACGP exam can help to reduce the amount of preparation you will need to do as it becomes shared among the group.

A study group is a valuable way to learn from one another as you will find each registrar in the group has different strengths and deficiencies in knowledge. Registrars who participate in study groups generally perform better in the FRACGP examination.

If you are interested in forming a study group find out from NCGPT of other registrars in the area who are sitting for the exam. Organise to get together on a weekly basis, this can not only provide a useful study practice but a great social activity.

For further information or assistance contact the NCGPT office or your RLO with contact details on the following page.

7.5. Who to contact

Head Office
 124 Tamar Street (PO Box 1497) Ballina NSW 2478
 T: 02 6681 5711
 F: 02 6681 5722
 W: www.ncgpt.org.au

Enquiry or assistance area	Contact	Office	Telephone	Email
Education and training plus selection and placement, assessment of applications for leave, RPL, transfer etc, registrar wellbeing	Dr Christine Ahern – Director of Training	Ballina	02 6681 5711	christinea@ncgpt.org.au
Medical education including information on half day release meetings, FACT visits & TA visits	Dr Hilton Koppe – Senior Medical Educator	Ballina	02 6681 5711	hiltonk@ncgpt.org.au
	Dr Linda Brown – Medical Educator (FACRRM)	Ballina	02 6681 5711	lindab@ncgpt.org.au
	Dr Tim Francis – Medical Educator (Procedural Training & PGPPP)	Coffs Harbour	0418 448 103	tfrancis@ausdoctors.net
	Dr Nicola Homes – Medical Educator	Coffs Harbour	02 6652 8111	nicolaandhubert@optusnet.com.au
	Dr Helena Johnston – Medical Educator	Coffs Harbour	02 6652 0411	hjohnston@mncdgp.org.au
	Dr Debbie Kors – Medical Educator	Port Macquarie	02 6581 3007	debbiek@tsn.cc
	Dr Peter Silberberg – Medical Educator	Ballina	02 6681 5711	peters@ncgpt.org.au
	Dr Rob Trigger – Medical Educator	Ballina		robt@spot.com.au
	Dr Kayte Evans – Medical Educator (PGPPP)	Ballina	02 6681 5711	kaytee@ncgpt.org.au
	Dr Genevieve Yates Medical Educator	Ballina	02 6681 5711	genevievey@ncgpt.org.au
General education enquiries, half day release meetings, workshops and learning planners	Neil Bambrook – Education Officer	Ballina	02 6681 5711	neilb@ncgpt.org.au
Administration, policies, procedures, general enquiries including application forms and reimbursements, social events, accommodation, and general registrar and family assistance	Sue Sladden – Registrar Support Officer	Ballina	02 6681 5711	sues@ncgpt.org.au
Terms and conditions of employment, wellbeing, support and assistance	Kirsten Patterson – Registrar Liaison Officer	Ballina	02 6681 5711	kruffles@hotmail.com
	Michael McKeough Registrar Liaison Officer	Port Macquarie	02 6681 5711	catalasepositive@hotmail.com
	Nina Robertson - Registrar Liaison Officer	Ballina	02 6681 5711	ninarobertson@rocketmail.com
Program Development for all programs AGPT, GPPTP & PGPPP	Bruce Barling – Program Manager	Ballina	02 6681 5711 or 0418 477 382	bruceb@ncgpt.org.au
OTD Support towards fellowship project	Sharyn Corben – OTD & GPPTP Project Officer	Ballina	02 6681 5711	sharync@ncgpt.org.au

8.0 education and training resources

8.1. Curriculum

The NCGPT program curriculum is based on the RACGP and ACRRM curricula and identifies the core knowledge, skills and learning experiences needed for competent unsupervised general practice.

The RACGP curriculum may be viewed at www.racgp.org.au/curriculum

Those training with ACRRM will be able to view the ACRRM curriculum at www.acrrm.org.au/primary-curriculum

8.2. Learning planner

The learning planner is intended to help you bring some order to your training experience. You are free to choose your own format for documenting your learning plan, or you may use the NCGPT format provided.

Your learning planner is a tool to help you identify, measure and meet your learning objectives by defining your individual and patient needs. It is provided to you at the beginning of your hospital terms and will be used by you until the end of your GPT3 or extended skills terms. This begins the process of your life-long learning as a general practitioner.

To fulfill annual re-enrolment essential criteria, your completed learning planner will show satisfactory attainment of learning objectives and records of meetings with a medical educator or training advisor who has reviewed it. There are a number of compulsory curriculum requirements to be completed by registrars in order to satisfy all training requirements. The learning planner will assist you to document evidence which demonstrates that you have met these requirements.

Evidence of your learning planner needs to be submitted on completion of your training for you to be eligible for RPL if you wish to obtain credit towards an extended skills award offered by other professional colleges. This document will become a record to celebrate your achievements.

8.3. Electronic resources

Registrars are provided with the electronic resource Up to Date for the first 2 years of their training. This will assist with day to day clinical practice, as well as self-directed learning.

Many practices will provide other electronic resources such as etg (Therapeutic Guidelines) and all general practice software contains patient information handouts and other resources. Please ask your supervisor to help you to find and use these resources.

Registrars who work for NSW Health (including as a VMO) will have access to CIAP which contains many useful resources.

Your RLO will provide you with a USB at “Foundations” workshop which includes among other information, links to useful clinical websites and guidelines.

8.4. Texts

Registrars will need to refer to a variety of texts during their GP training. Recommended lists are available in the registrar learning planner and in the RACGP and ACRRM curricula. Many of these texts are available at each of the three NCGPT regional training centres for all registrars to utilise.

8.5. NCGPT resource library

NCGPT maintains a small resource centre at its offices in Ballina, Port Macquarie and Coffs Harbour. The available resources include texts, videos, medical magazines and journals. There are also limbs (shoulder and knee) available to practice joint injections and/or aspiration.

For further information on accessing these resources contact your regional medical educator.

8.6. GPLearning

GPLearning is an RACGP interactive web based learning platform. Candidates enrolled in the fellowship examination can access a mock examination through GPLearning. Each candidate can take the mock examination twice. After the first attempt, the candidates score is given for each international classification of primary care code. Candidates can access a set of referenced model answers after the second attempt, and medical educators provide individual feedback on performance.

GP Learning also provides modules on a range of different topics relevant to general practice. Undertaking regular self directed learning on this platform is strongly recommended, and in particular provides excellent preparation for the RACGP exam.

For more information visit www.gplearning.com.au

8.7. RRMEO

RRMEO is the Australian College of Rural and Remote Medicine (ACRRM) medical education and online learning platform that combines online resources and education activities with telemedicine services.

Through RRMEO, ACRRM members (and other RRMEO subscribers) participate in a wide range of learning activities and discussion groups, sharing experiences and knowledge with mentors and peers nearby or thousands of kilometres away.

For further information visit www.acrrm.org.au

8.8. RACGP John Murtagh library

The RACGP John Murtagh library operates a distance library service to GP registrars. Free access is available to registrars, medical educators and supervisors. The library offers over 8000 books, videos, audio, slides and CD ROMs. The catalogue is accessed via www.racgp.org.au/library

Loan material is sent by courier throughout Australia. The library also offers many other services including literature searches, electronic books and access to health and medical journals.

8.9. Australian Family Physician (AFP)

When you join the RACGP as a member you will receive free copies of the AFP which is RACGP's official publication. If you are a member and are not receiving your copy contact the RACGP T: 02 9886 4700.

8.10. Continuous Home Evaluation Clinical Knowledge (CHECK) program

CHECK is a monthly self education program which runs from January to December each year. The program provides a range of cases written by expert clinicians. Each case includes a brief clinical scenario followed by a series of questions designed to bring out the important issues for general practitioners to consider in the clinical history, examination, investigation and/or management of a problem. As an RACGP member you will receive a 12 month subscription free of charge.

CHECK also provides registrars with excellent exam preparation.

For further information visit www.racgp.org.au/check

9.0 registrar assessment and evaluation

Registrars at NCGPT are assessed in a variety of ways to ensure the highest quality training is received. These include:

9.1. Training appraisal (TA) visits

Each registrar requires a minimum of two TA visits per year. They are usually conducted by a medical educator or the Director of Training. On average a TA visit may take up to one hour with perhaps more time spent in the beginning of training.

For those registrars completing terms outside the region, TA visits may be conducted by phone.

Areas covered in this appraisal may include learning goals, training plans, self care and administrative issues.

Training appraisals, which may occur at the time of an FACT visit, at a separate visit or by telephone, consist of a structured interview which has the purpose of:

1. Assisting the RTP to ensure that the standards that apply to training and supervision are being met in the registrar's current placement
2. Allow timely advice to flow from the medical educator to the registrar regarding training and any future plans
3. Allow the medical educator to assess the completion of mandatory activities and processes.

A registrar must have regular formal training appraisals during their training time, as arranged by a medical educator.

All registrars are encouraged to contact the Director of Training or a medical educator to discuss aspects of training at any time.

9.2. Formative Assessment and Clinical Teaching (FACT) visit

An FACT visit, is the “home visit” of the registrar training program.

Medical educators are given the opportunity to observe the registrar during their consultations, and the FACT visit can be one of the most powerful learning experiences for the registrar.

The goal of the visit is for the FACT Visitor to offer registrars feedback on their consulting style, and for registrars to be given the opportunity to ask the visiting educator any questions regarding issues which may have arisen during the consultation. To facilitate this process, there needs to be sufficient time available between appointments, and so the FACT visitor can ask the practice to schedule no more than two patients per hour, for the duration of the visit. The visit may last from two to three hours.

The RACGP standards require that registrars receive two FACT visits in GPT1 and GPT2, and one in their GPT3 terms. Extra FACT visits may be requested by the registrar or supervisor, and initiated by the local medical educator. FACT visitors may be medical educators or supervisors from another training practice.

Registrars are asked to retain their copy of FACT visits in their learning planner.

For a sample FACT visit form visit and TA see Learning Planner.

9.3. Full day release and workshop evaluations

The NCGPT education team values the feedback it receives and uses evaluations to inform and drive improvements to the program. Reflection and feedback also enhance the learning of registrars. All teaching sessions are evaluated either by written or spoken word. We thank you for your honest and constructive responses.

9.4. Direct observation of registrar (by a supervisor)

This is an activity that may be performed by your supervisor which involves formal assessment of a minimum of three patient consultations. This information is then assessed by NCGPT medical educators.

9.5. Feedback

Supervisors are encouraged to give feedback to registrars three times during each term.

10.0 racgp fellowship (fracgp)

The Fellowship of the Royal Australian College of General Practitioners (FRACGP) is the end point of training for general practice at NCGPT. The aim of fellowship is to assess competence for working in unsupervised general practice.

The FRACGP exam comprises of three separate components (two written components and one clinical component with the written component now available online)

Written components

- Applied Knowledge Test (AKT)
 - 150 questions to be completed in four hours
- Key Feature Problems (KFP)
 - 26 questions to be completed in three hours

Clinical component

- Objective Structured Clinical Examination (OSCE)
 - Consisting of 14 clinical cases. It takes approximately four hours.

Registrars are required to be a member of the RACGP prior to enrolling in any examination component. A **Basic Life Support (BLS) certificate dated no more than 3 years prior to the closing date for exam applications is a requirement for enrolment.** Before enrolling, candidates are required to read the RACGP Assessment Handbook for Candidates and the Assessment Policies. As of 2009, you may enrol in any of the following:

- The AKT only. This is a prerequisite to the KFP and OSCE. You must pass the AKT before you are allowed to undertake the OSCE,
- The AKT and KFP and enrol in the OSCE later in the year once the AKT results are released. You are able to sit the AKT and KFP on the same day regardless of the AKT performance outcome,
- The AKT and OSCE and enrol in the KFP later in the year. If you choose this option and do not pass the AKT you will not be able to proceed with the OSCE assessment. You will be eligible for a refund of the OSCE and withdrawal fees will apply,
- All three segments AKT, KFP and OSCE. If you choose this option and do not pass the AKT you will be eligible for a refund of the OSCE. Withdrawal fees will apply.

Registrars may sit for the AKT following GPT1 provided the hospital year has been completed or RPL with time reduction has been approved. The KFP and OSCE cannot be attempted until GPT2 has been completed.

For further information on the FRACGP examination, including the assessment handbook, visit www.racgp.org.au/assessment and use the Quick Links education toolbar.

For registrars, all enrolments require endorsement from the RTP.

NCGPT presents an exam information session in each node once a term. A practice clinical exam is provided for all registrars sitting the exams yearly where possible. As well, registrars are encouraged to discuss exam preparation with their supervisor and ME.

Study groups are recognised as a helpful method to prepare for exams also. See section 7.4 Study Groups for further information.

11.0 acrrm fellowship (facrrm)

Fellowship of ACRRM is the endpoint of vocational preparation for rural and remote medicine. The ACRRM pathway is recognised as a viable alternative route to full vocational registration.

Fellowship of ACRRM will be awarded by application from the candidate following demonstration of satisfactory completion of all training and assessment requirements. The FACRRM examination comprises of five separate components:

- Multi Source Feedback (MSF)
- Mini Clinical Evaluation Exercise (miniCEX)
- Multiple Choice Question (MCQ)
- Structured Assessment Using Multiple Patient Scenarios (StAMPS)

Registrars are also required to complete a Procedural Skills Logbook 4 RRMEO modules and a minimum of two ACRRM approved emergency course in order to complete training.

ACRRM employs a range of criteria for aspects of training and experience to assess RPL that can be used for credit towards attainment of the ACRRM fellowship. This criteria includes participation in a relevant training program and clinical practice in rural and remote medicine.

The names of successful candidates for fellowship will be added to the college's vocational register indicating that the doctor has attained the necessary skills, knowledge, behaviour and experience to be considered a qualified specialist in the discipline of Rural and Remote Medicine.

FACRRM is recognised as a generalist qualification for Medicare Australia and MBS purposes.

Registrars should contact ACRRM and work with their medical educator to determine their RPL status within the first 12 months of entry into the training program (AGPT) in order to make the best use of their training time. Interested registrars will be advised about the ACRRM assessment process by the ACRRM medical educator.

NCGPT offers advice and mentoring as well as a diversity of experience for this pathway. This may be via placements at procedurally focussed practices, small rural hospital work, or placements with the NSW GP Procedural Program. Support to access a procedural post is through the NCGPT GP Procedural Training Program (GPPTP) Manager, Bruce Barling. ACRRM mentorship is provided by Dr Linda Brown, medical educator, NCGPT. See section 7.5 Who to Contact of this document for contact information.

For further information on the ACRRM program and fellowship see www.acrrm.org.au/assessment

12.0 opportunities for other qualifications and experience

In order to enhance the rural training of our registrars, NCGPT provide particular attention to assisting registrars to develop their learning plans. This will help to prepare registrars for rural practice or to progress towards an advanced rural award (the fellowship in Advanced Rural General Practice or ACRRM Fellowship) during their vocational training. NCGPT encourages and helps facilitate experiences that prepare registrars for the challenges of general practice in a variety of settings. These include the following:

12.1. Hospital

Post-intern phase of hospital where doctors may have the ability to focus on medical areas not previously covered in their earlier hospital training and which focus on their future roles as general practitioners. These include:

- Anaesthetics
- Dermatology
- Orthopaedics
- Rehabilitation
- Obstetrics and Gynaecology
- Emergency Medicine
- Psychiatry
- Infectious Diseases
- General Medicine
- Ophthalmology
- ENT
- Geriatrics
- Urology

12.2. Academic

If your interests lie in research or teaching, academic posts can be organised on an individual basis.

Individual registrars make their applications through GPET. Applications are sought twice per year. NCGPT are able to provide assistance with your application. These include:

Academic general practice posts

These posts enable registrars to gain training and experience in an academic environment to develop appropriate academic skills, including planning and evaluation of teaching and research activities. The positions provide salary funding for up to six months full time academic training in addition to the current three years of training. Applicants who intend to undertake a research project during their academic post may apply for the RSRF (see below) for funding to that project. For further details visit www.agpt.com.au/TrainingPosts/Academictraining/

Registrar Research Fund (RRF) Grants and Research Prize

The RRF aims to encourage research within the field of General Practice. For further information visit www.agpt.com.au/TrainingPosts/Academictraining/

Registrar research workshop

The registrar research workshop is an annual, three day intensive workshop which aims to introduce interested registrars to all stages of the research process. Academic GPs from around the country guide participants from refining a question all the way through to dissemination of results. Each year 25 registrars are funded to attend the event. For further details visit www.agpt.com.au/TrainingPosts/Academictraining/

For further information on research and academic opportunities contact the Registrar Research and Development Officer (RRADO) at GPET, T: 1300 658 515 or E: rrado@gpet.com.au

12.3. Extended skills training

Registrars are required to undertake six months of extended skills training relevant to general practice. Extended skills training may be undertaken in a variety of different settings or within the general practice setting. An extended skills training unit taken outside general practice may be undertaken at any time during the registrar's training. Extended skills training in general practice can only be undertaken after the completion of GPT1, GPT2 and GPT3. Extended skills training units must be approved by NCGPT's Director of Training and are arranged on an individual basis.

For further information on extended skills training see section 3.5 extended skills in General Practice.

12.4. Advanced Rural Skills Post (ARSP) RACGP

This is an optional fourth year for all registrars. ARSPs can be organised on an individual basis (subject to availability) in:

- Aboriginal health
- Adult internal medicine
- Anaesthetics
- Child and adolescent health
- Emergency medicine
- Mental health
- Obstetrics and gynaecology
- Advanced obstetrics and gynaecology
- Surgery
- Small town rural GP - an opportunity to design a curriculum to meet the needs of an individual rural GP. This is a flexible post which can be designed around your needs and in a location to suit you.

Some terms may be completed as a six month extended skills post as part of core training.

Advanced Specialised Training Curricula (AST) ACRRM

The AST Component of training towards FACRRM is generally a 12 month (2 years for surgery) program to attain advanced skills in a particular aspect of rural and remote medicine.

Curricula exist in the following areas each with their own assessment and completion requirements.

- Aboriginal and Torres Strait Islander Health
- Adult Internal Medicine
- Anaesthesia
- Emergency Medicine
- Mental Health
- Obstetrics and Gynaecology
- Population Health
- Remote Medicine
- Rural Generalist Surgery
- Paediatrics

More information available from the ACRRM Training Advisor and the website www.acrrm.org.au

12.5. Aboriginal health training posts

Aboriginal health is a national and regional health priority. There are five Aboriginal Community Controlled Health Organisations (ACCHOs) in the NCGPT region offering registrars the opportunity for a rewarding cultural experience. Good supervision ensures that the registrar feels well supported. The registrar is considered a highly valued member of the team and is generously welcomed by the community. The work is extremely satisfying both medically and personally.

For further information speak to your medical educator or contact the NCGPT Director of Training.

NCGPT ACCHOs

- Bulgarr Ngaru Medical Aboriginal Corporation, Grafton
- Bullinah Aboriginal Medical Service, Ballina
- Casino Aboriginal Medical Service, Casino
- Durri Aboriginal Corporation Medical Service, Kempsey
- Galambila Aboriginal Health Service Inc, Coffs Harbour

12.6. GP Procedural Training Program (GPPTP)

In association with NSW Health, NCGPT offers GPs and GP registrars the opportunity to participate in procedural training in the region. The initiative offers posts in the following skill areas:

- Obstetrics and Gynaecology
- Advanced Obstetrics and Gynaecology
- Anaesthetics
- Emergency Medicine
- Mental Health
- Surgery
- Women's Health Certificate

Procedural training can be counted as part of hospital training, as an extended skills post or as an advanced rural skills post in working towards the FACRRM or FARGP. Some posts may be undertaken on a part time basis. For more information, please contact the NCGPT program manager, Bruce Barling.

12.7. Fellowship in Advanced Rural General Practice (FARGP)

The FARGP provides an educational program to complement and reinforce training or experience in rural general practice. It may also be used to acquire new enhanced rural skills. It is closely integrated with the RACGP Curriculum for General Practice and Advanced Rural Skills Training curricula.

The FARGP award is an appropriate qualification to be used for providing incentives to recruit and reward doctors who continue to work in rural general practice. It is also a suitable qualification for recognition by hospitals for the purpose of visiting medical officer rights.

For further information contact the RACGP Rural Dena Livaditis T: 1800 636 764
E: dena.livaditis@racgp.org.au or the NCGPT DOT, Christine Ahern T: 02 6681 5711
E: christinea@ncgpt.org.au

12.8. Enhanced rural training

As previously stated, NCGPT encourages registrars to develop the skills and knowledge required for delivering rural general practice and remote rural general practice. The RTP provides access to reimbursement of registration fee at the discretion of the DOT and subject to funding availability to rural orientation programs, extended skills posts, advanced rural skills posts and competency based skills courses designed to prepare registrars for rural and/or remote practice. Courses designed to enhance emergency and other skills are outlined below. For further information about funding please contact the NCGPT Director of Training.

12.8.1. Emergency courses

Early Management of Severe Trauma (EMST) course

The EMST course is an intensive and interactive course in the management of injury victims in the first one to two hours following severe injury. Emphasis is placed on life-saving skills and a systematic clinical approach. The course comprises of lectures, practical skill stations, case scenarios and discussions.

Assessment is continuous throughout each stage of the course and includes both pre-course and post course MCQ tests and initial assessment scenarios. The basis of the course is to teach a system of care after injury to provide the participant with the basic knowledge necessary to:

- Assess the patient's condition rapidly and accurately
- Resuscitate and stabilise the patient according to priority
- Determine if the patient's needs exceed facilities capabilities
- As appropriate, arrange safe transfer to definitive care
- Assure that optimum care is provided.

For further information see www.surgeons.org

Advanced Paediatric Life Support (APLS) course

APLS Australia, is a group committed to improving the early management of acutely ill and injured children. The course has the support of the Australasian College for Emergency Medicine, Australian College of Paediatrics and the College of Rural and Remote Medicine. Courses are conducted throughout Australia on a regular basis. The course content includes:

- Life support - GPT1 and GPT2
- Serious illness
- Serious injury
- Practical procedures, including radiology and pain management.

The course calendar is available at <http://www.apls.org.au/Courses>

Emergency Life Support (ELS) course

The two day course teaches a systematic approach to the emergency management of any seriously ill patient. There are 18 participants per course with skill station groups of three participants per instructor. The course content is a mix of lectures, interactive group discussions, skill stations, clinical scenario assessments and written tests. Participants receive a comprehensive manual which contains material for the skill stations and lectures. It encapsulates a body of knowledge and a range of skills which are the basis for safe and effective practice of emergency medicine. The manual can reside in emergency departments as a reference book for isolated doctors.

For further information see www.asem.org.au

Advanced Life Support (ALS) course

Register for the ALS course and learn some vital patient care skills. The two-day course is coordinated by highly qualified, experienced facilitators and utilises workstations to assist the integration of theory into practice. During the workshop, the participants actually get to utilise the equipment, perform the acts and manage the arrest scenarios themselves. The workshop content includes:

- Common causes of cardiac arrest
- Assessment of the compromised person
- Review basic life support
- Advanced airway management
- Intubation procedure (incl. assessment)
- Recognising and managing life-threatening arrhythmias
- Emergency drugs
- Defibrillation (incl. assessment)
- Transcutaneous (external) pacing (incl. assessment)
- ALS algorithms
- Practice and assessment of megacode management.

For further information see www.hcts.com.au

Advanced Life Support in Obstetrics (ALSO) course

The ALSO course is a theoretical and practical course designed to assist health professionals develop and maintain the knowledge and practical skills to manage emergencies that may arise in maternity care.

The procedures and approaches covered in the ALSO course are reasonable, consistent and evidence based which enable everyone to not only identify those at risk of obstetric emergencies but also to manage emergencies when they arise.

Rural Medical Emergency course

The purpose of this course is to provide rural emergency doctors and nurses with cross domain, team based learning opportunities using medical simulation, incorporating clinical knowledge, procedural skills and crisis resource management skills and behaviours. And secondly, to diagnose, investigate and manage common and important medical emergencies in rural and remote practice. The workshop will use a variety of teaching methods such as medium fidelity simulation, small group case studies, procedural skills stations and interactive lectures to cover a range of topics. The content is relevant to rural and remote practice.

Topics include crisis resource management, toxicology, retrieval, respiratory and cardiac emergencies, DKA, OandG, paediatrics, clinical reasoning and diagnostics.

For further information contact Health Workforce Queensland T: 07 3105 7800 E: admin@healthworkforce.com.au W: www.healthworkforce.com.au

Pre-Hospital Trauma Life Support (PHTLS) course

The PHTLS course is a unique two-day multidisciplinary continuing education program designed to increase knowledge and skills in delivering critical care in front line pre-hospital trauma care and the handling of trauma patients. PHTLS teaches students to deal with trauma where there may be some delay in transferring the patient to a healthcare facility. The PHTLS course consists of a mixture of lectures and practical skills stations. Students on a PHTLS course learn to identify the mechanism of injury, interpret signs and symptoms, recognise life-threatening injuries, perform appropriate interventions and identify a trauma patient with multiple injuries.

For further information contact Queensland Health Skills Development Centre T: 07 3636 6208 or visit www.sdc.qld.edu.au/phtls.htm

12.8.2. Other courses to extend skills

The purpose of these grants is to increase the quality and accessibility of clinical skills training to NCGPT registrars by providing subsidies to assist in undertaking clinical skills training similar to, but not necessarily restricted to, the courses below.

Procedural training (see section 12.6 GP procedural training program) also offers registrars the opportunity to enhance skills relevant to rural general practice.

For further details contact the NCGPT Director of Training.

Advanced Life Support Recertification Program

The workshop content includes:

- Information update, review of guidelines and skills
- Intubation procedure (including assessment)
- Defibrillation (including assessment)
- Transcutaneous Pacing (including assessment)
- ALS Algorithms
- Practice and assessment of megacode.

For further information visit www.hcts.com.au/courses.php

Family Planning Association (FPA) Health Refresher Day

The course content includes:

- Contraception
- HIV/AIDS
- Men and Boys
- Menopause
- Sexual health
- Sexually transmitted infections (STIs/STDs).

To register visit www.fpnsw.org.au/education/

Sexual Health and Family Planning Australia Certificate in Sexual and Reproductive Health (Doctors Course)

This is recommended for all registrars wishing to increase their knowledge base and clinical skills in sexual and reproductive health. The course aims to:

- Expand knowledge of reproductive health and contraceptive techniques
- Further develop communication skills in the areas of contraceptive choice, STIs, common gynaecological problems, pregnancy issues and sexuality
- Develop clinical skills that complement the theoretical aspects of the course

The course has three modules, all of which must be completed satisfactorily to gain the Family Planning Australia Certificate. The three modules may take up to four months to complete.

To register see www.fpnsw.org.au/education/

Diploma in Child Health (DCH)

This is recommended for registrars wishing to increase their knowledge and skills in paediatric medicine. The DCH aims to:

- Encourage the principles of evidence based practice as part of ongoing paediatric medical education
- Understand the health care needs of the patient and their family in the context of their physical and geographical location
- Encourage attitudes of respect and consideration and promote the role of advocacy for all children and their families
- Encourage age, developmental, socio-economic, cultural and language appropriate communication and interaction with children and their families.

For further details or to register go to www.chw.edu.au/dch/2010/australia/

13.0 important dates

13.1. NCGPT educational calendar

Please note: Information contained within this calendar reference is true and correct at the time of publishing. NCGPT reserves the right to make changes to dates and sessions as necessary. Every effort will be made to ensure this calendar is updated on a regular basis with the most current information. Please check our website www.ncgpt.org.au/events

Note: rural rotators are required to confirm their educational commitments with their (home) regional training provider.

Please contact the NCGPT Education Officer, Neil Bambrook, if you have any questions regarding the calendar
T: 02 6681 5711 E: neilb@ncgpt.org.au

23 January	Orientation Day All new registrars	Coffs Harbour and Port Macquarie
24 January	Orientation Day All new registrars	Ballina
1 – 3 February	Foundations to General Practice Workshop Three-day workshop GPT1 registrars	Coffs Harbour
16 February	Emergency Medicine / Immunisation Full day release GPT1 and GPT2 registrars	Port Macquarie
16 February	Emergency Medicine Full day release GPT1 & GPT2 registrars	Ballina
17 February	Emergency Medicine Full day release GPT1 & GPT2 registrars	Coffs Harbour
25 February	RACGP 2012.1 AKT / KFP exams	
8 March	Paediatrics Full day release GPT1 & GPT2 registrars	Port Macquarie
8 March	Dermatology Full day release GPT1 and GPT2 registrars	Ballina
9 March	Paediatrics Full day release GPT1 and GPT2 registrars	Coffs Harbour
10 March	ACRRM MCQ exam 2012.1	
29 March	Immunisation / Travel Medicine Full day release GPT1 and GPT2 registrars	Ballina

30 March	Dermatology Full day release GPT1 and GPT2 registrars	Coffs Harbour
12 April	Dermatology Full day release GPT1 and GPT2 registrars	Port Macquarie
12 April	Sexual Health Full day release GPT1 and GPT2 registrars	Ballina
13 April	Immunisation / Travel Medicine Full day release GPT1 and GPT2 registrars	Coffs Harbour
12 May	2012.1 RACGP OSCE exam	Brisbane, Sydney
17 May	Mental Health / Drug & Alcohol Full day release GPT1 and GPT2 registrars	Port Macquarie
17 May	Mental Health Full day release GPT1 and GPT2 registrars	Ballina
18 May	Mental Health Full day release GPT1 and GPT2 registrars	Coffs Harbour
19 – 20 May	ACRRM StAMPS Exam 2012.1	
6 - 8 June	Life Stages workshop GPT1	Angourie
21 June	MSK Full day release GPT1 and GPT2 registrars	Port Macquarie
21 June	Youth Health Full day release GPT1 and GPT2 registrars	Ballina
22 June	Youth Health Full day release GPT1 and GPT2 registrars	Coffs Harbour

13.2. FRACGP examination dates

Fees for 2012

AKT:	\$1620.00
KFP:	\$1620.00
OSCE:	<u>\$3220.00</u>

Total: \$6460.00

2012.1 Exam

Enrolment: Closed

Written: 25th February 2012

Clinical: 12th May 2012

2012.2 Exam

Enrolment: Not yet available

Written: 4th August 2012

Clinical: 21st October 2012

For information regarding RACGP fellowship see section 10.0 RACGP examination.

For up to date information on the FRACGP examination components and examination dates visit www.racgp.org.au/exam

13.3. FACRRM examination dates

MSF can be completed at the candidates choosing, and candidates can enrol at any time.

2011.1 ACRRM examination

MiniCEX	August – December 2011	(Enrolments close 8 July 2011)
MCQ	10 September 2011	(Enrolments close 15 July 2011)
StAMPS	23 and 24 July 2011 or 3 and 4 December 2011	(Enrolments close 6 May 2011) (Enrolments close 23 September 2011)

For information regarding ACRRM fellowship see section 11.0 ACRRM fellowship.

For up to date information on the FACRRM examination components and examination dates visit www.acrrm.org.au/assessment

14.0 registrar support

14.1. Financial assistance

14.1.1. Relocation assistance

North Coast GP training provides relocation assistance to NCGPT registrars both moving into the north coast region and within the region during their training. It provides a relocation allowance of up to \$2000 (incl. GST) per move, per calendar year for the duration of training. While some flexibility may be negotiated, relocation expenses are not cumulative. Legitimate relocation expenses include removalists, Internet connection, and telephone connection. Relocation expenses are paid after the expense has been incurred and upon production of receipts.

14.1.2. Rental assistance

Once registrars have relocated to the region NCGPT endeavours to help them complete their training without moving house. If, however, NCGPT requires a registrar to undertake a term at a location where commuting from his or her home is not feasible, it will provide rental assistance to support a second residence. The level of rental assistance must first be agreed with the CEO before a registrar enters into any rental agreement.

14.1.3. Travel and accommodation (training related)

North Coast GP Training reimburses registrars for training-related travel expenses and accommodation. Airfares must be booked through the NCGPT travel agent, Ballina Cruise and Travel T: 02 6686 3155. Travel expenses related to travel to and from half-day educational release meetings (mileage over 120kms only) are reimbursed upon receipt of a travel expense claim form indicating the origin and destination of the travel.

Accommodation is paid for in one of two ways:

- NCGPT can book and pay for accommodation on behalf of the registrar, or
- The registrar can book and pay for his or her own accommodation and be reimbursed by presenting an original invoice to NCGPT upon his or her return (keep in mind there is a \$ limit).

14.1.4. Course fees

NCGPT may reimburse course fees for approved and recommended courses by prior agreement with the Director of Training. Funding availability may vary from year to year. Registrars must present original receipts and evidence of successful course completion. See section 12.8 Enhanced rural training for further information.

14.1.5. General Practice Rural Incentive Payments Scheme (GPRIPS)⁴

a. What is the new General Practice Rural Incentives Program?

- The new General Practice Rural Incentives Program (GPRIP) will replace the Registrars Rural Incentive Payments Scheme (RRIPS), which applied to GP registrars on the AGPT program, and the Rural Retention Program, which applied to GPs. GPRIP will also include a Relocation Incentive Grant component.
- The new incentives program will provide a consistent set of incentive payments that applies on an equivalent basis for GPs and registrars practicing in rural locations. Under RRIPS, GP registrars were eligible for higher grant payments. This new program will streamline the administration of incentive payments and provide parity between GPs and GP registrars.
- The level of incentives will now be based on the Australian Standard Geographical Classification – Remoteness Areas (ASGC-RA) classification system.

⁴ Factsheet from www.healthworkforce.com.au

b. When will the General Practice Rural Incentives Program Start?

GPRIP will start from 1 July 2010. For GPs, this means payments falling due from the September quarter onwards will be calculated according to the new rules.

c. How will GPRIP work for GPs?

- The retention component will work in a similar way to the current Rural Retention Program. However, the payment rates and qualifying periods will change. Incentives will be paid according to a sliding scale based on the ASGC-RA category and the length of time in a rural location outlined below.

ASGC-RA Classification	Period of time (years) in a rural location				
	0.5	1	2	3-4	5+
RA 2		2,500	4,500	7,500	12,000
RA 3	4,000	6,000	8,000	13,000	18,000
RA 4	5,500	8,000	13,000	18,000	27,000
RA 5	8,000	13,000	18,000	27,000	47,000

- Under GPRIP, doctors will become eligible for an initial payment earlier and will be able to receive much higher retention payments than were previously available to GPs.

d. Which payment rate will I receive if I have already been receiving payments under the current Rural Retention Program?

- The payment rate will be determined based on the number of years (measured in active quarters) of service the doctor has completed in one or more ASGC-RA 2-5 locations.

e. What will happen if the new payment rate is lower than it would have been under the Rural Retention Program?

- Receiving RRP payments

Doctors who become eligible for an RRP payment before 1 July 2010 (payments falling on or before the June quarter 2010) and have maintained their continuous service requirements will receive whichever is the greater of the new payment rate or the payment they would have received had the Rural Retention Program continued.

- Completing RRP qualifying period

Doctors that, at 1 July 2010, are completing a qualifying period under the Rural Retention Program and have maintained their continuous service requirements will receive whichever is the greater of the new payment rate or the payment they would have received had the Rural Retention Program continued.

- New to rural areas from 1 July 2010

Doctors that move to a rural area after 1 July 2010 will be subject to the GPRIP payment rates and rules.

f. Are Specialists eligible for GPRIP?

- GPRIP is aimed at retaining general practitioners. The services eligible for GPs will be the same as those currently eligible under the Rural Retention Program. These are clinical services that are equivalent to the General Medical Services Section of the Medicare Benefits Schedule book. This includes:

Category 1 – Professional attendances

Category 2 – Diagnostic procedures and investigations

Category 3 – Therapeutic services

Eligible services do not include diagnostic imaging, pathology services, dentistry or optometry.

g. What is the ASGC-RA category of my practice location? How can I find out which ASGC-RA category a location is in?

- A web site has been established for people to determine the ASGC-RA category of any location. This can be accessed by visiting www.doctorconnect.gov.au and clicking the link on the homepage called Remoteness Area Locator.

h. Will there continue to be a Flexible Payments System under GPRIP?

Yes. The Flexible Payments System will continue but assessment will transfer to the new rules for the Program.

i. Will my eligibility accrued as a Registrar continue when I become a GP?

Eligibility gained by Registrars can be retained on becoming a GP. For this to happen the period from the last Registrar payment to the first GP payment must satisfy the continuous service requirements under the rules for GPs (this means maintaining four active quarters in every eight)

14.1.6. HECS reimbursement scheme

This initiative aims to promote careers in rural medicine and increase the number of doctors in rural and regional areas in the longer term. Participants in the scheme who undertake training or provide medical services in designated rural and remote areas of Australia, will have one fifth of their HECS medical fees reimbursed for each year of service.

For further details and an application form visit www.health.gov.au/hecs-reimbursement-scheme

Any questions relating to the scheme should be directed to Medicare Australia T: 1800 010 550.

14.2. Registrar safety

All registrars are strongly advised to disclose and discuss with their supervisor/medical educator any medical condition which may place themselves or their patients at risk.

In some cases, disclosure to the relevant authority may be advised.

This is particularly important in view of the work patterns of registrars in different hospital rotations and GP attachments. Different shifts, rosters, after hours and on-call duties are all aspects of the work, which registrars need to be aware of and manage effectively.

Discussion with supervisors/medical educators will enable appropriate strategies for management of the work environment to minimise the potential for harm to themselves or patients.

14.3. Registrar well-being

North Coast GP Training places the highest value on the health and wellbeing of its GP registrars and supervisors. The stresses and challenges of GP training combined with life events and circumstances may, at times, affect the wellbeing of our supervisors and registrars. If you feel that you (or a colleague) has or is, at risk of developing a health problem we encourage you to seek appropriate help and maintain close and regular contact with your own GP. GP registrars should also consider approaching their supervisor, the Director of Training or the RLO if they feel they are in need of assistance.

If you feel that a colleague, registrar, supervisor or other is at risk, you should discuss with one of the NCGPT MEs, DOT or RLOs. The Director of Training may be able to assist registrars or supervisors with health difficulties to find and access appropriate services and resources in our region. All information will be treated as confidential unless there is deemed to be a serious risk to the individual.

For further advice and support the Doctors Health Advisory Service T: 02 9437 6552 (24 hours) offers an independent, confidential service for doctors with health problems in the following areas:

- Alcoholism
- Clinical competence
- Drug addiction (especially narcotics)
- Financial difficulties
- Legal and ethical issues
- Marital breakdown
- Physical impairment
- Psychiatric disorders
- Just having trouble coping
- Isolation

14.4. Remediation

NCGPT aims to deliver the highest quality education and support to GP registrars and supervisors. We also have a responsibility to the community to train registrars to certain expected standards and maintain public safety during training.

From time to time, it is brought to NCGPT's attention, that a registrar is perceived to be performing below the expected standard for their particular level of training, with regard to knowledge, skills, attitude and or behaviour. Substandard performance may be due to clinical incompetence, conflict arising from current workplace environment, or psychological impairment.

The role and responsibility of NCGPT is to identify and confirm significant areas of concern via a process called focused intervention. If necessary, a remediation plan will be developed and implemented.

Professional or ethical misconduct is a matter for immediate referral to the Medical Board of NSW.

The NCGPT remediation policy follows key principles - it is a transparent process, has clear guidelines which are well documented and defensible, has clear communication between all affected parties, and thoroughly documents all proceedings and actions. This policy can be obtained by contacting NCGPT.

14.5. Registrar and supervisor dispute resolution

While NCGPT makes every effort to ensure that a registrar's training on the north coast is both valuable and enjoyable, it accepts that difficulties arise from time to time between a registrar and his or her supervisor.

When disagreements arise NCGPT will ensure the parties involved discuss the problem and attempt to reach a successful resolution. Whenever a problem or potential problem arises registrars should contact one of the NCGPT RLOs as soon as possible.

There are five stages to NCGPT's dispute resolution process.

Stage one

The registrar and supervisor and/or practice manager discuss the matter and attempt resolution. If the matter cannot be resolved at this level, the registrar should contact the NCGPT DOT.

Stage two

The registrar, GP training supervisor, and DOT discuss the matter to seek a resolution. Any resolution adopted must be by consensus. The group may meet face to face, or by teleconference. Once a resolution has been agreed the DOT should provide a written report to the CEO who maintains a formal record of the agreed outcome.

Stage three

If the matter cannot be resolved at stage two a group consisting the registrar, the GP supervisor, the registrar liaison office, the supervisor liaison officer, the DOT, and the CEO should be convened by the DOT.

The CEO will chair the meeting. The group may meet face to face or by teleconference. Any resolution adopted must be by consensus.

Stage four

If the matter cannot be resolved at stage three the matter must be referred to the board of NCGPT by the CEO. Both the registrar and GP supervisor must be present and may be represented or accompanied by nominee of their choice. The nominee, however, should not be a solicitor or legal representative. The meeting may be face to face or by video or teleconference.

Each of the parties involved will be given an opportunity to put his or her case to the Board who may, in turn, ask questions of those present. After hearing submissions from both parties the Board will deliberate on the matter in private. A resolution of the board must be reached by majority vote. If the board is evenly split regarding appropriate action, the matter may be referred to the GPET Appeals Tribunal.

Stage five

If the matter cannot be resolved at stage four the registrar may make a written application for it to be heard by the GPET Appeals Tribunal.

14.6. Registrar criteria for transfer

All registrars accepted into NCGPT are expected to complete their training in the region. North Coast GP Training recognises, however, that from time to time unforeseen or unexpected circumstances occur which may require the registrar to take leave or request a temporary or permanent transfer to another region. A transfer will be considered under the following conditions:

- The registrar's mental or physical health needs necessitate a transfer to another location for appropriate care, provided this need developed after the registrar accepted a placement, and provided this need could not be reasonably foreseen at the time of acceptance of a place in that regional training provider's program. In this case supporting medical documentation must be provided;
- The registrar's spouse/recognised partner or immediate dependent family has suffered major illness or trauma requiring transfer to another location for appropriate care (supporting documentation may be required) and provided this move could not be reasonably foreseen at the time of acceptance of a place in that regional training provider's program;
- The registrar's spouse/recognised partner is required to move to a location where commuting from the region is not feasible, provided this move could not be reasonably foreseen at the time of acceptance of a place in that regional training providers program;
- The registrar's child/children is/are required to access ongoing specific services not available within a commutable distance, provided this need developed after the registrar accepted a placement, and provided this need could not be reasonably foreseen at the time of acceptance of a place in that regional training provider's program;
- Two registrars of equivalent educational stage of training and in the same training pathway (rural or general) may apply for an exchange between regional providers if all parties agree (eg regional training providers, registrars, GP supervisors) Transfer costs, including relocation expenses, would be the registrar's responsibility in these cases;
- Australian Defence Force (ADF) registrars who are required to move to another region because of ADF posting or attachment are permitted to transfer to another regional training provider with training funding appropriately adjusted.

(Note: the availability of training posts cannot be guaranteed under these circumstances);

- Discretionary grounds for transfer may apply under exceptional circumstances and must be approved by the GPET board.

Temporary leave or outplacement

If the reason for transfer is a temporary problem then leave or a temporary 'outplacement' will be considered in the first instance. The registrar can then reapply for a temporary or permanent transfer if the problem persists when the 'outplacement' finishes.

Requesting a transfer

Requests for leave or transfer must be made in writing to the CEO. The request must allow a reasonable amount of time for processing and for a decision to be made. To facilitate the assessment of the application NCGPT may request opinions, advice or further documentation from other interested parties including the registrar's training adviser, GP, or medical specialist. The request and accompanying documentation will then be considered in the registrar's absence by a NCGPT Committee comprising the following staff members:

- Chair of the Board
- Director of Training
- Chief Executive Officer
- Supervisor Liaison Officer
- Registrar Liaison Officer
- Registrar Support Officer

Possible outcomes will be:

- The approval of leave
- A temporary transfer or outplacement
- A permanent transfer
- No exemption if the criteria have not been met
- A request for further information and reconsideration upon the provision of this information.

Generally a transfer will be approved. However then the transfer must be approved by the 'other' requested RTP. The decision of the committee is final and no discussion or appeal of that decision will be considered. If, however, the registrar is not satisfied with the outcome he or she may appeal directly to GPET. An appeal to GPET must be in writing and must be made as soon as practicable after receiving the committee's decision.

15.0 registrar representation

15.1. Registrar Liaison Officer(s) (RLO)

The primary role of the RLO is to act as an advocate for fellow registrars, to provide support and advice and to share information. The RLO is involved in meeting with the education team to provide registrar input into training and other aspects of the training environment.

The RLO is also available to help address any issues or problems that registrars wish to bring to the attention of NCGPT. Registrars should feel comfortable contacting the NCGPT RLOs and know that any discussions will remain confidential.

Your NCGPT RLOs are:

Dr Kirsten Patterson

E: kruffles@hotmail.com

Dr Michael McKeough

E: catalasepositive@hotmail.com

Dr Nina Roberston

E: ninarobertson@rocketmail.com

Any registrars interested in training towards this role are encouraged to contact the NCGPT CEO
T: 02 6681 5711.

15.2. Registrar Support Officer (RSO)

The primary role of the RSO is to support registrars by:

- Assist registrars moving into the north coast region including help with special needs and accommodation,
- Ensure support for registrars' families,
- Establishing and strengthening community and social networks for registrars, and
- Provide support in all aspects of the training program including administration.

Your RSO is Sue Sladden T: 02 6681 5711 E: sues@ncgpt.org.au

15.3. General Practice Registrars Australia (GPRA)

GPRA is the peak, independent, national organisation advocating and supporting GP Registrars in all states and territories in Australia and striving for excellence in general practice education.

For further information visit www.gpra.org.au

16.0 commonly asked questions

1. Where is the north coast?

The north coast of NSW is situated on the east coast of Australia. The North Coast GP Training region stretches from Laurieton in the South to the Queensland border in the north and west to the Great Dividing Range.

2. What teaching do you offer?

NCGPT offers a variety of teaching at regional meetings which aim to complement the teaching registrars receive from supervisors in their practice. Our education program also articulates with the metropolitan workshop programs. Hence the training program is three tiered: in-practice teaching with supervisors, regional educational programs, and workshops conducted in Sydney.

3. How long is the training?

1st yr	Mandatory hospital term* (12 months, four units).
2nd yr	GPT1 (six months, two units) and GPT2 (six months, two units)
3rd yr	GPT3 (six months, two units) and extended skills term may be completed in a gp setting(six months, two units)

AND

	Fellowship Royal Australian College of General Practitioners examination (FRACGP)
4th yr (optional)	Fellowship in Advanced Rural General Practice (FARGP) (two Advanced Rural Skills Posts each six months, two units). Training towards a Fellowship of the Australian
Optional	Fellowship of the Australian College of Rural and Remote Medicine (FACRRM). FACRRM may be completed in addition to FRACGP. Registrars wishing to train towards this fellowship must indicate their preference early on in the training program.

* Registrars who come to our region with considerable hospital experience may apply for recognition of prior learning (RPL) which may reduce training time by up to one year (see section 4.6 Recognition of prior learning). RPL must be approved prior to applying to sit for the FRACGP exam.

The decision to grant time reduction rests with the college state censor after recommendation by the RTP medical educator or director of training.

4. Does NCGPT need to be involved if registrars are doing locums?

The main issue here is supervision. Any registrar wishing to do a general practice locum would need to have completed their second hospital year. The level of supervision and all standards regarding accreditation and teaching would need to be consistent with the registrar's level, i.e. GPT1, GPT2 and GPT3. Locums at small hospitals would need to meet the same criteria. For those doing hospital terms, locums in the same hospital as they are working would generally not be a problem, as long as it did not shorten another mandatory term. The rule of thumb is, if in doubt, please call to clarify. For further information contact the NCGPT DOT.

5. How do I apply for recognition of prior learning (RPL)?

Application forms are available by contacting the NCGPT Registrar Support Officer. Once completed please return to North Coast GP Training to be processed. Guidelines and eligibility are available from the GPET "Guide for GP Registrars" or visit www.agpt.com.au/PoliciesPublications/RegistrarGuide/

Please note it is a GPET requirement that each RPL application is assessed by two medical educators. Recommendations are then forwarded to the RACGP censor who is responsible for application approvals. Applications for RPL must be submitted within the first six months of your GP training.

Refer to section 4.6 Recognition of prior learning for further information.

6. What leave am I entitled to during training?

Each registrar is entitled to two weeks paid annual leave per six month term (a total of four weeks per year during supervised terms). However, registrars may not start their training with a leave term. While employed by hospitals, it is determined by the appropriate award. While working in GPT3 experience leave is by negotiation with employer. Each registrar is also entitled to personal/carers leave of five days per term as per the national minimum terms and conditions for GPT1 and GPT2 registrars (see attachment two).

On application to Director of Training, leave from training may be taken. Not more than two years may be taken, in total. In line with the AGPT's leave from training policy there are three categories as follows:

Cat 1 –

Lawful entitlements, personal, carer, sick, maternity, annual. This is covered under Federal Law

Cat 2 –

Is restricted to a max of 12 months and is for personal, educational and career purposes and must be approved by DOT.

Cat 3 –

In extraordinary circumstances the RTP CEO may approve a one-off extension of 12 months of Cat 2 leave.

Please note, NCGPT is not an employer of registrars and terms and conditions of employment are negotiated with the practice employer. During GPT1 and GPT2, this is determined by the national minimum terms and conditions for GPT1 and GPT2 registrars (see attachment two).

7. Am I being paid correctly?

If you are in GPT1 or GPT2 check the national minimum terms and conditions for GPT1 and GPT2 registrars (see attachment two). In GPT3 check your individual employment contract with the practice. If you are still unsure contact your Registrar Liaison Officer(s).

8. What rural incentive payments will I be eligible for?

1. General Practice Rural Incentive Payments Scheme (GPRIPS)*:

Please refer to section 14.1.6 for all relevant GPRIPS information.

HECS Reimbursement Scheme:

This initiative aims to promote careers in rural medicine and increase the number of doctors in rural and regional areas in the longer term. Participants in the scheme who undertake training or provide medical services in designated rural and remote areas of Australia, will have one fifth of their HECS Medical fees reimbursed for each year of service. Any questions relating to the scheme should be directed to the Medicare Australia's HECS Helpline on T: 1800 010 550. For further details and an application form visit www.health.gov.au/hecs-reimbursement-scheme

9. Can I do part time training?

Yes. Applicants who are unable to engage in full time training may apply to do their training part time. Part time training can be applied for at any stage during the program. Although the hospital year is normally undertaken full time, all other components of the training program can be undertaken on a part time basis subject to approval to do so.

10. Do you offer a Relocation Allowance?

Yes, to approved applicants and up to \$2000 (incl. GST) per move per calendar year for the duration of training. This amount includes assistance with phone and internet connection.

11. Do you offer a Rental Subsidy?

No, unless there are exceptional circumstances. Rental subsidy is available to registrars if they are required to move within the region during training, and they are maintaining another residence within the region at the same time. For registrars relocating to the region on placements from urban regional training providers, rental subsidy may be available from their own regional training provider.

12. When can I sit the FRACGP exam?

After six months of full time equivalent supervised general practice terms (providing requirements for the hospital term have been met), registrars may sit the first component of the RACGP fellowship exam.

Registrars must also have completed their Basic Life Support (BLS) certificate within 36 months of the closing date for exam applications.

13. Do I have to go to another rural area for my rural term?

No. All NCGPT practices are in a rural area so you do not have to leave the region. Those on the rural pathway must work in towns with RA 2 classification which includes all current NCGPT practices.

14. What social and family support is available?

North Coast GP Training's Registrar Support Officer is available to discuss your needs. The regional divisions of general practice and other organisations such as the Rural Family Medical Network also provide support to registrars and their families. Once you have commenced your training term with NCGPT your regional division of general practice will contact you to offer a range of services. Or you can make contact with the networks/divisions within the region or the Rural Family Medical Network.

15. Who do I call if I have problems?

For any enquires, assistance, support and advice contact the Registrar Liaison Officer, Registrar Support Officer, Medical Educator or Director of Training immediately. All enquiries are confidential.

16. Can I enter the GP Procedural Training Program at any time in my training?

Yes, as soon as you have been accepted onto the GP training program.

17. Will the GP procedural training fulfill the ARSP (Advanced Rural Skills Post) requirement of my training?

Yes. For further information see www.ncgpt.org.au/gp-procedural-training

18. Do I need to be enrolled in the Fellowship of Advanced Rural General Practice (FARGP) to enter the GP Procedural Training Program?

No. However, GP Procedural Posts are accredited Advanced Rural Skills Posts (ARSPs) for the FARGP.

19. How much does it cost to enrol in the FARGP in Rural General Practice?

Enrolment is free for registrars provided they are currently undertaking vocational training under the Australian General Practice Training Program.

20. Where do I find all of the applications, forms and documents that I need?

All NCGPT forms and documents are available on the NCGPT website www.ncgpt.org.au/content/forms-and-downloads

21. What do I do if I am interested in training to become a medical educator?

NCGPT welcomes interest from registrars in career enhancement through training to become a medical educator. Please contact the Director of Training for further information.

22. Can I start training with a leave term?

No. Training cannot start with a leave term unless it is maternity leave.

23. What does NCGPT do with any personal information I give them?

NCGPT is committed to protecting the personal information of registrars and to ensure that the use of personal information is respected and maintained in accordance with the provisions of the Privacy Act 1988 (as amended) specifically the National Privacy Principles. See attachment one for NCGPT's Privacy Policy and use of Personal Information.

17.0 attachments

17.1. Attachment one: NCGPT privacy policy use of personal information

NCGPT is committed to protecting the personal information of members, registrars, supervisors, GPs, staff, and others, and to ensure that the use of personal information is respected and maintained in accordance with the provisions of the Privacy Act 1988 (as amended) specifically the National Privacy Principles.

The national privacy principles

Schedule three of the Privacy Act sets out the ten NPPs, which legally bind organisations in the way they must handle personal information. The NPPs cover collection (NPP1), use and disclosure (NPP2, data quality (NPP3), data security (NPP4) openness (NPP5), access and correction (NPP6), identifiers (NPP7), anonymity (NPP8), transborder data flows (NPP9) and sensitive information (NPP10).

These NPPs regulate the way many private sector organisations collect, use, keep secure and disclose personal information. They give individuals the right to know what information an organisation holds about them and a right to correct that information if it is wrong. An organisation must take reasonable steps to make individuals aware that it is collecting personal information about them, the purposes for which it is collecting the information, and who it might pass the information on to. There are some restrictions on what an organisation can do with the personal information it collects and when it can disclose personal information or transfer it overseas.

Except for some special circumstances, individuals have a right to get access to personal information an organisation holds about them and to have the information corrected or annotated if the information is incorrect, out-of-date or incomplete. Individuals can also make a complaint if they think information about them is not being handled properly.

For more information about privacy issues in Australia, visit the website of the Australian Federal Privacy Commissioner www.privacy.gov.au

Personal information held by NCGPT

North Coast GP Training collects personal information about registrars and supervisors to facilitate GP education and training.

Using and disclosing personal information:

North Coast GP Training will not use or disclose any information without the consent of the individual, unless:

- It is required by law,
- It is necessary to provide a service requested,
- To protect the rights or property of NCGPT, any NCGPT user, or any member of the public,
- To reduce a serious threat to a person's health or safety.

Storage and security of personal information:

North Coast GP Training takes all reasonable steps to keep secure any information held about an individual, and to keep this information accurate and up to date. This information is maintained in individual personnel files in locked cabinets. Electronic information is stored on a secure server that is backed up daily and stored off site.

Staff members and contractors/consultants who provide services related to the NCGPT's information systems, or who have access to personnel records are obliged to respect the confidentiality of any personal information held by the company.

Accessing information:

A registrar, supervisor or member may access personal information kept by NCGPT that relates specifically to him or herself. You will be asked to sign a privacy waiver, on accepting an offer of placement with NCGPT or at an induction event. The form of this waiver is set out below.

NCGPT adheres to the relevant Commonwealth and NSW laws and regulations in its use of personal details. Please refer to NCGPT's privacy policy document. The following consent applies to the uses of your contact details and training information.

North Coast GP Training privacy wavier - explanatory notes

Communication is important

We need to know what you are doing, and you need to know what we are doing. Most of our communication with you - of upcoming events, and individual contacts and enquiries - will be by email. You will be moving locations periodically during your training and email is the best method of communication. It is therefore important that this mode of correspondence be as reliable as possible. For this to occur you need to have access to a reliable and consistent email address.

Registrars are required to advise a reliable email address upon acceptance to the NCGPT training program.

It is the responsibility of registrars to check email regularly, and to maintain the inbox, in order to keep up to date with training program activities. Please ensure that you set your junk email permissions to an appropriate level so that you receive all correspondence from NCGPT staff emails (or alternately add NCGPT staff emails to your safe list and check your junk email regularly).

We need to communicate with various individuals and organisations at times during your training including:

Other training providers (in the event that you transfer to another RTP at some stage)

We may need to forward some of your records including teaching advisory (TA) contacts and formative assessment and clinical teaching (FACT) visit. Similarly, we will need to see copies of these documents if you are transferring to NCGPT.

Other organisations

The regional divisions and networks of general practice in NCGPT's region, are committed to supporting you by providing access to specified education activities and facilities and encourage you to join. We provide the regional divisions/networks of general practice with limited access to trainee contact details whilst you are in their area. This is to ensure their staff can approach you when appropriate and as may be required.

We also require your permission to pass on details of educational activities from other organisations such as the RACGP, ACRRM, and University departments.

The Royal Australian College of General Practice

For registrars seeking fellowship of the RACGP, towards the end of your formal training you will sit the fellowship examination. We need your permission to obtain details of your performance in this examination from the RACGP. This is obviously important in evaluating the effectiveness of our program overall.

North Coast GP Training privacy waiver

1. I consent to my name and contact details being circulated by NCGPT to relevant Divisions of General Practice. I accept that these organisations may notify me of relevant educational activities, membership opportunities and practice support activities.

I consent to NCGPT forwarding relevant information to me from other education providers and professional bodies.

I consent to NCGPT sending and obtaining from other training providers and professional bodies, details of my training, curriculum vitae, contact reports, ECT visits and other documents relevant to my training. I accept that NCGPT may share this information with potential, current and past GP supervisors in the course of my training.

I consent to my contact details being provided to NCGPT Registrar Liaison Officers, other NCGPT registrars, and program personnel.

I give permission for the RACGP to forward to NCGPT details of my performance in the RACGP Fellowship examination.

Signature: _____

Print Name: _____

Date: ____/____/____

17.2. Attachment two: General Practice Training Program national minimum terms and conditions for GPT1 and GPT2 registrars 2012

The 2012 National Minimum Terms and Conditions for GPT1 and GPT2 Registrars document follows on from this page and is also available from the North Coast GP Training website

www.ncgpt.org.au/content/forms-and-downloads



North Coast GP Training
124 Tamar Street
PO Box 1497 Ballina NSW 2478
T: 02 6681 5711
F: 02 6681 5722
www.ncgpt.org.au