



RACP
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Physician Readiness for Expert Practice

Advanced Training in Rheumatology
2017–18 Program Requirements Handbook

Adult Medicine Division

Paediatrics & Child Health Division



About the 2017–18 handbook

This handbook outlines the complete program requirements for the RACP Physician Readiness for Expert Practice (PREP) Advanced Training in Rheumatology Program.

Satisfactory completion of these requirements is necessary for admission to Fellowship of the College or completion of post-Fellowship training.

The 2017–18 handbook applies to all Australian and New Zealand based trainees registered in a PREP program in 2017 and/or 2018, regardless of the year in which they commenced PREP Advanced Training. A trainee is considered to be in a PREP Advanced Training Program if they first enrolled in that program from 2011 onwards. Where not specified as being particular to either Australia or New Zealand, information applies to trainees and supervisors in both countries.

2017–18 Program requirement updates

Overseeing committees evaluate training requirements every two years (previously annually) to ensure that they are in line with educational best practice. Requirements are published and communicated accordingly. Changes to the training program that may substantially impact a trainee's plan for training will be implemented following an extended period of notice. It is the trainee's responsibility to ensure that they are following the correct handbook.

Changes to program requirements for 2017–18	Rationale for changes
Four Direct Observation of Procedural Skills tools required for second year as well as first year trainees.	To incorporate a wider variety of procedures, and to align with Australia.
Minimum 80% meeting attendance now required.	To ensure trainees gain exposure to relevant training activities.
New Research Project requirement for trainees commencing training in 2017 onwards.	To align with College-wide implementation of research projects to enable trainees to gain research skills and experience.
Final Supervisor's Report renamed ' Supervisor's Report '.	To reflect the change below.
Additional Supervisor's Report replaces Mid-Year Progress Report for 12 month positions for New Zealand trainees.	To ensure trainees and committees are better informed about trainee progress throughout the year and to align Australian and New Zealand training requirements.
Adult Rheumatology Clinic is a requirement for New Zealand Paediatric Rheumatology trainees commencing training from 2018 onwards.	To ensure appropriate knowledge of progress from paediatric to adult disease and related transitional arrangements and to align Australian and New Zealand training requirements.

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Rheumatology

Rheumatologists are specialist physicians with particular expertise in the diagnosis and holistic management of people with diseases that affect joints, muscles and bones.

Program overview

Advanced Training provides a 'depth' of specialty training under supervision to prepare trainees for independent practice as consultants. It builds on the skills developed in preceding training through work-based assessments and learning tools as outlined in this handbook.

Program	Advanced Training in Rheumatology
Overseeing committee(s)	Advanced Training Committee in Rheumatology (Australasia) (ATC) New Zealand Advanced Training Subcommittee in Rheumatology (New Zealand) (NZ ATS)
Entry requirements	<ul style="list-style-type: none">• Completion of RACP Basic Physician Training, including the RACP Written and Clinical Examinations• Current Medical registration• Appointment to an appropriate Advanced Training position
Minimum duration	3 years (full-time equivalent (FTE))
Curricula	<ul style="list-style-type: none">• Download the Rheumatology Advanced Training Curriculum (PDF 1MB)• Download the Professional Qualities Curriculum (PDF 1MB)
Qualification	Fellowship of the Royal Australasian College of Physicians (FRACP)

Quick links

- [Apply or re-register](#)
- [Program requirements overview](#)
- [Important dates](#)
- [Advanced Training Portal](#)
- [Accredited training sites](#)
- [Part-time training](#)
- [Membership fees \(including training fees\)](#)
- [Supervision](#)
- [Download the Advanced Training supervisor amendment form \(.doc 153KB\)](#)
- [Download the Advanced Training interruption of training form \(.doc 1.1MB\)](#)

Learning and assessment tool forms

Supervisor's Reports

- [Download the Rheumatology Supervisor's Report \(.doc 234KB\)](#)

Trainee's Reports (New Zealand only)

- [Download the Rheumatology Trainee Report Cover Sheet \(New Zealand\) \(.doc 103KB\)](#)
- [Download the Rheumatology Trainee Report Guidelines \(New Zealand\) \(.doc 62KB\)](#)

Logbooks and project

- [Download the Rheumatology Cases Managed Logbook \(.xlsx 135KB\)](#)
- [Download the Rheumatology Procedures Logbook \(.xlsx 135KB\)](#)
- [Download the Rheumatology Project Cover Page \(.doc 100KB\)](#)

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Apply for Advanced Training

Eligibility

New trainees can apply for Advanced Training after completing Basic Training, including passing the Divisional Written and Clinical Examinations. They must have current medical registration and appointment to an appropriate Advanced Training position at a suitable training site.

Advanced Training positions

Core training usually needs to be undertaken at [accredited training sites](#) that have been accredited by the overseeing committee for Advanced Training in the relevant specialty.

Some specialty groups conduct a coordinated [Advanced Trainee Selection and Matching](#) process for appointing trainees to training positions. Details of participating states, regions and specialties are available from June each year.

Please note that the College is not responsible for trainee recruitment and has no role in the recruitment process.

Approval and certification of training

Once trainees have secured a training position, they must prospectively apply for approval as per the [Progression through Training Policy](#).

Approval of training periods will be determined by the overseeing committee. To be approved, a trainee's individual training program must be consistent with the training requirements and appropriate for the stage in training.

Upon completion of each rotation or calendar year of training, the overseeing committee considers each trainee's progress according to the program requirements. If all requirements of training have been satisfactorily completed, the overseeing committee will certify the period of training.

How to apply

Both new and current trainees need to apply for Advanced Training each year.

Australian Trainees

[Apply online for Advanced Training](#) by the due dates below.

Where online registration is not available please download, complete and submit the [application form to apply for Advanced Training in Rheumatology \(.doc 472KB\)](#).

New Zealand Trainees

Download, complete and submit the [application form to apply for Advanced Training in Rheumatology \(.doc 475KB\)](#) by the due dates below.

Trainees must organise the timely submission of all necessary documentation, keep a copy of the application for future reference and pay required [fees](#).

Closing dates for applications in Australia

15 February	Closing date for applications for prospective approval of rotations in the current year
31 August	Closing date for applications for prospective approval of rotations in the second half of the current year

Closing dates for applications in New Zealand

31 March	Closing date for applications for prospective approval of April to August rotations.
31 May	Closing date for applications for prospective approval of rotations in the second half of the current year.

31 October	Closing date for applications for prospective approval of rotations in the first half or whole of the following year.
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College training program resources

This handbook should be used alongside the following resources.

Curricula

RACP curricula outline the learning objectives and associated knowledge, skills, attitudes and behaviours required of graduates of College training programs across program-specific/clinical and non-program/non-clinical attributes.

- [Download the Rheumatology Advanced Training Curriculum \(PDF 1MB\)](#)
- [Download the Professional Qualities Curriculum \(PDF 1MB\)](#)

Advanced Training Portal

Resources for many of the requirements of this training program can be accessed through the [Advanced Training Portal](#). These include:

- summary of training completed and required
- detailed information on training rotations, including approval and certification decisions
- past examination results
- online teaching and learning and formative assessment tools
- information sheets, workflows, rating forms and interactive video tutorials for online tools

Education policies

[Education policies](#) underpin all training requirements.

Key education policies include the following:

- Academic Honesty and Plagiarism
- Flexible Training
- Progression through Training
- Recognition of Prior Learning
- Special Consideration for Assessments
- Trainee in Difficulty Support Policy

Variations in training and flexible training options

[Variations in training](#) processes cover dual, joint, conjoint and post-fellowship training.

[Flexible training option](#) information covers part-time training, interruptions to training, withdrawing from training and exceptional circumstances.

Trainee responsibilities

All trainees are adult learners who must understand [trainee responsibilities](#) and play a role in teaching and mentoring junior doctors.

The College is committed to supporting trainees who are experiencing difficulty in their training. If trainees or supervisors are experiencing difficulty, they should contact their [Education Officer](#) and the [Training Support Unit](#).

Supervisor roles and responsibilities

[Supervision](#) in PREP training involves a comprehensive level of educationally-focused support for trainees. The College runs [supervisor workshops](#) to help develop required skills for this role.

Accreditation of settings

Core training is usually conducted in training positions at [accredited training sites](#) that have been accredited by the overseeing committee.

eLearning@RACP

[eLearning@RACP](#) is a central, online space which supports College members in their learning. It contains educational resources developed by the RACP or shared by other postgraduate medical colleges. College members can login and access courses and modules designed and developed in collaboration with Fellows, trainees and education committees, on topics including:

- Communication
- Indigenous Health
- Research
- Supervisor Professional Development
- Telesupervision

These courses and modules are optional and completion is not a program requirement.

Admission to Fellowship

Trainees are eligible to be admitted to Fellowship of the College on the completion of all requirements of training. The College will invite trainees to apply for Fellowship once the overseeing committee has recommended them for admission. The admission process involves completion of an application form, and the payment of a fee.

New Fellows will receive formal notification from the College that they have been admitted to Fellowship. In addition to the award of Fellowship, individuals who complete training are issued a letter confirming the completion of their training. Fellows who complete another training program subsequent to admission to Fellowship receive a letter confirming all of the RACP training programs that they have completed.

All Fellows in Australia, New Zealand and overseas who are in active practice must meet the requirements of a [Continuing Professional Development \(CPD\) program](#).

Program requirements

Program requirements are the components of a training program that a trainee must complete in order to progress through training. Mandatory program requirements are linked to the certification of training, progression through training and program completion.

Program requirements are made up of formative and summative assessments, teaching and learning activities, the type and duration of clinical rotations, course work and other requirements, such as minimum overall duration of training.

Overseeing committees evaluate training requirements every two years (previously annually) to ensure that they are in line with educational best practice. Requirements are published and communicated accordingly. Changes to the training program that may substantially impact a trainee's plan for training will be implemented following an extended period of notice.

It is the trainee's responsibility to ensure that they are following the correct handbook and are aware of the current program requirements. They must also ensure that they are familiar with current RACP [education policies](#) and processes, such as those for [dual trainees](#).

Program requirements overview

Core training (minimum 24 months)	Non-core training (maximum 12 months)
Content	
<ul style="list-style-type: none"> • Rheumatology Advanced Training Curriculum – Adult Medicine <p style="text-align: center;">or</p> <ul style="list-style-type: none"> • Rheumatology Advanced Training Curriculum – Paediatrics & Child Health • Professional Qualities Curriculum 	<ul style="list-style-type: none"> • Rheumatology Advanced Training Curriculum – Adult Medicine <p style="text-align: center;">or</p> <ul style="list-style-type: none"> • Rheumatology Advanced Training Curriculum – Paediatrics & Child Health • Professional Qualities Curriculum
Supervision	
<p>Supervision per rotation:</p> <ul style="list-style-type: none"> • 2 supervisors with FRACP who are practising rheumatologists 	<p>Supervision per rotation:</p> <ul style="list-style-type: none"> • 1 supervisor with FRACP who is a practising rheumatologist • A second supervisor who may or may not have FRACP
Teaching and learning requirements	
<p>Per year:</p> <ul style="list-style-type: none"> • 2 Learning Needs Analysis • 1 Logbook documenting all procedures performed over a 12-month period • 2 Logbooks documenting all cases managed over a two-month period 	<p>Per year:</p> <ul style="list-style-type: none"> • 2 Learning Needs Analysis
Assessments	
<p>Per rotation:</p> <ul style="list-style-type: none"> • 1 Supervisor's Report (2 for 12-month rotations) • 1 Trainee's Report (New Zealand trainees only) <p>Per year:</p> <ul style="list-style-type: none"> • 2 Case-based Discussions • 4 mini-Clinical Evaluation Exercises • 4 Direct Observation of Procedural Skills 	<p>Per rotation:</p> <ul style="list-style-type: none"> • 1 Supervisor's Report (2 for 12-month rotations) • 1 Trainee's Report (New Zealand trainees only)
<p>By the end of Advanced Training:</p> <p>36 months of certified training time consisting of:</p> <ul style="list-style-type: none"> • 24 months of core training • 12 months of non-core training • Research project requirement: <ul style="list-style-type: none"> ◦ 1 Research Project (for all trainees commencing training in 2017 onwards) ◦ 1 or 2 Research Projects (for Australian trainees who commenced training before 2017) ◦ 2 Research Projects including 1 audit project (for New Zealand trainees who commenced training before 2017) • Attendance at training activities and meetings • Developmental and Psychosocial Training (Paediatric & Child Health trainees only) • Adult General Rheumatology Clinics (All Australian Paediatric & Child Health trainees. Introduced for New Zealand Paediatric & Child Health trainees commencing training in 2018 onwards) 	

Time-based requirements - Training time and rotations
<p>Purpose</p> <p>To ensure adequate time for trainees to gain necessary learning experiences across a range of relevant rotations.</p>
<p>Total training time</p> <p>3 years (36 months (FTE))</p>
<p>Training rotations</p> <ul style="list-style-type: none"> • 24 months core training • 12 months non-core training
<p>Core training</p> <p>A minimum of 24 months (FTE) must be spent in accredited clinical training positions. The two years of core training must be completed at separate sites and should precede non-core training (see note below).</p>
<p>Non-core training</p> <p>A maximum of 12 months of non-core training may be undertaken in clinical training in other disciplines, or in research. The following guidelines have been developed to help trainees formulate their non-core training year.</p> <p>The non-core year can take a number of forms:</p> <ol style="list-style-type: none"> 1. A rheumatology clinical year, in either: <ul style="list-style-type: none"> • a site accredited for core rheumatology training or • a site accredited for non-core rheumatology clinical training. 2. Advance notice to the overseeing committee is not required if the non-core year is to be a clinical year in a site with current accreditation for core or non-core rheumatology training. 3. A clinical research year in which the trainee is involved in a major clinical research project, either of their own development or as a contributor to an ongoing research project. Publication in a peer-reviewed journal is expected. The trainee will be expected to participate in a minimum of one general rheumatology clinic per week in addition to the research clinical work. 4. A research year relevant to the specialty of rheumatology, with enrolment in a senior degree program such as, but not exclusive to, PhD, MD (research) or an MPH. This must be full-time, and attendance to one general rheumatology clinic per week is encouraged. 5. Other training in a field related to rheumatology. This may include, but is not limited to, such disciplines as general medicine, general paediatrics, ultrasonography, etc. <p>For options 3, 4 or 5, a detailed letter should be submitted to the relevant overseeing committee by 31 August. The letter should outline the trainee's experience to date, their aims for the non-core year, and how this may contribute to a continuing career in rheumatology. Depending on whether the year is clinical or in research, details such as numbers and types of clinics per week, evidence of course acceptance, program hours, and subjects in a course may be relevant.</p> <p>NB:</p> <ul style="list-style-type: none"> • Dual trainees applying for non-core training before core training will have their non-core training prospectively approved (provided it meets the guidelines above) but certification will be deferred until completion of a minimum of 12 months of core training. • For all other trainees it is expected that the non-core year will follow core training. Application to (and approval by) the relevant overseeing committee outlining exceptional circumstances is required before the commencement of a non-core year out of the required sequence. <p>The NZ ATS will prospectively approve, on a case-by-case basis, only those rotations which</p>

Time-based requirements - Training time and rotations

are closely related to rheumatology.

Training time in Australia/New Zealand

At least 12 months of Core Advanced Training in Rheumatology must be undertaken in Australia and/or New Zealand. This is to ensure that trainees receive adequate exposure to local practices and health services.

Supervision requirements

Purpose

To provide trainees with appropriate support and guidance to complete the training program.

Core training

- 2 supervisors with FRACP who are practising rheumatologists

Non-core training

- 1 supervisor with FRACP who is a practising rheumatologist
- A second supervisor who may or may not have FRACP

More information

- [Supervision](#)
- [Download the Advanced Training supervisor amendment form \(.doc 153KB\)](#)

Work-based learning and assessment tools

PREP teaching and learning activities are designed to support reflective practice and self-directed learning. A variety of teaching and learning activities and assessments are used throughout PREP training. These activities cater to a range of learning needs, styles and situations that may arise in workplace training, and aim to facilitate learning and enhance the attainment of desired learning outcomes.

Trainees are required to complete all teaching and learning activities, including formative and summative assessments, throughout training.

Formative assessments focus on assessment for learning through feedback and guidance. The College's formative assessments aid the trainee and supervisor through a formal feedback discussion, prompting areas for discussion highlighted by the trainee's performance. The College's formative assessments are based on existing workplace-based assessment methods and best practice in medical education.

Summative assessments focus on judgements about trainee progression, resulting in pass or fail decisions on a trainee's performance.

Case-based Discussion (CbD)
<p>Purpose</p> <p>To guide the trainee's learning through structured feedback and help the supervisor evaluate the expertise and judgement exercised in clinical cases. This is a formative assessment.</p>
<p>Requirement</p> <p>Australia: Two per core training year (one per six-month period, mid-rotation) due by 31 January of the following year</p> <p>New Zealand: Two per core training year (later in the rotation) due by the end of the rotation</p>
<p>More information</p> <ul style="list-style-type: none"> • Enter CbD rating form data into the Advanced Training Portal • Case-based Discussion information sheet, workflow, rating form and other resources

Direct Observation of Procedural Skills (DOPS)	
<p>Purpose</p> <p>To guide trainee learning and achievement of competency in procedural skills through direct observation and the provision of structured feedback. This is a formative assessment.</p>	
<p>Requirement</p> <p>Australia: Four per core year (one per three-month period) due by 31 January of the following year</p> <p>New Zealand: Four per core training year due by the end of each training rotation</p>	
<p>Acceptable procedures</p>	
<p>Adult Medicine</p> <p><i>Joint aspiration or injection:</i></p> <ul style="list-style-type: none"> • Glenohumeral • Acromioclavicular • Sternoclavicular • Costochondral • Humeroradial • Radiocarpal • Metatarsophalangeal 	<p>Paediatrics and Child Health</p> <ul style="list-style-type: none"> • Femorotibial • Talocrural • Subtalar (with and without imaging guidance) • Acetabulofemoral (hip) (with guidance) • Radiocarpal • Humeroradial • Glenohumeral

Direct Observation of Procedural Skills (DOPS)

- Proximal interphalangeal
- Distal interphalangeal
- Femorotibial
- Talocrural
- Subtalar
- Metacarpophalangeal
- Metacarpophalangeal
- Metatarsophalangeal
- Interphalangeal (recommended only)
- Temporomandibular (recommended only)
- Tendon sheath

Soft tissue injections:

- Sub-acromial bursa
- Tendon sheath
- De Quervain's
- Trigger finger
- Greater trochanter
- Carpal tunnel
- Plantar fascia
- Suprascapular nerve block

More information

- Enter DOPS rating form data into the [Advanced Training Portal](#)
- [DOPS Information sheet, rating form, workflow and procedure lists](#)

Learning Needs Analysis (LNA)

Purpose

To embed the process of planning and evaluating learning in the trainee's practice.

Requirement

Australia: Two per year, early in the year (core and non-core) due by 31 January of the following year

New Zealand: Two per year, early in the year (core and non-core) due by the end of the training rotation

More information

- Complete and submit the LNA via the [Advanced Training Portal](#)
- [Learning Needs Analysis information sheet, workflow and other resources](#)

Logbooks

Purpose

To demonstrate that trainees have had adequate clinical exposure and training in appropriate procedures as required in the curriculum.

Requirement

Logbook of procedures performed

One per core year; two over the course of training due with the Supervisor's Report in each core year

Logbook recording all the procedures performed during each year of core training

Logbook of all cases managed in a two-month period

Two per core year; four over the course of training due with the relevant Supervisor's Report in

Logbooks

each core year

Logbooks recording all the cases managed over a two-month period during each year of core training. The first logbook should cover the first 6 months/rotation of the year and the second logbook should cover the second 6 months/rotation of the year. These logbooks will include diagnosis, patient status (new/follow-up), encounter type (inpatient/consult/outpatient), whether a consultant was present and the name of the consultant.

Completion and submission

The accuracy and currency of the logbooks is of the utmost importance. Logbooks must be submitted in the [prescribed spreadsheet forms provided](#) and must be available at all times for review. Patient details (e.g. name, address) should not be included in the logbook.

Trainees should complete a Log Summary Sheet (found as a separate sheet on each prescribed spreadsheet) and submit this with the completed logbooks.

Supervisors are required to confirm in their reports that the logbooks are a true and accurate record of the trainee's experience, and that all training requirements have been fulfilled.

It is recommended that trainees keep a separate logbook of all patients seen for a 12 month period, for the purposes of individual educational value. This logbook is to be kept for personal records only and not to be submitted to the College.

More information

- [Learning and assessment tool forms](#)

Mini-Clinical Evaluation Exercise (mini-CEX)

Purpose

For the trainee to receive timely, structured feedback on their performance in real clinical situations. This is a formative assessment.

Requirement

Australia: Four per core year (one per three-month period) due by 31 January of the following year

New Zealand: Four per core training year due by the end of each training rotation

More information

- Complete and submit the mini-CEX via the [Advanced Training Portal](#)
- [Mini-Clinical Evaluation Exercise information sheet, workflow, rating form and other resources](#)

Research Project(s)

Purpose

To enable trainees to gain experience in research methods; in interpretation of research literature; in participation in research at some stage of their career; and to develop quality improvement skills. Submission of a research project provides evidence of the skills of considering and defining research problems; the systematic acquisition, analysis, synthesis and interpretation of data; and effective written communication.

Research Project (for trainees commencing training in 2017 onwards)

Requirement

For trainees commencing training in 2017 onwards:

One over the course of training due by the annual submission date in the penultimate year of training.

Research Project(s)

Australia: Due by 15 September

New Zealand: Due by 31 October

The research project must be marked as satisfactory prior to admission to Fellowship. Submitting the project in the penultimate year of training will allow time for marking and resubmission of research projects initially marked 'Resubmit'.

More information

- [More information on Research Projects](#)
- [Research Projects eLearning@RACP module](#)
- [Education policies](#)

Research Projects (for trainees who commenced training before 2017)

Requirement

For trainees who commenced training before 2017:

One major or two minor projects for Australian trainees and one research and one audit project for New Zealand trainees as detailed below.

Evidence of completion of the relevant requirement is needed prior to certification of completion of Advanced Training in Rheumatology.

Australia:

One 'major' or two 'minor' projects to be submitted over the course of training due by 15 September - Projects should be commenced during the first year of training. Projects must be completed prior to exiting the training period. As a guide, a minor project should be completed in the year it is commenced; a major project may take two years to complete.

The aim of the research project is to introduce rheumatology trainees to the principles and practice of medical research. As such, a more significant ('major') piece of work is encouraged in preference to two 'minor' projects. The overseeing committee recognises the potential difficulties in completing projects in different sites over a two-year period however, and therefore will allow a trainee to undertake two smaller one-year projects if necessary.

Major projects

These may take several forms, including:

- Clinical or laboratory research presented in a form suitable for, or already submitted for, publication to a peer-reviewed journal (Vancouver guidelines).
- Substantial research, including background, rationale, hypothesis, methodology, feasibility, ethics issues and approval, parent information sheet, and budget. The results should be of a suitable standard which can be presented at either a national or international rheumatology meeting. Presentations at state meetings are not accepted.
- Report and commentary on a substantial piece of original work which is complete, e.g. a thesis for a Doctorate or other higher degree. This piece of work must be relevant to rheumatology and have been undertaken post-medical school. The reviewing committee will need to view the transcript of the academic record certifying completion.
Note: College guidelines indicate that a single project can be counted towards Basic Training or Advanced Training, but not both.
- A substantial quality audit, action research, or an audit/evaluation of a service or clinical program, accompanied by a literature review.
- Systematic review of literature, e.g. the Cochrane collaboration process.
- Completion of a relevant Masters degree, e.g. Masters of Public Health, Masters of Clinical Epidemiology.

It is expected that it will not be possible to complete a major project in one year. Thus it is suggested that the trainee meet with the supervisor of the second year of training once the placement is known and start on the project, e.g. literature review, ethics application, etc.

Research Projects (for trainees who commenced training before 2017)

Trainees will need to discuss with their first year supervisor whether they are aiming to complete one major project or two minor projects during Advanced Training.

Minor projects will generally consist of a smaller body of work completed within one year.

These may take several forms, including:

- Case series illustrating a novel clinical finding or problem
- Departmental audit
- Narrative review
- A cross-sectional study relevant to rheumatology.

New Zealand:

One research project *and* one audit project to be submitted over the course of training (two in total) due by 31 May/31 October - Projects should be commenced during the first year of core training.

- Research project: should include background, rationale, hypothesis, methodology, feasibility, ethics issues and approval, parent information sheet, and budget. The results should be of a suitable standard which can be presented at either a national or international rheumatology meeting. Presentations at state meetings are not accepted.
- Audit project: such as an audit/evaluation of a service or clinical program, accompanied by a literature review.

Project supervision

Trainees are advised to choose their supervisors for projects carefully. The supervisor of the project needs to be able to guide trainees with respect to choice of project, methodology, statistical analysis, interpretation, and quality of presentation. It is possible that supervisors chosen by trainees to supervise training do not have these skills. Trainees are therefore advised to consider choosing a separate project supervisor rather than expect their clinical supervisor to fill both roles. Advice may be sought from a mentor or Department Head.

More information

- [Learning and assessment tool forms](#)

Supervisor's Reports

Purpose

To evaluate and provide feedback on the trainee's progress, which informs the certification of training decision. This is a summative assessment.

Requirement

One Supervisor's Report is due per rotation (core and non-core)

Australia

For Advanced Trainees in 12-month positions:

- One Supervisor's Report is to be submitted by 15 July for the first six months of the calendar year.
- One Supervisor's Report is to be submitted by 31 January of the following year covering the final six months of the calendar year.

For Advanced Trainees in positions of six months or less with separate supervisors, or at separate sites:

- One Supervisor's Report should be completed for each rotation and submitted to the College by 15 July (for first half of the year) and 31 January the following year (for the second half of the year).

Advanced Trainees approaching the end of their training should submit a report that covers the whole second half of the year by 15 October.

Supervisor's Reports

New Zealand

For Advanced Trainees in 12-month positions:

- One Supervisor's Report is to be submitted by 31 May for the first six months of the rotation.
- One Supervisor's Report is to be submitted by 31 October covering the full 12 months.

For Advanced Trainees in three, four, or six-month positions:

- One Supervisor's Report must be completed for each rotation and submitted by 31 May (for rotations in the first half of the year) and 31 October (for rotations in the second half of the year).

The Supervisor's Report must be completed by supervisors who have directly supervised the trainee. If the supervisor has not directly supervised the trainee throughout the whole rotation, the supervisor should obtain individual reports from those who have directly supervised the trainee and provide a composite report.

Supervisors should discuss the report with the trainee prior to both parties signing the report, and trainees should be provided with a copy of each report.

It is the trainee's responsibility to ensure that all supervisors receive a copy of the Supervisor's Report. Failure to do this may result in delays or non-certification of a period of training.

Progression to the next year of training is dependent upon the College receiving satisfactory Supervisor's Report(s) covering the full year/period of training completed.

Trainees must provide copies of previous Supervisor's Report(s) to the next year's/rotation's supervisor. The College may provide subsequent supervisors with copies of past reports (and any other documents deemed relevant to the trainee's training).

More information

- [More information on Supervisor's Reports](#)
- [Learning and assessment tool forms](#)
- [Progression Through Training Policy](#)

Trainee's Report

Purpose

To provide feedback to the College for use in future training program evaluations and to encourage trainees to reflect on their training rotations to embed reflection and review into their practice.

Requirement

Australia: Not required

New Zealand: One per rotation (core and non-core) submitted with the Supervisor's Report at the end of each rotation and due by 31 May/31 October

More information

- [More information on Trainee's Reports](#)
- [Learning and assessment tool forms](#)

Other requirements

Adult General Rheumatology Clinic

Purpose

To enable trainees to experience the progression of paediatric into adult disease, gain a broader understanding of end stage inflammatory disease and greater exposure to procedural skills, in particular joint injections. It should also help trainees to develop awareness of the need

Adult General Rheumatology Clinic

for appropriate transition programs for patients rather than merely transfer to adult services.

Requirement

This is a requirement for all Australian Paediatrics & Child Health trainees Introduced for New Zealand Paediatrics & Child Health trainees commencing training from 2018 onwards

Once over the course of training, with completion noted in the Supervisor's Report at the end of the rotation.

Trainees should establish formal links with an adult rheumatology training program for a minimum of once per week for a period of 6 months in, preferably, either of their 2 core years of training.

Attendance at training activities and meetings

Purpose

To ensure participation and interaction with other rheumatology trainees and rheumatology experts in a formal education setting throughout training.

Requirement

Australia: Minimum 80% attendance at training activities and meetings organised by the Federal or State Australian Rheumatology Association.

New Zealand: Minimum 80% attendance at training activities and meetings organised by the New Zealand Rheumatology Association.

Training activities and meetings:

- Department/hospital training activities as directed by the supervisor
- State/regional monthly ARA/NZRA meetings*
- Trainee teaching/journal clubs*
- Australian Rheumatology Association Annual Scientific Meeting (attendance strongly recommended for Australian trainees)
- New Zealand Rheumatology Association Annual Scientific Meeting (attendance strongly recommended for New Zealand trainees)
- Advanced Trainee preceptorship
- Other state/regional weekend/scientific meetings (if held)*
- Overseas conferences.

Developmental and Psychosocial Training

Purpose

To assist trainees to develop a sophisticated understanding of child development, encompassing physical, cognitive, emotional, behavioural and social areas, which should be gained from the perspective of the child within the family and in the context of the community.

Requirement

This is a requirement for Paediatrics & Child Health trainees only.

Australia: Once over entire training period (Basic Training *and* Advanced Training) for six months due by the end of Advanced Training

New Zealand: Once over entire training period (Basic Training *and* Advanced Training) for three months due by the end of Advanced Training

More information

- [More information on Developmental and Psychosocial Training](#)
- [Learning and assessment tool forms](#)

Important dates

Australia

January–March

15 February

- Applications for Approval of Advanced Training due

Other activities to be completed this quarter

- Learning Needs Analysis
- Direct Observation of Procedural Skills
- Mini-Clinical Evaluation Exercise

April–June

Activities to be completed this quarter

- Learning Needs Analysis self-evaluation
- Mini-Clinical Evaluation Exercise
- Case-based Discussion
- Direct Observation of Procedural Skills

July–September

15 July

- Supervisor's Report due for all trainees
- Cases Managed Logbook due (core training only)

31 August

- Applications for Approval of Advanced Training for the second half of the year due
- Detailed letter outlining non-core training intentions to be submitted

15 September

- Project requirement submission date

Other activities to be completed this quarter

- Learning Needs Analysis
- Mini-Clinical Evaluation Exercise
- Direct Observation of Procedural Skills

October–December

15 October

- Supervisor's Report and all PREP tools due for trainees eligible for December Fellowship
- Cases Managed and Procedures Logbooks due for trainees who are eligible for December 2016 Fellowship (core training only)

Other activities to be completed this quarter

- Learning Needs Analysis self-evaluation
- Mini-Clinical Evaluation Exercise
- Case-based Discussion
- Direct Observation of Procedural Skills (first and second year trainees)

January 2017

31 January

- Previous year's Supervisor's Report, Cases Managed and Procedures Logbooks, and all PREP tools due for trainees *not* applying for Fellowship in December

New Zealand

December–February

Activities to be completed this quarter

- Learning Needs Analysis
- Mini-Clinical Evaluation
- Direct Observation of Procedural Skills

March–May

31 March

- Applications for Approval of Advanced Training for April–August rotations due

31 May

- Applications for Approval of Advanced Training for the second half of the current year due
- Supervisor's Report due for all trainees
- Trainee's Report for the first half of the year due
- Logbooks due (core training only)

Other activities to be completed this quarter

- Learning Needs Analysis self-evaluation
- Case-based Discussion
- Mini-Clinical Evaluation Exercise
- Direct Observation of Procedural Skills (first year trainees)

June–August

31 August

- Detailed letter outlining non-core training intentions to be submitted

Other activities to be completed this quarter

- Learning Needs Analysis
- Mini-Clinical Evaluation Exercise
- Direct Observation of Procedural Skills

September–November

31 October

- Applications for Approval of Advanced Training for the first half or whole of the following year due
- Supervisor's Report and all PREP tools due for all trainees
- Trainee's Report for the second half of the year, or the whole year, due
- Logbooks due (core training only)

Other activities to be completed this quarter

- Learning Needs Analysis self-evaluation
- Mini-Clinical Evaluation Exercise
- Case-based Discussion
- Direct Observation of Procedural Skills (first year trainees)

More information

RACP policies

- [Education policies](#)
- [Privacy Policy for Personal Information](#)
- [Code of Conduct and Working Together Policy](#)

RACP initiatives

[Pomegranate Podcasts](#) (Pomcast) is a monthly medical podcast created by physicians, for physicians.

[Evolve](#) is a physician-led initiative to ensure the highest quality patient care through the identification and reduction of low-value practices and interventions.

Useful contacts

Contact the College	
<p>Member Services Contact Centre First point of contact for general enquiries.</p>	<p>Australia Email: raccp@raccp.edu.au Phone: 1300 MyRACP 1300 69 7227</p> <p>New Zealand Email: raccp@raccp.org.nz Phone: 0508 MyRACP 0508 69 7227</p>

Other College contacts	
<p>Education Officers Education Officers administer the training program and can respond to training-related enquiries.</p>	<p>Australia Email: Rheumatology@raccp.edu.au Phone: +61 2 8247 6295</p> <p>New Zealand Email: Rheumatology@raccp.org.nz Phone: +64 4 472 6713</p>
<p>Training Support The Training Support Unit supports trainees and supervisors of trainees who are experiencing difficulties in their training.</p>	<p>Australia Email: trainingsupport@raccp.edu.au Phone: +61 2 9256 5457</p> <p>New Zealand Email: trainingsupport@raccp.org.nz Phone: +64 4 472 6713</p>
<p>Supervisor Support The Supervisor Learning Support Unit provides and coordinates supervisor skills training.</p>	<p>Email: supervisor@raccp.edu.au Phone: +61 2 8076 6300</p>
<p>College Trainees' Committee The College Trainees' Committee (CTC) reports to the College Board and represents and advocates on behalf of trainees.</p>	<p>Email: traineescommittee@raccp.edu.au</p>
<p>New Zealand Trainees' Committee The New Zealand Trainees' Committee</p>	<p>Email: traineescommittee@raccp.org.nz</p>

Other College contacts

represents and advocates on behalf of trainees.

Other contacts

Specialty societies

[Specialty societies](#) are medical/scientific societies that bring together research and clinical scientists and physicians who are actively involved in a particular area of medical practice, e.g. cardiology, geriatric medicine. The specialty societies are independent organisations that contribute to physician education through their members' involvement in College education committees and activities.

Australian Rheumatology Association

The [Australian Rheumatology Association](#) is the peak professional body representing Rheumatology physicians/paediatricians in Australia.

New Zealand Rheumatology Association

The [New Zealand Rheumatology Association](#) is the peak professional body representing Rheumatology physicians/paediatricians in New Zealand.

Additional training resources

This is a list of training resources independent of the College that trainees may find useful.

- [EULAR On-Line Course on Rheumatic Diseases](#)

www.racp.edu.au

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