

New Basic Training program

2021 Early Adopter Basic Training program requirements

Paediatrics & Child Health



About this document

This document outlines the training program requirements for **Basic Trainees in Paediatrics & Child Health** at early adopter training settings in December 2020 – November 2021 (New Zealand) or February 2021 – January 2022 (Australia).

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Implementation overview

The new Basic Training programs will be implemented over a number of years, starting with an introduction at early adopter training settings in 2020.

	Training year			
Phase of training	2020	2021	2022	2023
Clinical/Training year period	NZ Dec 19 – Nov 20 AU Feb 20 – Jan 21	NZ Dec 20 – Nov 21 AU Feb 21 – Jan 22	NZ Dec 21 – Nov 22 AU Feb 22 – Jan 23	NZ Dec 22 – Nov 23 AU Feb 23 – Jan 24
Foundation (BT1)	New program introduction Early adopter settings (group 1) PREP All other settings	New program Early adopter settings (groups 1 and 2) PREP All other settings	New program All training settings	New program All training settings
Consolidation (BT2)	PREP All training settings	New program Early adopter settings (groups 1 and 2) PREP All other settings	New program All training settings	New program All training settings
Completion (BT3)	PREP* All training settings	PREP* All training settings	New program Early adopter settings (groups 1 and 2) PREP All other settings	New program All training settings

* The Written Examination will be blueprinted to the new program knowledge guides (part of the curricula standards) from 2020 onwards.

Image of New Basic Training programs implementation schedule

Early adopter implementation

Early adopter training settings will work with the RACP to lead the rollout of the new Basic Training programs. The purpose of the early adopter implementation is to:

- **Test the new training program.** Evaluate the delivery of a phase of training in an authentic training environment and identify opportunities for improvement of the training program.
- **Test supporting materials and activities.** Evaluate the implementation support activities to inform planning for full implementation of the new training programs.
- **Develop a network of change champions.** Foster relationships with stakeholders interested in leading and advocating for the change to the training programs.

Early adopter training settings

The following training settings are participating as **early adopters** of the RACP's new Basic Training program.

This involves working with the RACP to roll out the Foundation phase (first year) and/or Consolidation phase (second year) of the new program ahead of other training settings and providing feedback and advice as part of the evaluation of the new program and its implementation strategies.

Lead setting(s)	Affiliated training settings	Phase(s) of training
Dunedin Hospital	N/A	Foundation (BPT1) Consolidation (BPT2)
Queensland Paediatric Training Network (PCH)	<ul style="list-style-type: none"> • Queensland Children's Hospital • Gold Coast University Hospital • The Townsville Hospital • Bundaberg Hospital • Caboolture Hospital • Cairns Hospital • Hervey Bay Hospital • Ipswich Hospital • Logan Hospital • Mackay Base Hospital • Redcliffe Hospital • Redland Hospital • Rockhampton Hospital • Sunshine Coast University Hospital • The Prince Charles Hospital • The Royal Darwin Hospital • Toowoomba Hospital 	Foundation (BPT1)
Royal Hobart Hospital	<ul style="list-style-type: none"> • Launceston General Hospital • North West Regional Hospital 	Foundation (BPT1)
Starship Children's Hospital	<ul style="list-style-type: none"> • Kidz First Children's Hospital, Middlemore • Waitakere Hospital • Whangarei Hospital 	Foundation (BPT1) Consolidation (BPT2)
Taranaki Base Hospital	N/A	Foundation (BPT1)
Women's and Children's Hospital, Adelaide	<ul style="list-style-type: none"> • Flinders Medical Centre • Lyell McEwin Hospital 	Foundation (BPT1) Consolidation (BPT2)

Program overview

Purpose of Basic Training

The RACP offers Basic Training in Adult Internal Medicine or Paediatrics & Child Health.

The purpose of Basic Training is to:

- contribute to the development of a workforce of physicians who provide safe, high-quality care to meet the needs of the community
- build on trainees' existing knowledge, skills and attitudes to develop competence and confidence, and professional qualities
- ensure clinical exposure to a wide variety of patients and problems across medical specialties and settings
- establish a solid foundation for entry into Advanced Training and lifelong learning and practice as a physician
- help trainees make informed decisions about future career paths.

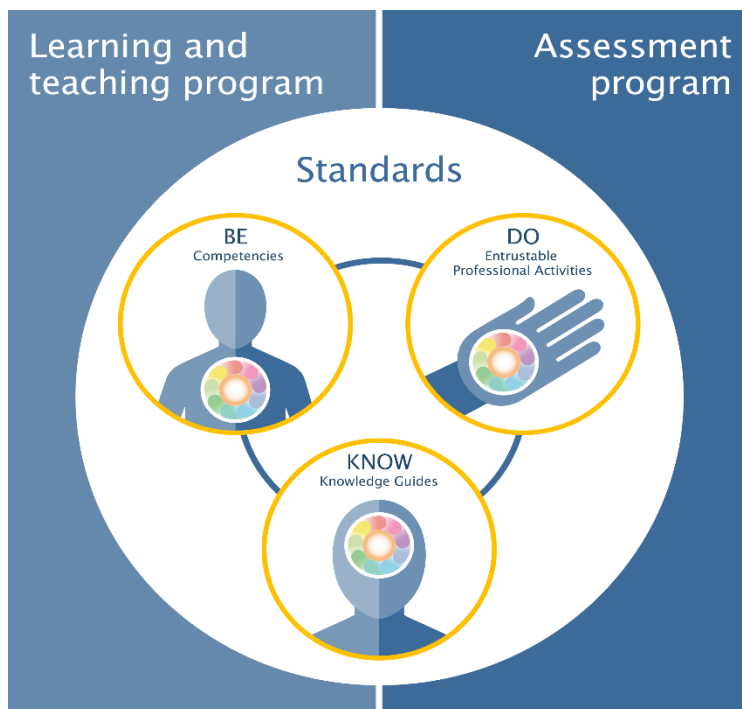
Learning occurs primarily in the workplace, supported and supervised by consultants and peers.

This requires a balance of the dual roles of training and service delivery in the workplace.



Image of a hospital building and weighing scales; left scale stipulates 'Training' and right is 'Service Delivery'

Basic Training curricula standards



The **RACP curriculum model** is made up of curricula standards supported by learning, teaching, and assessment programs.

Learning and teaching programs outline the strategies and methods to learn and teach curricula standards, including required and recommended learning activities.

Assessment programs outline the planned use of assessment methods to provide an overall picture of the trainee's competence over time.

Image of the Learning and teaching program and assessment program

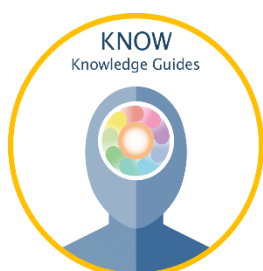
The **curricula standards** outline the educational objectives of the training program and the standard against which trainees' abilities are measured.



- 49 **competencies** in 10 domains of professional practice
- Outlines the expected professional behaviours, values and practices of trainees.



- 8 **Entrustable Professional Activities** (EPAs)
- Outlines the essential work tasks trainees need to be able to perform in the workplace.



- 18 Adult Medicine and 17 Paediatrics & Child Health **knowledge guides**
- Outlines the expected baseline knowledge of trainees.

www.racp.edu.au/innovation/education-renewal/basic-training-curricula-standards

Learning goals

The curricula standards form ten key learning goals that guide learning, teaching, and assessment in the new programs.



Clinical assessment

Clinically assess patients, incorporating interview, examination, and formulation of a differential diagnosis and management plan



Communication with patients

Discuss diagnoses and management plans with patients and their families or carers



Documentation

Document the progress of patients in multiple settings



Prescribing

Prescribe medications tailored to patients' needs and conditions



Transfer of care

Transfer care of patients



Investigations

Choose, organise, and interpret investigations



Acutely unwell patients

Assess and manage acutely unwell patients



Procedures

Plan, prepare for, perform, and provide after care for important procedures



Professional behaviours

Behave in accordance with the expected professional behaviours, values, and practices



Knowledge

Acquire the baseline level of knowledge for Basic Training

Images of New Basic Training programs: Learning goals

Learning, teaching, and assessment structure

The Learning, Teaching, and Assessment structure defines the framework for delivery and trainee achievement of the curricula standards in the Basic Training programs.



Images of New Basic Training programs: Learning, Teaching, and Assessment structure

The Basic Training program is structured in three phases:

- 1 Foundation**
 - Orient trainees and confirm their readiness to progress in the Basic Training program
- 2 Consolidation**
 - Support trainees' professional development in the workplace
- 3 Completion**
 - Confirm trainees' achievement of the curriculum standards and completion of Basic Training
 - Support trainees' transition to Advanced Training

- A **selection decision** is made before entry into the program.
- A **progress decision** is made at the end of each phase of training.
- A **completion decision** is made at the end of the training program, resulting in a completion certificate.



Image of a clock and bulls-eye target with the arrow in the middle

Basic Training is a **hybrid time- and competency-based training program**. There is a minimum time requirement of three years full-time equivalent clinical experience. Progress and completion decisions are based on evidence of trainees' competence.

The Basic Training program may be started in post-graduate year (PGY) 2 at the earliest, though local factors may mean that the program is started later in some areas of Australia and New Zealand.

Assessment tools

New mobile-friendly assessment tools will capture evidence of work-based learning and progress through training, supplemented by formal examinations.



Registration Form

- Enrol trainees and assess entry criteria



Learning Capture

- Trainee enters evidence of work-based learning linked to learning goals



Observation Capture

- Supervised observation of trainees' work-based performance linked to learning goals



Learning Plan

- Plan learning over a phase of training and each rotation



Rotation Progress Report

- Assess trainees' progress over a rotation



Phase Progress Report

- Assess trainees' progress over a phase of training



Written Examination

- Assess trainees' applied knowledge



Clinical Examination

- Assess trainees' ability to perform clinical assessment of patients.

Images of New Basic Training programs: Assessment toolkit

Continuous work-based assessment

The ten learning goals will be continuously assessed through regular capture of work-based learning to form an overall picture of trainees' progress over time.

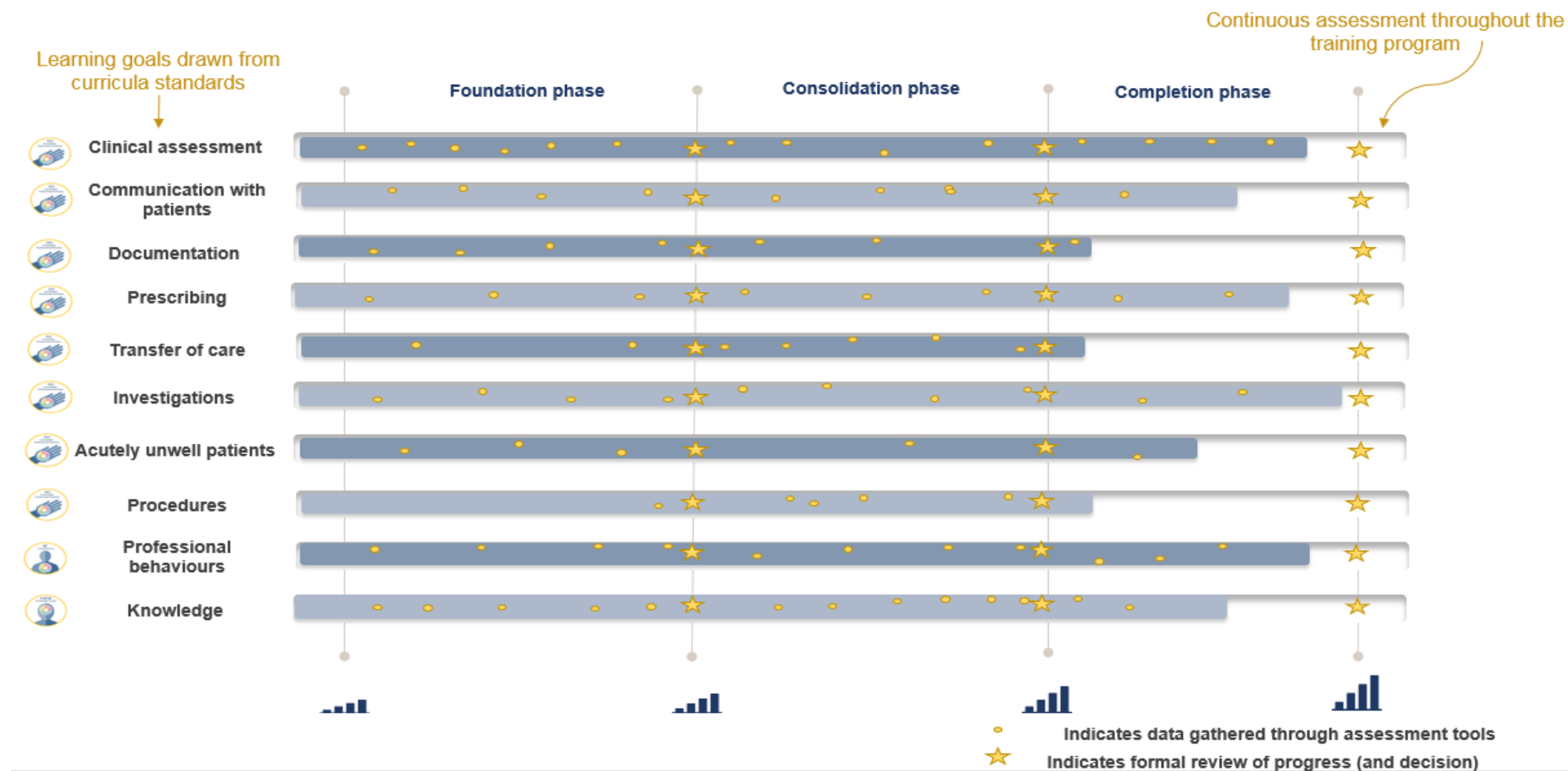


Image of continuous work-based assessment against the ten key learning goals

Progress and completion decisions



Progress Review Panels will make evidence-based decisions about trainees' progress through and completion of the program.

- The panels' goal is to **review the evidence** of trainees' progress and provide broad input from several individuals to assist the Director of Paediatric Education in **making decisions** regarding the performance and abilities of trainees in their program.
- Shared decision making, based on evidence of trainees' performance, will help to address some **'failure to fail'** issues and will **support decision makers** in case of appeal.

2021 Training program requirements

Summary

What do I need to do?

When do I need to do it?

Entry and registration requirements



1 Registration form

- Before 30 November for New Zealand applicants
- Before 31 January for Australian applicants

Prospective trainees can demonstrate...

Selection criteria

- A commitment and capability to pursuing a career as a physician or paediatrician
- The ability to plan and manage their learning
- The ability and willingness to achieve the Basic Training Competencies, particularly those associated with:
 - Communication
 - Cultural competence
 - Ethics and professional behaviour
 - Leadership, management, and teamwork



Entry criteria

- A Basic Training position in an RACP-accredited training setting or network.
- General medical registration with the Medical Board of Australia if applying in Australia or a medical registration with a general scope of practice with the MCNZ if applying in New Zealand.

What do I need to do?

When do I need to do it?

Learning program requirements

 <ul style="list-style-type: none"> Complete 36-months full-time equivalent (FTE) of clinical experience in a mix of approved training rotations. <p style="text-align: right;">See Appendix 1 for details.</p>	<ul style="list-style-type: none"> In any sequence over the course of training
 <p>6 learning courses:</p> <ul style="list-style-type: none"> RACP Basic Training Orientation resource* RACP Communication Skills resource https://elearning.racp.edu.au/mod/page/view.php?id=6942 RACP Australian Aboriginal, Torres Strait Islander and Māori Cultural Competence resource https://elearning.racp.edu.au/course/view.php?id=79 RACP Ethics resource https://elearning.racp.edu.au/course/view.php?id=182 RACP Leadership, Management, and Teamwork resource* Advanced Paediatric Life Support course or equivalent https://www.racp.edu.au/docs/default-source/default-document-library/minimum-standards-for-resuscitation-competency-in-basic-training.pdf?sfvrsn=4 <p>*resource is not yet available</p>	<ul style="list-style-type: none"> RACP Basic Training Orientation resource to be completed within first six months of training Other courses to be completed in any sequence over the course of training Recommended completion in the Foundation phase

Teaching program requirements



The teaching program guides supervisors, assessors, and accredited training settings to plan and deliver teaching activities.

During their training, trainees are required to have named individuals or entities for the following supervision roles:

- Network Director (where a network exists only)
- Director of Paediatric Education
- Progress Review Panel
- Education Supervisor
- Rotation Supervisor

People may act in multiple supervision roles.

See Appendix 2 for details.

- **Each training rotation**

Assessment program requirements

Each phase of training (each year)



12 Learning captures

- Minimum of one per month



12 Observation captures

- Minimum of one per month



1 Learning plan

- At the start of each phase of training
- Updated at the start of each training rotation



4 Rotation progress reports



- At the end of each rotation
- Minimum of one per three months



2 Phase progress reports

- At the middle and end of each phase of training

Once over the course of training

	1 Written Examination	<ul style="list-style-type: none"> • Early in Completion phase
	1 Clinical Examination	<ul style="list-style-type: none"> • Mid-way through the Completion phase

The RACP has set these as the minimum requirements, though more work-based assessments are encouraged.

Directors of Paediatric Education and Education Supervisors may require some trainees to complete additional work-based assessments to help form a better picture of their progress.

Foundation phase



Purpose

- Orient trainees and confirm their readiness to progress in the Basic Training program
-



Duration

- 12 months full-time equivalent (FTE)
-



Selection and entry criteria

Prospective trainees can demonstrate...

Selection criteria

- A commitment and capability to pursuing a career as a physician or paediatrician
- The ability to plan and manage their learning
- The ability and willingness to achieve the Basic Training Competencies, particularly those associated with:
 - Communication
 - Cultural competence
 - Ethics and professional behaviour
 - Leadership, management, and teamwork

Entry criteria

- A Basic Training position in an RACP-accredited training setting or network.
- General medical registration with the Medical Board of Australia if applying in Australia or a medical registration with a general scope of practice with the MCNZ if applying in New Zealand.



Learning program

- 12 months' FTE **clinical experience** in a mix of approved training rotations
- Required and recommended **learning courses**, including:
 - RACP Basic Training Orientation resource*
 - RACP Communication Skills resource^
<https://elearning.racp.edu.au/mod/page/view.php?id=6942>
 - RACP Australian Aboriginal, Torres Strait Islander and Māori Cultural Competence resource^ <https://elearning.racp.edu.au/course/view.php?id=79>
 - RACP Ethics resource^ <https://elearning.racp.edu.au/course/view.php?id=182>
 - RACP Leadership, Management, and Teamwork resource^
 - Advanced Paediatric Life Support course or equivalent^
<https://www.racp.edu.au/docs/default-source/default-document-library/minimum-standards-for-resuscitation-competency-in-basic-training.pdf?sfvrsn=4>
 - RACP Physician Self-Care and Wellbeing module
<https://elearning.racp.edu.au/mod/page/view.php?id=5431>
 - RACP eLearning modules <https://elearning.racp.edu.au/>
 - RACP curated collections
<https://elearning.racp.edu.au/course/index.php?categoryid=30>
 - RACP College Learning Series
<https://elearning.racp.edu.au/course/index.php?categoryid=27>

*to be completed within first six months of training

^required over the course of Basic Training.

Other listed resources are recommended (not required)



Teaching program

The teaching program guides supervisors, assessors, and accredited training settings to plan and deliver teaching activities.

- During their training, trainees are required to have named individuals or entities for the following **supervision roles**:
 - Network Director (where a network exists only)
 - Director of Paediatric Education
 - Progress Review Panel
 - Education Supervisor
 - Rotation Supervisor
- People may act in multiple supervision roles.
- Supplementary resources for **supervisors**, include:
 - Supervisor Professional Development Program
 - Workshop 1 – Practical skills for supervisors
 - Workshop 2 – Teaching and learning in healthcare settings
 - Workshop 3 – Work-based learning and assessment

- RACP Training Support module
<https://elearning.racp.edu.au/enrol/index.php?id=70>
 - RACP Creating a Safe Workplace module
<https://elearning.racp.edu.au/course/view.php?id=73>
 - Supplementary resources for **training settings and networks**, include:
 - Training provider standards https://www.racp.edu.au/docs/default-source/default-document-library/training_provider_standards_final_.pdf?sfvrsn=b3450e1a_2%20for%20clinical%20training%20programs
 - Training network principles https://www.racp.edu.au/docs/default-source/default-document-library/training-network-principles.pdf?sfvrsn=c50e0e1a_4
 - RACP Trainee Selection and Recruitment guide
<https://www.racp.edu.au/fellows/local-selection>
-



Assessment program

- 1 Registration Form
 - 1 Learning Plan
 - 12 Learning Captures (~1 per month)
 - 12 Observation Captures (~1 per month)
 - ~4 Rotation Progress Reports (1 per rotation, minimum one per three months)
 - 2 Phase Progress Reports (1 mid-year, 1 end-of-year)
-



Progression criteria

To progress to the Consolidation phase, trainees can demonstrate...

- The ability to plan and manage their learning and to complete their learning and assessment requirements in a timely manner
- Progress against the ten key learning goals, including evidence of:
 - the ability to consistently perform the following Entrustable Professional Activities with indirect supervision:
 - EPA 1 – Clinical assessment
 - EPA 2 – Communication with patients
 - EPA 3 – Documentation
 - EPA 4 – Prescribing
 - EPA 6 – Investigations
 - consistent behaviour in line with each of the ten areas of professional practice
 - the understanding of how apply medical knowledge to patient care (knows how)

Foundation phase at a glance

Foundation phase

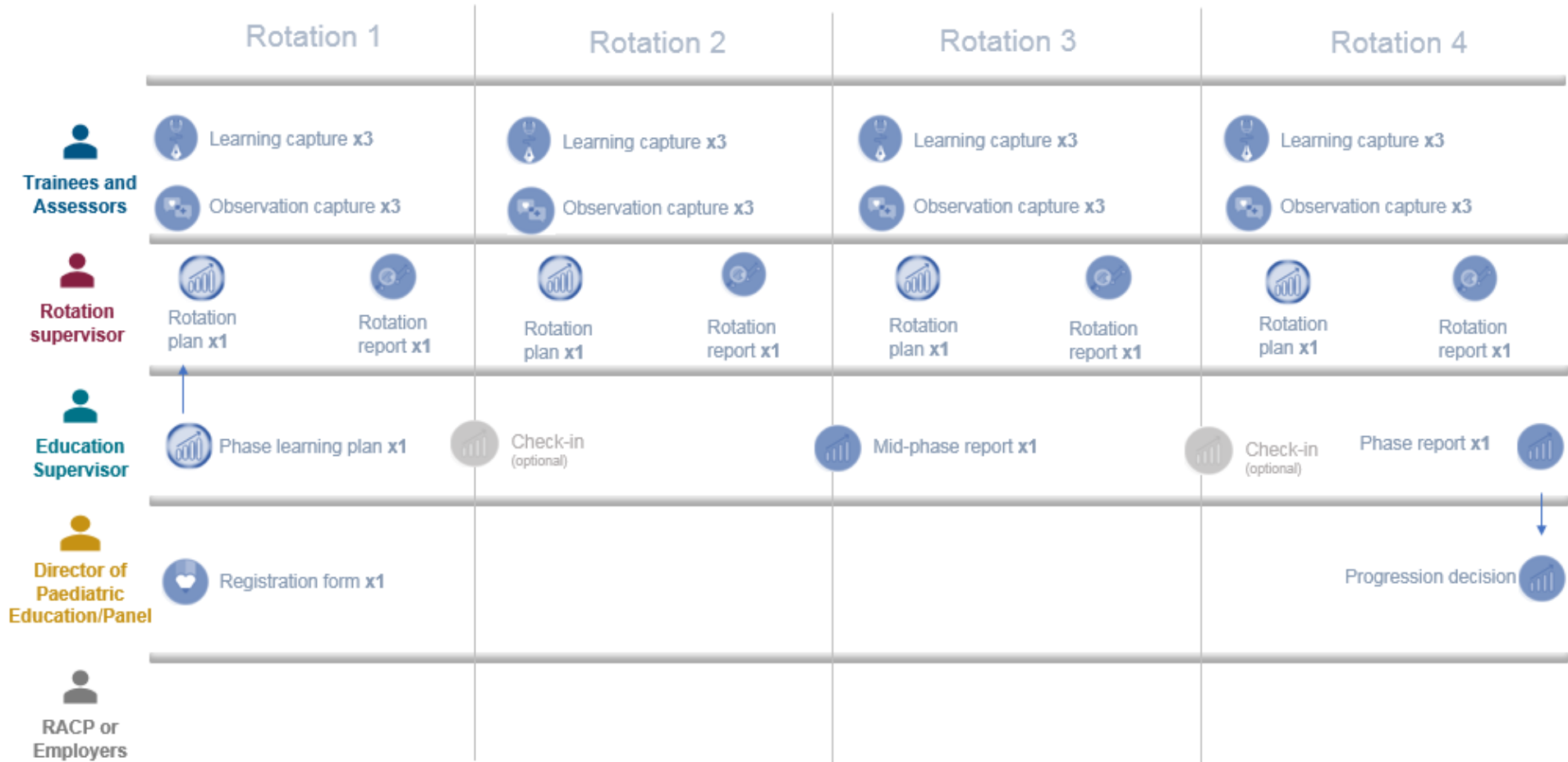


Image of Foundation Phase

Consolidation phase



Purpose

- Support trainees' professional development in the workplace
-



Duration

- 12 months full-time equivalent (FTE)
-



Entry criteria

Prospective trainees can demonstrate...

- Certification of the Foundation phase by a Progress Review Panel
 - A Basic Training position in an RACP-accredited training setting or network.
-



Learning program

- 12 months' FTE **clinical experience** in a mix of approved training rotations
 - Recommended **learning courses**, including:
 - RACP College Learning Series
<https://elearning.racp.edu.au/course/index.php?categoryid=27>
 - RACP Communicating Risks and Benefits module
<https://elearning.racp.edu.au/enrol/index.php?id=93>
 - RACP Working With Young People module
<https://elearning.racp.edu.au/enrol/index.php?id=29>
-



Teaching program

- *As per Foundation phase*
-



Assessment program

- 1 Re-registration Form
- 1 Learning Plan
- 12 Learning Captures (~1 per month)
- 12 Observation Captures (~1 per month)
- ~4 Rotation Progress Reports (1 per rotation, minimum one per three months)
- 2 Phase Progress Reports (1 mid-year, 1 end-of-year)



Progression criteria

To progress to the Completion phase, trainees can demonstrate...

- The ability to plan and manage their learning and to complete their learning and assessment requirements in a timely manner
- Significant progress against the ten key learning goals, including evidence of:
 - the ability to consistently perform the following Entrustable Professional Activities with only distant supervision:
 - EPA 1 – Clinical assessment #
 - EPA 2 – Communication with patients
 - EPA 3 – Documentation
 - EPA 4 – Prescribing
 - EPA 6 – Investigations
 - consistent behaviour in line with each of the ten areas of professional practice
 - the ability to apply medical knowledge to patient care (shows how) ##

indicates readiness to sit the Clinical Examination
indicates readiness to sit the Written Examination

Consolidation phase at a glance

Consolidation phase

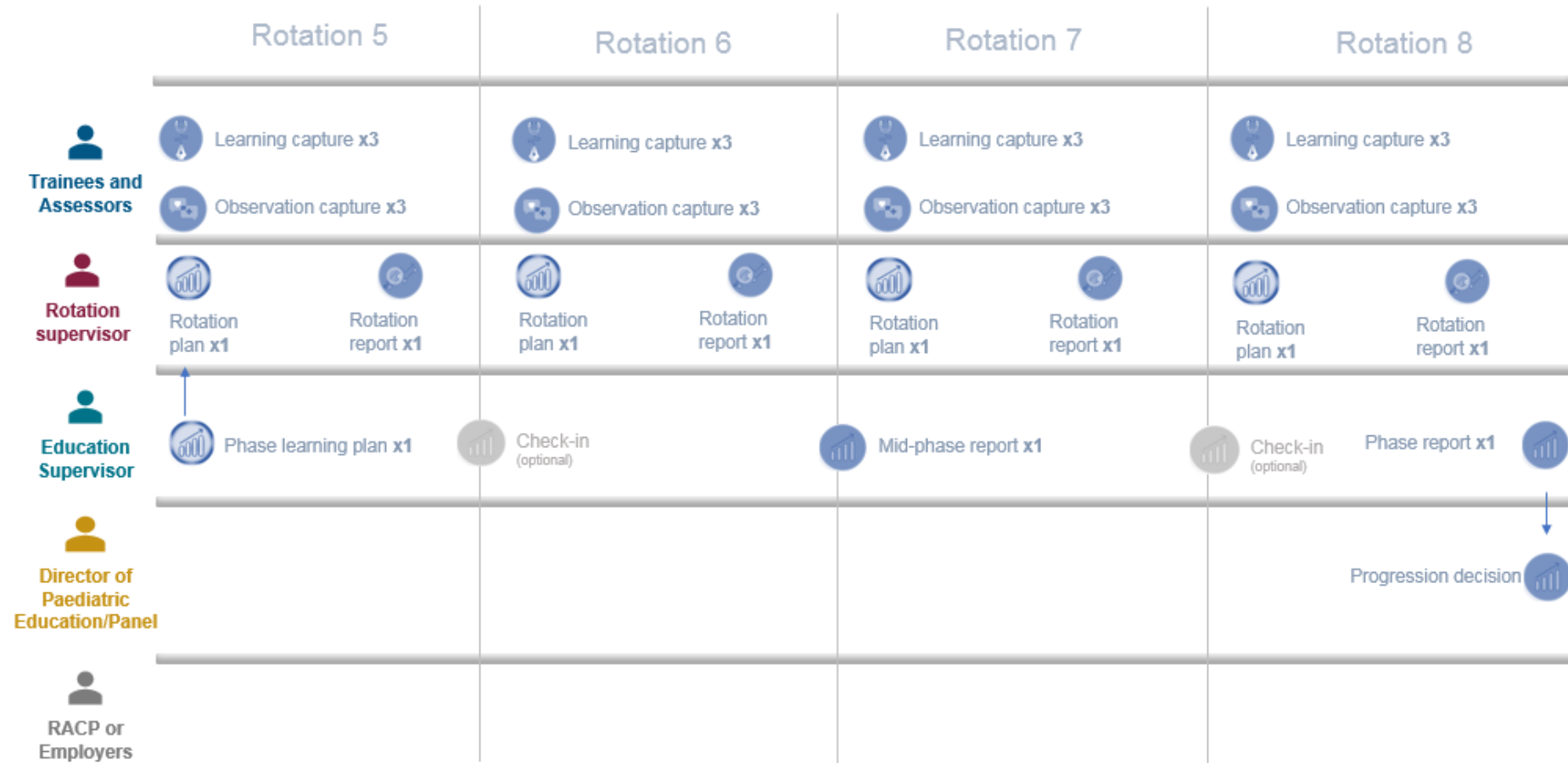


Image of Consolidation Phase

Completion phase



Purpose

- Confirm trainees' achievement of the curriculum standards and completion of Basic Training.
 - Support trainees' transition to Advanced Training.
-



Duration

- 12 months full-time equivalent (FTE)
-



Entry criteria

Prospective trainees can demonstrate...

- Certification of the Consolidation phase by a Progress Review Panel
 - A Basic Training position in an RACP-accredited training setting or network.
-



Learning program

- 12 months' FTE **clinical experience** in a mix of approved training rotations
 - Required and recommended **learning courses**, including:
 - RACP College Learning Series
<https://elearning.racp.edu.au/course/index.php?categoryid=27>
 - RACP Research Projects module
<https://elearning.racp.edu.au/enrol/index.php?id=41>
 - Supervisor Professional Development Program Workshop 1 – Practical skills for supervisors
-



Teaching program

- *As per Foundation phase*



Assessment program

- 1 Re-registration Form
- 1 Learning Plan
- 12 Learning Captures (~1 per month)
- 12 Observation Captures (~1 per month)
- ~4 Rotation Progress Reports (1 per rotation, minimum one per three months)
- 2 Phase Progress Reports (1 mid-year, 1 end-of-year)
- 1 Written Examination
- 1 Clinical Examination



Completion criteria

To complete the Basic Training program, trainees can demonstrate...

- The ability to plan and manage their learning and to complete their learning and assessment requirements in a timely manner
- Achievement of the ten key learning goals, including evidence of:
 - the ability to consistently perform all Entrustable Professional Activities with only distant supervision
 - consistent behaviour in line with each of the ten areas of professional practice
 - the ability to consistently apply a sound medical knowledge base to patient care (does).

Completion phase at a glance

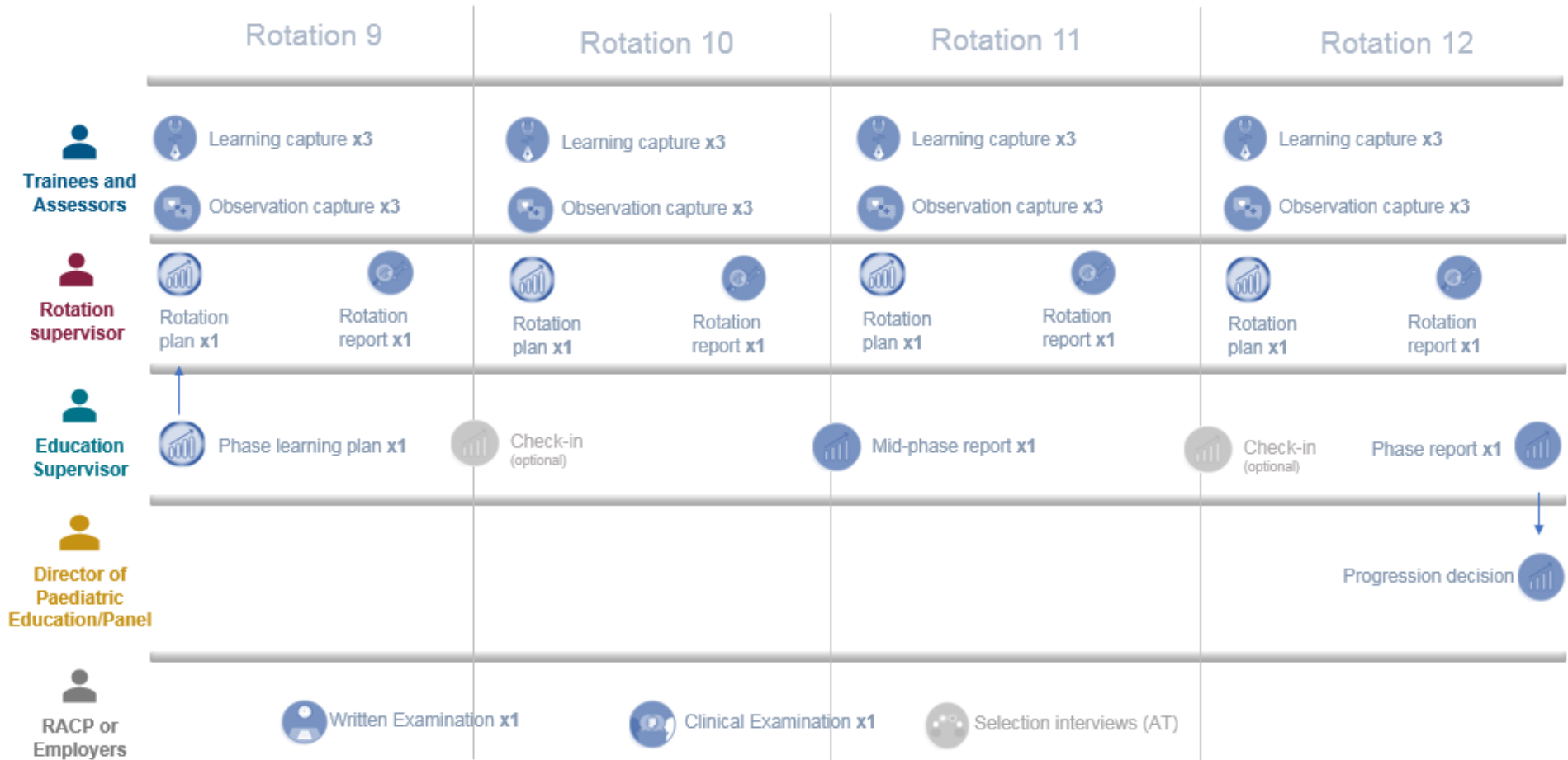


Image of Completion Phase

Appendix 1: Clinical experience requirements

Over the course of Basic Training in Paediatrics & Child Health, trainees are required to:

Clinical experience

- Complete 36-months of certified training time, of which:
 - 24-months must be in **core** paediatric rotations, including a minimum of:
 - 9 months in general paediatric medicine
 - 3 months in paediatric emergency medicine
 - 3 months in neonatology in a perinatal unit
 - 3 months in a paediatric medical specialty
 - 12-months may be spent in either 'core' or '**non-core**' rotations

Location of training

- Complete at least 24 months of training in accredited training settings in Australia and/or New Zealand.

Rotation type		Minimum time required	Maximum time allowed	Related Knowledge Guide(s) and rotation guidelines
Core rotations	General paediatrics	9 months (33-39 weeks)	27 months	<ul style="list-style-type: none"> • General and community paediatrics https://www.racp.edu.au/trainees/basic-training/curricula-renewal/standards/knowledge-guides/view/general-and-community-paediatrics
	Neonatology	3 months (10-13 weeks)	9 months	<ul style="list-style-type: none"> • Neonatal and perinatal medicine https://www.racp.edu.au/trainees/basic-training/curricula-renewal/standards/knowledge-guides/view/neonatal-and-perinatal-medicine <p>Notes</p> <p><i>Australia</i></p> <p>A minimum of 3 months must be completed in a perinatal unit that includes the long-term management of ventilated babies. Training in a</p>

Rotation type	Minimum time required	Maximum time allowed	Related Knowledge Guide(s) and rotation guidelines
			<p>Neonatal Intensive Care Unit that does not have inborn facilities does not satisfy the minimum time requirement. Provided the 3-month minimum in a perinatal unit is met, trainees can complete up to 9 months in a non-perinatal unit as part of the maximum allowable time in neonatology.</p> <p><i>New Zealand</i></p> <p>Maximum 12 months in neonatology including skills in neonatal resuscitation and intensive care, or sufficient experience in neonatal training to acquire the appropriate consultation to primary care providers, as determined by the Director of Paediatric Education based on a review of logbook experience or other sources.</p>
Paediatric emergency medicine	3 months (10-13 weeks)	12 months	<ul style="list-style-type: none"> Emergency medicine https://www.racp.edu.au/trainees/basic-training/curricula-renewal/standards/knowledge-guides/view/emergency-medicine <p>Notes</p> <p><i>Australia</i></p> <p>A minimum of 3 months training must be in a paediatric emergency department or dedicated paediatric section of a mixed emergency department where the trainee sees only paediatric patients.</p> <p><i>New Zealand</i></p> <p>A minimum of 3 months training must be in a paediatric emergency department or sufficient experience in acute general paediatrics to manage common emergencies, as determined by the Director of Paediatric Education.</p>
Paediatric specialties*	3 months (10-13 weeks)	6 months	<p>Notes</p> <p>Trainees should spend a maximum of six months in any of the following specialties.</p>

Rotation type		Minimum time required	Maximum time allowed	Related Knowledge Guide(s) and rotation guidelines
*	Adolescent and young adult medicine			<ul style="list-style-type: none"> Adolescent and Young Adult Medicine https://www.racp.edu.au/trainees/basic-training/curricula-renewal/standards/knowledge-guides/view/adolescent-and-young-adult-medicine
*	Paediatric cardiology			<ul style="list-style-type: none"> Cardiology https://www.racp.edu.au/trainees/basic-training/curricula-renewal/standards/knowledge-guides/view/cardiology-pch
*	Clinical genetics			<ul style="list-style-type: none"> Genetic and Metabolic Medicine https://www.racp.edu.au/trainees/basic-training/curricula-renewal/standards/knowledge-guides/view/genetic-and-metabolic-medicine-pch
*	Clinical pharmacology			<ul style="list-style-type: none"> Clinical Sciences https://www.racp.edu.au/trainees/basic-training/curricula-renewal/standards/knowledge-guides/view/clinical-sciences
*	Paediatric endocrinology			<ul style="list-style-type: none"> Endocrinology https://www.racp.edu.au/trainees/basic-training/curricula-renewal/standards/knowledge-guides/view/endocrinology-pch
*	Paediatric gastroenterology			<ul style="list-style-type: none"> Gastroenterology https://www.racp.edu.au/trainees/basic-training/curricula-renewal/standards/knowledge-guides/view/gastroenterology-pch
*	Paediatric haematology			<ul style="list-style-type: none"> Haematology and Oncology https://www.racp.edu.au/trainees/basic-training/curricula-renewal/standards/knowledge-guides/view/haematology-and-oncology
*	Paediatric immunology/allergy			<ul style="list-style-type: none"> Immunology and Allergy https://www.racp.edu.au/trainees/basic-training/curricula-renewal/standards/knowledge-guides/view/immunology-and-allergy-pch

Rotation type		Minimum time required	Maximum time allowed	Related Knowledge Guide(s) and rotation guidelines
*	Paediatric infectious diseases			<ul style="list-style-type: none"> Infectious Diseases https://www.racp.edu.au/trainees/basic-training/curricula-renewal/standards/knowledge-guides/view/infectious-diseases-pch
*	Paediatric medical oncology			<ul style="list-style-type: none"> Haematology and Oncology https://www.racp.edu.au/trainees/basic-training/curricula-renewal/standards/knowledge-guides/view/haematology-and-oncology
*	Metabolic medicine			<ul style="list-style-type: none"> Genetic and Metabolic Medicine https://www.racp.edu.au/trainees/basic-training/curricula-renewal/standards/knowledge-guides/view/genetic-and-metabolic-medicine-pch
*	Paediatric nephrology			<ul style="list-style-type: none"> Nephrology and Urology https://www.racp.edu.au/trainees/basic-training/curricula-renewal/standards/knowledge-guides/view/nephrology-and-urology
*	Paediatric neurology			<ul style="list-style-type: none"> Neurology https://www.racp.edu.au/trainees/basic-training/curricula-renewal/standards/knowledge-guides/view/neurology-pch
*	Paediatric palliative medicine			<ul style="list-style-type: none"> General and Community Paediatrics https://www.racp.edu.au/trainees/basic-training/curricula-renewal/standards/knowledge-guides/view/general-and-community-paediatrics
*	Paediatric rehabilitation medicine			<ul style="list-style-type: none"> General and Community Paediatrics https://www.racp.edu.au/trainees/basic-training/curricula-renewal/standards/knowledge-guides/view/general-and-community-paediatrics
*	Paediatric respiratory and/or sleep medicine			<ul style="list-style-type: none"> Respiratory and Sleep Medicine https://www.racp.edu.au/trainees/basic-training/curricula-renewal/standards/knowledge-guides/view/respiratory-and-sleep-medicine-pch

Rotation type		Minimum time required	Maximum time allowed	Related Knowledge Guide(s) and rotation guidelines
*	Paediatric rheumatology			<ul style="list-style-type: none"> Rheumatology https://www.racp.edu.au/trainees/basic-training/curricula-renewal/standards/knowledge-guides/view/rheumatology-pch
Non-core rotations	Paediatric anaesthetics	0 months	3 months	
	Paediatric intensive care medicine	0 months	6 months	
	Paediatric surgery	0 months	6 months	
	Paediatric nights	0 months	6 months	<p>Notes</p> <p>Trainees can spend up to 6 months on nights rotations provided the rotation meets the criteria for RACP training, including demonstrated:</p> <ul style="list-style-type: none"> Supervision allocations as outlined in the teaching program requirements Relevance of clinical experiences to delivering the learning goals of the program.
	Paediatric relieving	0 months	6 months	<p>Notes</p> <p>Trainees can spend up to 6 months on relief rotations provided the rotation meets the criteria for RACP training, including demonstrated:</p> <ul style="list-style-type: none"> Supervision allocations as outlined in the teaching program requirements Relevance of clinical experiences to delivering the learning goals of the program.
	Other rotations	0 months	6 months	<p>Notes</p>

Rotation type	Minimum time required	Maximum time allowed	Related Knowledge Guide(s) and rotation guidelines
			<p>Directors of Paediatric Education may approve additional rotations provided they meet the criteria for RACP training, including demonstrated:</p> <ul style="list-style-type: none"> • Supervision allocations as outlined in the teaching program requirements • Relevance of clinical experiences to delivering the learning goals of the program. <p>This may include supervised research, clinical improvement projects, or adult medicine rotations.</p> <p>A maximum of three months can be spent in dermatology, general practice, or obstetrics and gynaecology.</p>

Location of training

Basic Training in Paediatrics & Child Health is undertaken at training settings accredited by the RACP. Trainees are encouraged to train in at least two different settings over the course of Basic Training.

Australia

Location type	Minimum time required	Maximum time allowed	Related Knowledge Guide(s) and rotation guidelines
Level 3 teaching hospital	9 months	36 months	Notes <ul style="list-style-type: none"> At least nine months training must be spent in a Level 3 paediatric teaching hospital.
Level 2 teaching hospital	0 months	27 months	Notes <ul style="list-style-type: none"> Up to 27 months training may be spent in Level 2 paediatric teaching hospitals
Secondment hospitals	0 months	12 months	Notes <ul style="list-style-type: none"> Up to 12 months training may be spent in a secondment hospital on rotation from a Level 3 or Level 2 paediatric teaching hospital.

New Zealand

Trainees should confirm with their Director of Paediatric Education the maximum period of training that can be undertaken at each accredited training setting.

Training outside Australia and New Zealand

- At least 24 months of training must be undertaken in accredited training settings in Australia and/or New Zealand.
- Appropriate overseas training rotations must be able to meet the requirements of training, including meeting the supervision requirements and providing the opportunity for trainees to complete their assessment requirements and achieve learning goals.
- Trainees who are considering undertaking a short period of training overseas will need to get prospective approval from the RACP. Trainees should first speak to their Director of Paediatric Education and then contact the RACP Basic Training Unit for information on the application process.

Appendix 2: Roles and responsibilities

There are a number of roles involved in the new Basic Training Programs. More information will be contained in the training resources that are being developed in 2020.

Basic Trainee



Assessor



Rotation supervisor



Education supervisor



Director of Paediatric Education



Network Director of Paediatric Education



Training program coordinator



Progress Review Panel



RACP oversight committees



People may act in multiple supervision roles.



Basic Trainee

Definition

A member who is registered with the RACP to undertake the Basic Training Program.

Responsibilities

- Maintain employment in accredited training settings.
- Act as a self-directed learner:
 - be aware of the educational requirements outlined in the relevant curricula, training program handbooks, and education policies
 - actively seek and reflect on feedback from assessors, supervisors, and other colleagues
 - plan, reflect on, and manage their learning and progression against the curricula standards.
 - adhere to the deadlines for requirements of the training program.
- Actively participate in training setting / network accreditation undertaken by the RACP.
- Complete the annual Physician Training Survey to assist the RACP and training settings with ongoing quality improvement of the program.

Tracc access

Tracc is the RACP's online training management system.

Basic Trainees will have access to their individual training program dashboard, including information on their progress against the training requirements, access to all assessment tools, and access to their historical training data.



Assessor

Definition

A person who provides feedback to trainees via the Observation Capture or Learning Capture tool. This may include Advanced Trainees, consultants and other medical professionals, allied health professionals, nursing staff, patients and their families, administrative staff, and consumer representatives.

Responsibilities

- Be aware of the learning goals of the Basic Training program
- Provide feedback to support the progression of Basic Trainees within the setting:
 - Complete Observation Captures
 - Provide feedback on Learning Captures as required.

Tracc access

Tracc is the RACP's online training management system.

Assessors will receive emailed links from Basic Trainees via Tracc to complete Observation Capture and Learning Capture tools. They will not have access to trainees' records in Tracc (unless they also act in a supervisory role).



Rotation supervisor

Definition

A consultant who provides direct oversight of a Basic Trainee during a training rotation.

Responsibilities

- Be aware of the educational requirements outlined in the relevant curricula, training program handbooks, and education policies.
- Oversee and support the progression of Basic Trainees within the setting:
 - Assist trainees to plan their learning during the rotation.
 - Support colleagues to complete Observation Captures with trainees.
 - Provide feedback to trainees through rotation progress reports.
- Actively participate in rotation accreditation undertaken by the RACP.
- Complete the annual Physician Training Survey to assist the RACP and training settings with ongoing quality improvement of the program.

Tracc access

Tracc is the RACP's online training management system.

Rotation Supervisors will have access to their rotation description and to the training records of their currently allocated trainees for the duration of the rotation, as well as a short period before the start and after the end of the rotation.



Education Supervisor

Definition

An RACP Fellow who provides longitudinal oversight of a Basic Trainee's progress through training.

Responsibilities

- Be aware of the educational requirements outlined in the relevant curricula, training program handbooks, and education policies.
- Oversee and support the progression of Basic Trainees within the setting:
 - Assist trainees to plan their learning and career progression.
 - Undertake work-based assessments as required.
 - Provide feedback to trainees and make progress recommendations to the Progress Review Panel through mid-phase and end-of-phase progress reports.
 - Participate in progress decision making as a Progress Review Panel member.
- Actively participate in training setting / network accreditation undertaken by the RACP.
- Complete the annual Physician Training Survey to assist the RACP and training settings with ongoing quality improvement of the program.

Tracc access

Tracc is the RACP's online training management system.

Education Supervisors will have access to the training records of their currently allocated trainees and rotation information associated with their training setting.



Director of Paediatric Education

Definition

A RACP Fellow who provides educational leadership across a training setting.

Responsibilities

- Be aware of the educational requirements outlined in the relevant curricula, training program handbooks, and education policies.
- Coordinate the quality delivery of a Basic Training Program within the training setting.
- Oversee and support the progression of Basic Trainees within the setting:
 - Record endorsement decisions against trainees' registration form submissions.
 - Participate in progress decision making as a Progress Review Panel member.
- Establish appropriate systems to underpin a supportive training culture.
- Support supervisors within the setting to effectively deliver the Basic Training programs
- Liaise with setting administration and executives pertaining to the delivery of the Basic Training program.
- Actively participate in training setting / network accreditation undertaken by the RACP.
- Complete the annual Physician Training Survey to assist the RACP and training settings with ongoing quality improvement of the program.

Tracc access

Tracc is the RACP's online training management system.

Directors of Paediatric Education will have access to the training records of all trainees, supervisors, and rotation information associated with their training setting.



Network Director of Paediatric Education

Definition

A RACP Fellow who provides educational leadership across a network of training settings.

Responsibilities

- Be aware of the educational requirements outlined in the relevant curricula, training program handbooks, and education policies.
- Coordinate the quality delivery of a Basic Training Program across all settings within a network
- Establish appropriate systems to underpin a supportive training culture.
- Liaise with network administration and executives and setting Directors of Paediatric Education pertaining to the delivery of the Basic Training program.
- Oversee the progression of all trainees within the network.
- Actively participate in training setting / network accreditation undertaken by the RACP.
- Complete the annual Physician Training Survey to assist the RACP and training settings with ongoing quality improvement of the program.

Tracc access

Tracc is the RACP's online training management system.

Network Directors of Paediatric Education will have access to the training records of all trainees, supervisors, and training setting information associated with their network.



Training Program Coordinator

Definition

A staff member employed by a training setting or network to support the coordination and delivery of the Basic Training program. This include Medical Education Support Officers and other staff working with Directors of Paediatric Education to support and improve training within the setting or network.

Responsibilities

- Be aware of the educational requirements outlined in the relevant curricula, training program handbooks, and education policies.
- Support Directors of Paediatric Education in the coordination of the quality delivery of a Basic Training Program within the training setting.
- Support the Directors of Paediatric Education to oversee and support the progression of Basic Trainees within the setting:
 - Record Director of Paediatric Education endorsement decisions against trainees' registration form submissions.
 - Allocate rotations and supervisors to Basic Trainees.
 - Support the recording of progress decisions as support staff to Progress Review Panels.
- Support supervisors within the setting to effectively deliver the Basic Training programs
- Participate in training setting / network accreditation undertaken by the RACP.

Tracc access

Tracc is the RACP's online training management system.

Training program coordinators will have access to the training records of all trainees, supervisors, and rotation information currently associated with their training setting. They will be able to allocate rotations and supervisors to Basic Trainees while they are training within the setting.



Progress Review Panel

Definition

A group convened to make evidence-based decisions on Basic Trainees' progression through and certification of training. Progress Review Panels will be administered locally by the accredited training network or setting where a Basic Training Program is being delivered.

Responsibilities

- Be aware of the educational requirements outlined in the relevant curricula, training program handbooks, and education policies.
- Act as a review panel to assess if trainees have demonstrated achievement of the progression and/or completion criteria for the phase of training.
- Reach and record consensus decisions on trainees' progression through and certification of training.
- Provide feedback, guidance, recommendations, and reasoning for progress and certification decision making to trainees.
- Meet twice per year to make mid-phase and end-of-phase progress decisions.
- Declare conflicts of interest and excuse themselves from decision making discussions when conflicts arise.
- Reconsider decisions on application in accordance with the RACP Reconsideration, Review and Appeals by-law.
- Report to the overseeing RACP committee as required.
- Participate in training setting / network accreditation undertaken by the RACP.

Tracc access

Tracc is the RACP's online training management system.

Progress Review Panel members will have access to the training records of all trainees currently associated with their training setting.

Progress Review Panel Membership

- Progress Review Panels should comprise at least 3-9 members.
- Membership should be an odd number to facilitate decision making by consensus.
- The number of members may vary depending on the size of the training setting or network.
- It is recommended that at least one Progress Review Panel members work at a different training setting to provide an external perspective into decision making.
- Draft Terms of Reference will be made available for review in 2020.

RACP Supervisors

Network Director
of Paediatric
Education

Director of
Paediatric
Education

Education
Supervisor(s)

Rotation
Supervisor

Others

Allied Health
professionals

Consumer
representatives

Fellows of
other Colleges

Training
program
coordinators

Nurses

RACP
Fellows

RACP supervisors are considered key members of a Progress Review Panel. The Network or Director of Paediatric Education must be a member of the Progress Review Panel. Multiple roles may be performed by the same person.

Others covers a broad range of role types that may be members of the Progress Review Panel. These people also have an option to conduct work-based assessments and complete work- based assessment feedback requests.



RACP oversight committees

Definition

An RACP-administered committee with oversight of the Basic Training Programs in Australia and New Zealand. This includes the Adult Internal Medicine Basic Training Committee, Aotearoa New Zealand Adult Medicine Division Education Committee, Paediatrics & Child Health Basic Training Committee, and Aotearoa New Zealand Paediatrics & Child Health Division Education Committee.

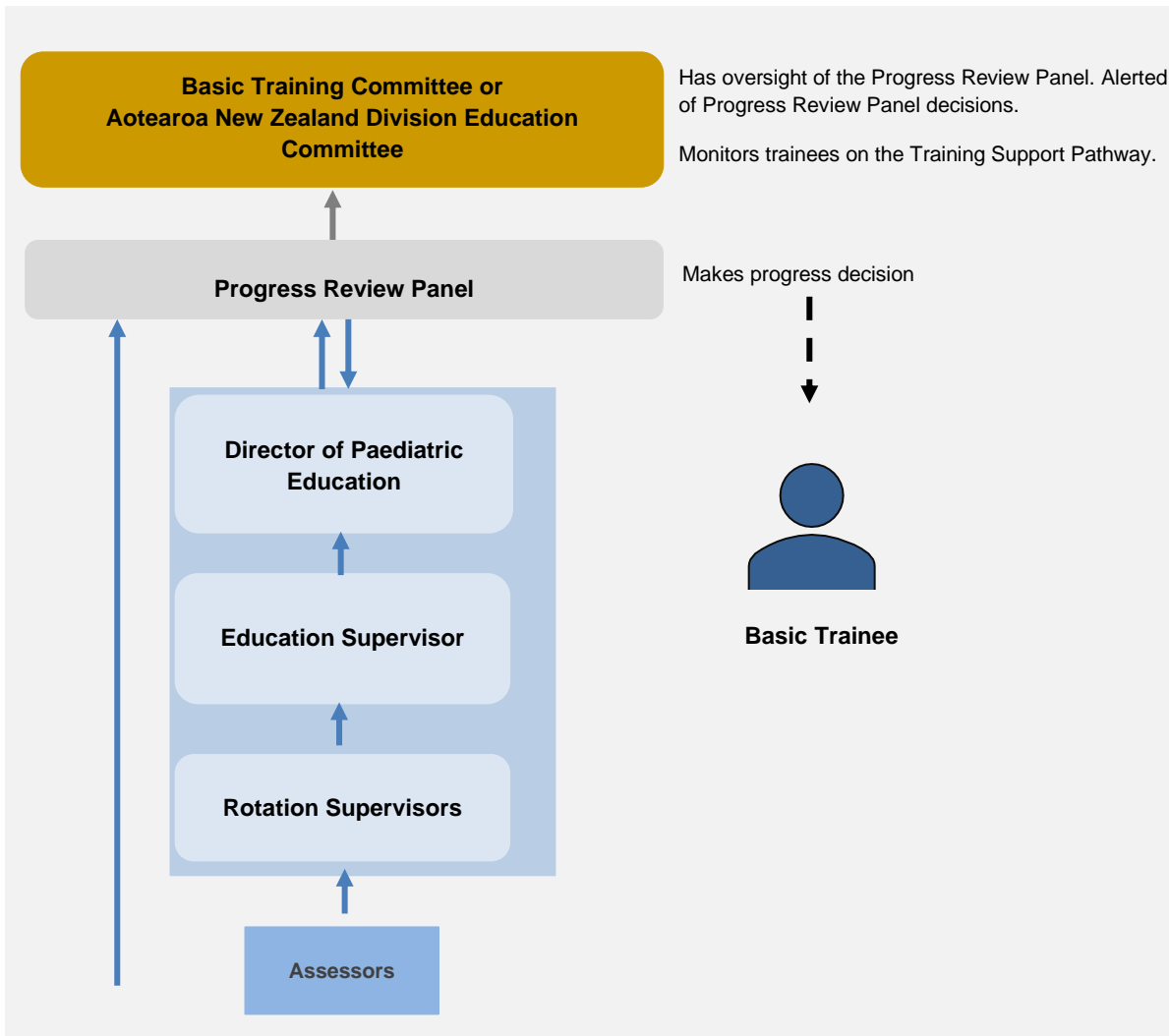
Responsibilities

- Oversee implementation of the Basic Training programs in Australia and New Zealand:
 - Manage and review Basic Training program requirements, accreditation requirements, and supervision requirements.
 - Monitor implementation of training program requirements.
 - Implement RACP education policy.
 - Oversee Basic Trainees' progression through the training program.
 - Monitor the accreditation of training settings.
 - Case manage Basic Trainees on the Training Support pathway.
 - Review progression and certification decisions on application in accordance with the RACP Reconsideration, Review, and Appeals By-Law.
- Work collaboratively with Directors of Paediatric Education and Progress Review Panels to ensure the delivery of quality training.
- Provide feedback, guidance, recommendations, and reasoning for decision making to trainees and Directors of Paediatric Education.
- Declare conflicts of interest and excuse themselves from decision making discussions when conflicts arise.
- Report to the overseeing RACP committee as required.

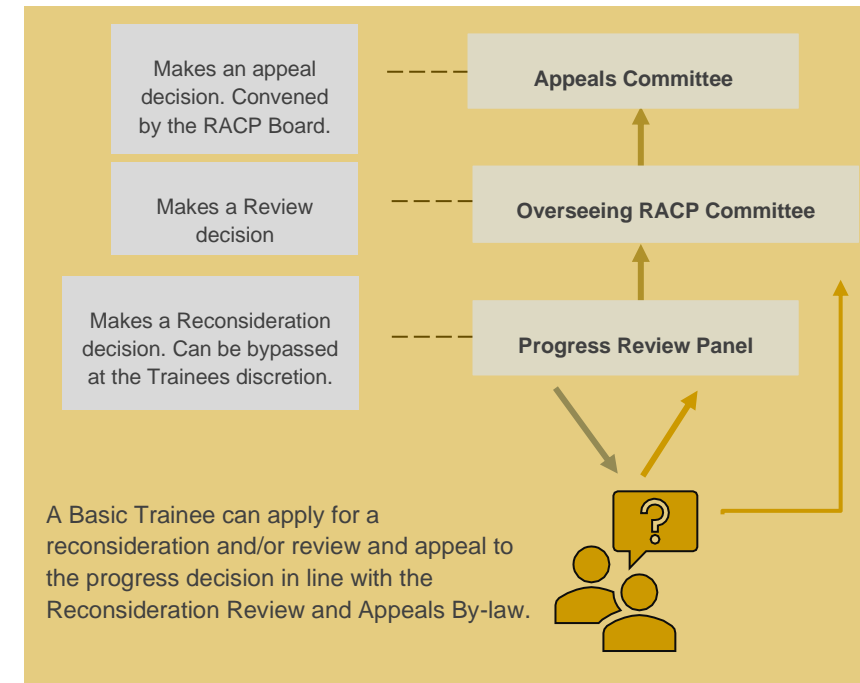
Tracc access

Tracc is the RACP's online training management system.

RACP oversight committees will have access to a wide range of reports relating to the delivery of the Basic Training program in settings across Australia and New Zealand. In the case that trainees are referred to the Training Support Pathway or a Basic Trainee requests a review of a decision in line with the *Reconsideration, Review or Appeals By-Law*, committee members will have access to the relevant complete training records.



Governance of progress decision-making



Reconsideration Review and Appeals By-Law

Further documentation will be drafted on these roles for discussion and approval through 2020.