Education renewal

Program handbook

Advanced Training in Rehabilitation Medicine (adult)



About this document

This program handbook outlines the learning, teaching, and assessment (LTA) programs for Advanced Training in Rehabilitation Medicine (adult) for trainees and supervisors.

This handbook should be used in conjunction with the Advanced Training in Rehabilitation Medicine (adult) curriculum standards.

For more information or to provide feedback contact <u>curriculum@racp.edu.au</u>.

Contents

Program overview	. 3
Purpose of Advanced Training	. 3
Learning, teaching, and assessment (LTA) structure	. 4
Learning goals	. 5
Training program requirements summary1	10
Program requirements by phase of Advanced Training1	14
Specialty entry phase1	14
Specialty foundation phase1	18
Specialty consolidation phase2	21
Transition to Fellowship phase2	24
Appendix 1: Learning and assessment tools2	27

Program overview

Purpose of Advanced Training

The RACP offers Advanced Training in 33 diverse medical specialties as part of Division, Chapter, or Faculty training programs.

The purpose of Advanced Training is to develop a workforce of physicians who:

- have received breadth and depth of focused specialist training, and experience with a wide variety of health problems and contexts
- are prepared for and committed to independent expert practice, lifelong learning, and continuous improvement
- provide safe, quality health care that meets the needs of the communities of Australia and Aotearoa New Zealand.



Learning, teaching, and assessment (LTA) structure

The learning, teaching, and assessment structure defines the framework for delivery and trainee achievement of the curriculum standards in the Advanced Training program.

Advanced Training is structured in three phases. These phases will establish clear checkpoints for trainee progression and completion.

- 1 Specialty foundation • Orient trainees and confirm their readiness to progress in the Advanced Training program
- **2 Specialty** Continue trainees' professional development in the specialty, and support progress towards the learning goals.
- **3 Transition to Fellowship** • Confirm trainees' achievement of the curriculum standards, completion of Advanced Training, and admission to Fellowship
 - Support trainees' transition to unsupervised practice



The learning, teaching, and assessment structure

- An entry decision is made before entry into the program.
- **Progress decisions**, based on competence, are made at the end of the specialty foundation and specialty consolidation phases of training.
- A **completion decision**, based on competence, is made at the end of the training program, resulting in eligibility for admission to Fellowship.

Learning goals

The <u>curriculum standards</u> are summarised as **23 learning goals**. Learning and assessment activities are linked to the learning goals to ensure these activities align with the standards and trainees are able to demonstrate learning across the breadth of the curriculum.

The learning goals articulate what trainees need to be, do, and know, and are assessed throughout training on a five-point scale.

Rating scales

Levels	1	2	3	4	5
Entrustable Professional Activities (EPAs)	Is able to be present and observe	Is able to act with direct supervision	Is able to act with indirect supervision (e.g. supervisor is physically located within the training setting)	Is able to act with supervision at a distance (e.g. supervisor available to assist via phone)	Is able to provide supervision
Knowledge guides	Has heard of some of the topics in this knowledge guide that underpin patient care (heard of)	Knows the topics and concepts in this knowledge guide that underpin patient care (knows)	Knows how to apply the knowledge in this knowledge guide to patient care (knows how)	Frequently shows they can apply knowledge in this knowledge guide to patient care (shows how)	Consistently applies sound knowledge in this knowledge guide to patient care (does)
Professional Behaviours (competencies)	Needs to work on behaviour in more than 5 domains of professional practice	Needs to work on behaviour in 4 or 5 domains of professional practice	Needs to work on behaviour in 2 or 3 domains of professional practice	Needs to work on behaviour in 1 or 2 domains of professional practice	Consistently behaves in line with all 10 domains of professional practice

				Progression criteria		Completion criteria
	Learning goals	Entry into training	End of specialty entry	End of specialty foundation	End of specialty consolidation	End of Transition to Fellowship
		At entry into the program, trainees will:	By the end of this phase, trainees will:	By the end of this phase, trainees will:	By the end of this phase, trainees will:	By the end of training, trainees will:
Be	1. Professional behaviours	Level 4 need to work on behaviour in 1 or 2 domains of professional practice	Level 4 need to work on behaviour in 1 or 2 domains of professional practice	Level 5 consistently behave in line with all 10 domains of professional practice	Level 5 consistently behave in line with all 10 domains of professional practice	Level 5 consistently behave in line with all 10 domains of professional practice
	1. Team leadership: Lead a team of health professionals	Level 1 be able to be present and observe	Level 2 be able to act with direct supervision	Level 3 be able to act with indirect supervision	Level 4 be able to act with supervision at a distance	Level 5 be able to provide supervision
	2. Teaching and supervision: Supervise and teach professional colleagues	Level 2 be able to act with direct supervision	Level 2 be able to act with direct supervision	Level 3 be able to act with indirect supervision	Level 4 be able to act with supervision at a distance	Level 5 be able to provide supervision
	3. Quality improvement: Identify and address failures in health care delivery	Level 1 be able to be present and observe	Level 2 be able to act with direct supervision	Level 3 be able to act with indirect supervision	Level 4 be able to act with supervision at a distance	Level 5 be able to provide supervision
	4. Clinical assessment and management of function: Clinically assess and manage the ongoing care of patients	Level 2 be able to act with direct supervision	Level 2 be able to act with direct supervision	Level 3 be able to act with indirect supervision	Level 4 be able to act with supervision at a distance	Level 5 be able to provide supervision
work tasks)	5. Handover of care: Manage the handover of patient care between health care professionals, providers, and contexts	Level 2 be able to act with direct supervision	Level 3 be able to act with indirect supervision	Level 3 be able to act with indirect supervision	Level 4 be able to act with supervision at a distance	Level 5 be able to provide supervision
Do (6. Longitudinal care: Manage and coordinate the longitudinal care of patients with chronic illness, disability and/or long-term health issues	Level 1 be able to be present and observe	Level 2 be able to act with direct supervision	Level 3 be able to act with indirect supervision	Level 4 be able to act with supervision at a distance	Level 5 be able to provide supervision
	7. Communication with patients: Discuss diagnoses and management plans with patients	Level 2 be able to act with direct supervision	Level 3 be able to act with indirect supervision	Level 3 be able to act with indirect supervision	Level 4 be able to act with supervision at a distance	Level 5 be able to provide supervision
	8. Procedures: Plan, prepare for, perform, and provide aftercare for important practical procedures	Level 1 be able to be present and observe	Level 2 be able to act with direct supervision	Level 3 be able to act with indirect supervision	Level 4 be able to act with supervision at a distance	Level 5 be able to provide supervision
	9. Clinic management: Manage an outpatients clinic	Level 1 be able to be present and observe	Level 2 be able to act with direct supervision	Level 3 be able to act with indirect supervision	Level 4 be able to act with supervision at a distance	Level 5 be able to provide supervision

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				Progression criteria		Completion criteria
	Learning goals	Entry into training	End of specialty entry	End of specialty foundation	End of specialty consolidation	End of Transition to Fellowship
	Louining goulo	At entry into the program, trainees will:	By the end of this phase, trainees will:	By the end of this phase, trainees will:	By the end of this phase, trainees will:	<i>By the end of training, trainees will:</i>
	1. Traumatic brain injury	Level 1 have heard of some of the topics and concepts in this knowledge guide that underpin patient care (heard of)	Level 2 know the topics and concepts in this knowledge guide that underpin patient care (knows)	Level 3 know how to apply the knowledge in this knowledge guide to patient care (knows how)	Level 4 frequently show they can apply knowledge in this knowledge guide to patient care (shows how)	Level 5 consistently apply sound knowledge in this knowledge guide to patient care (does)
	2. Stroke	Level 2 know the topics and concepts in this knowledge guide that underpin patient care (knows)	Level 2 know the topics and concepts in this knowledge guide that underpin patient care (knows)	Level 3 know how to apply the knowledge in this knowledge guide to patient care (knows how)	Level 4 frequently show they can apply knowledge in this knowledge guide to patient care (shows how)	Level 5 consistently apply sound knowledge in this knowledge guide to patient care (does)
edge guides)	3. Neurological conditions	Level 1 have heard of some of the topics and concepts in this knowledge guide that underpin patient care (heard of)	Level 2 know the topics and concepts in this knowledge guide that underpin patient care (knows)	Level 3 know how to apply the knowledge in this knowledge guide to patient care (knows how)	Level 4 frequently show they can apply knowledge in this knowledge guide to patient care (shows how)	Level 5 consistently apply sound knowledge in this knowledge guide to patient care (does)
Know (Knowledge guides)	4. Spinal cord dysfunction	Level 1 have heard of some of the topics and concepts in this knowledge guide that underpin patient care (heard of)	Level 2 know the topics and concepts in this knowledge guide that underpin patient care (knows)	Level 3 know how to apply the knowledge in this knowledge guide to patient care (knows how)	Level 4 frequently show they can apply knowledge in this knowledge guide to patient care (shows how)	Level 5 consistently apply sound knowledge in this knowledge guide to patient care (does)
	5. Amputation of limb and prosthetics	Level 1 have heard of some of the topics and concepts in this knowledge guide that underpin patient care (heard of)	Level 2 know the topics and concepts in this knowledge guide that underpin patient care (knows)	Level 3 know how to apply the knowledge in this knowledge guide to patient care (knows how)	Level 4 frequently show they can apply knowledge in this knowledge guide to patient care (shows how)	Level 5 consistently apply sound knowledge in this knowledge guide to patient care (does)
	6. Musculoskeletal conditions	Level 2 know the topics and concepts in this knowledge guide that underpin patient care (knows)	Level 2 know the topics and concepts in this knowledge guide that underpin patient care (knows)	Level 3 know how to apply the knowledge in this knowledge guide to patient care (knows how)	Level 4 frequently show they can apply knowledge in this knowledge guide to patient care (shows how)	Level 5 consistently apply sound knowledge in knowledge guide to patient care (does)

			Progression criteria		Completion criteria
Learning goals	Entry into training At entry into the program, trainees will:	End of specialty entry By the end of this phase, trainees will:	End of specialty foundation By the end of this phase, trainees will:	End of specialty consolidation By the end of this phase, trainees will:	End of Transition to Fellowship By the end of training, trainees will:
7. Cardiac and respiratory conditions	Level 2 know the topics and concepts in this knowledge guide that underpin patient care <i>(knows)</i>	Level 2 know the topics and concepts in this knowledge guide that underpin patient care (knows)	Level 3 know how to apply the knowledge in this knowledge guide to patient care (knows how)	Level 4 frequently show they can apply knowledge in this knowledge guide to patient care (shows how)	Level 5 consistently apply sound knowledge in this knowledge guide to patient care (does)
8. Adults with disabilities arising in childhood	Level 1 have heard of some of the topics and concepts in this knowledge guide that underpin patient care (heard of)	Level 2 know the topics and concepts in this knowledge guide that underpin patient care (knows)	Level 3 know how to apply the knowledge in this knowledge guide to patient care (knows how)	Level 4 frequently show they can apply knowledge in this knowledge guide to patient care (shows how)	Level 5 consistently apply sound knowledge in this knowledge guide to patient care (does)
9. Rehabilitation of older people	Level 2 know the topics and concepts in this knowledge guide that underpin patient care <i>(knows)</i>	Level 2 know the topics and concepts in this knowledge guide that underpin patient care (knows)	Level 3 know how to apply the knowledge in this knowledge guide to patient care (knows how)	Level 4 frequently show they can apply knowledge in this knowledge guide to patient care (shows how)	Level 5 consistently apply sound knowledge in this knowledge guide to patient care (does)
10. Rehabilitation of other specific conditions	Level 1 have heard of some of the topics and concepts in this knowledge guide that underpin patient care (heard of)	Level 2 knows the topics and concepts in this knowledge guide that underpin patient care (knows)	Level 3 know how to apply the knowledge in this knowledge guide to patient care (knows how)	Level 4 frequently show they can apply knowledge in this knowledge guide to patient care (shows how)	Level 5 consistently apply sound knowledge in this knowledge guide to patient care (does)
11. Pain	Level 1 have heard of some of the topics and concepts in this knowledge guide that underpin patient care (heard of)	Level 2 know the topics and concepts in this knowledge guide that underpin patient care (knows)	Level 3 know how to apply the knowledge in this knowledge guide to patient care (knows how)	Level 4 frequently show they can apply knowledge in this knowledge guide to patient care (shows how)	Level 5 consistently apply sound knowledge in this knowledge guide to patient care (does)
12. Orthotics and footwear	Level 1 have heard of some of the topics and concepts in this knowledge guide that underpin patient care (heard of)	Level 2 know the topics and concepts in this knowledge guide that underpin patient care (knows)	Level 3 know how to apply the knowledge in this knowledge guide to patient care (knows how)	Level 4 frequently show they can apply knowledge in this knowledge guide to patient care (shows how)	Level 5 consistently apply sound knowledge in this knowledge guide to patient care (does)

			Progression criteria		Completion criteria
	Entry into training	End of specialty entry	End of specialty foundation	End of specialty consolidation	End of Transition to Fellowship
Learning goals	At entry into the program, trainees will:	By the end of this phase, trainees will:	By the end of this phase, trainees will:	By the end of this phase, trainees will:	By the end of training, trainees will:
13. Spasticity and its management	Level 1 have heard of some of the topics and concepts in this knowledge guide that underpin patient care (heard of)	Level 2 know the topics and concepts in this knowledge guide that underpin patient care (knows)	Level 3 know how to apply the knowledge in this knowledge guide to patient care (knows how)	Level 4 frequently show they can apply knowledge in this knowledge guide to patient care (shows how)	Level 5 consistently apply sound knowledge in this knowledge guide to patient care (does)

Training program requirements summary

Entry and registration requirements

What do I need to do?	When do I need to do it?
1 registration form.	At the start of each phase of training.

Prospective trainees can demonstrate:

Entry attributes	Prospective trainees can demonstrate:
	 a commitment and capability to pursue a career as a physician in rehabilitation medicine
	 the ability and willingness to achieve the common learning goals for Advanced Training:
	» team leadership
	» supervision and teaching
	» the professional behaviours, as outlined in the Competencies.
Entry criteria	Prospective trainees must have:
	 completed 2 years full time (or full-time equivalent) of supervised postgraduate general clinical experience in a health-related field (post primary medical degree) within the last 5 years
	 completed an Advanced Life Support course
	 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 Medical Council of New Zealand and a practising certificate if applying in Aotearoa New Zealand
	 an Advanced Training position in an RACP-accredited training setting or network.

Eearning program requirements

What do I need to do?	When do I need to do it?
Clinical experience	
 Complete at least 48 months of relevant professional experience in approved rotations in at least 2 different training settings. 	 In any sequence over the course of training.
Location of training	
 Complete training in at least 2 different accredited training settings. 	 In any sequence over the course of training.
• Complete at least 36 months of training in accredited training settings in Australia and/or Aotearoa New Zealand, with the exception of trainees based in Hong Kong and Singapore.	
 Trainees considering training in overseas positions should seek guidance from the AFRM Training Committee prior to applying for prospective approval. 	
Experiential requirements	
 36 months minimum spent in RACP-accredited settings. 12 months maximum in other clinical training disciplines or in research. 	 In any sequence over the course of training.
The AFRM Training Committee prospectively approves other clinical training disciplines or in research training rotations on a case-by-case basis.	
Other clinical training disciplines or in research time will only be considered if there is a substantial (minimum 0.5 FTE) clinical component equivalent to Advanced Training.	
Learning courses	
9 required learning courses:	
 RACP Orientation to Advanced Training resource*. 	• Within the first 6 months of Advanced Training
 RACP Health Policy, Systems and Advocacy resource*. 	• Recommended completion before the Transition to Fellowship phase.
RACP <u>Supervisor Professional</u> <u>Development Program</u> .	• Before the end of Advanced Training.
Clinical neuropsychology resource*.	• Before the end of Advanced Training.

 Australian Aboriginal, Torres Strait Islander and Māori Cultural Competence and Cultural Safety <u>resource</u>. 	Before the end of Advanced Training.
 Functional Independence Measure Training course. 	• Before the end of Advanced Training.
• RACP Communication Skills <u>resource</u> .	• Before the end of Advanced Training.
 RACP Ethics and Professional Behaviour resource. 	• Before the end of Advanced Training.
 RACP Leadership, Management, and Teamwork <u>resource</u>. 	• Before the end of Advanced Training.
	*Resource to be developed.

Teaching program requirements				
What do I need to do?	When do I need to do it?			
Name 2 individuals for the role of Education Supervisor (this is recommended; 1 Education Supervisor is acceptable):	 Each accredited or approved training rotation. 			
 1 or 2 supervisor/s per rotation, who is a Fellow of the AFRM and actively practising in rehabilitation medicine 				
 for training outside of rehabilitation medicine: 1 supervisor per rotation, who is a Fellow of the AFRM, RACP or other appropriate college 				
 1 Training Program Director (recommended) 				
Recommended: wherever possible, trainees should maintain the same Education Supervisors throughout a phase of training.				
 Nominate 1 RACP training committee to act as a Progress Review Panel. 	• 1 over the course of training.			
 Name 1 individual for the role of Research Project Supervisor (may or may not be the Education Supervisor). 	• 1 over the course of training.			

□ Assessment program requirements

What do I need to do?	When do I need to do it?
	Per phase of training (i.e. each year)
1 learning plan.	• At the start of each phase training and reviewed every 3 months.
12 learning captures, across the range of learning goals.	Minimum 1 per month.
8 observation captures, across the range of learning goals.	• Minimum 2 per quarter.
4 in-training long case assessments.	Minimum 1 per quarter.
4 progress reports.	 Minimum of 1 every 3 months. (Note: final progress report for each phase includes end-of-phase review.)
	Once over the course of training (if passed)
1 research project proposal.	• Submitted by the end of the Specialty foundation phase.
1 research project.	• Submitted for marking before the start of the Transition to Fellowship phase.
1 AFRM entry phase examination.	• Completed by the end of the specialty entry phase.
1 Case Report: The biopsychosocial approach.	• Once over the course of training.
1 Case Report: Process/experience of disability.	• Once over the course of training.
1 AFRM Fellowship Written Examination.	• After 24 months FTE of certified training in rehabilitation medicine.
1 AFRM Fellowship Clinical Examination.	• After 24 months FTE of certified training in rehabilitation medicine.
1 experiential logbook.	Optional.

Although these are the minimum assessment requirements, more work-based assessments (learning captures and observation captures) are encouraged.

See <u>Appendix 1</u> for details on each of the learning and assessment tools.

Program requirements by phase of Advanced Training

Specialty entry phase



Purpose

• Orient trainees and confirm their readiness to progress in their Advanced Training specialty.



Duration

• 12 months full-time equivalent (FTE).



Entry attributes and criteria

Entry attributes

Prospective trainees can demonstrate:

- the commitment and capability to pursue a career as a physician in rehabilitation medicine
- the ability and willingness to achieve the common learning goals for Advanced Training:
 - » team leadership
 - » supervision and teaching
 - » the professional behaviours, as outlined in the Competencies.

Entry criteria

Prospective trainees must have:

- completed 2 years full time (or full-time equivalent) of supervised postgraduate general clinical experience in a health-related field (post primary medical degree) within the last 5 years
- completed an Advanced Life Support course
- 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 Medical Council of New Zealand and a practising certificate if applying in Aotearoa New Zealand
- an Advanced Training position in an RACP-accredited training setting or network.



Learning program

- 12 months' FTE relevant professional experience in approved training rotations.
- Required learning courses:
 - » RACP Induction to Advanced Training resource*
- Recommended learning courses:
 - » RACP research projects resource
 - » RACP eLearning resources
 - » RACP curated collections

*Resource to be developed.

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Teaching program

- **2** named individuals for the role of Education Supervisor (recommended: 1 Education Supervisor is acceptable):
 - » 1 supervisor per rotation, who is a Fellow of the AFRM and actively practising in rehabilitation medicine
 - » for training outside of rehabilitation medicine: 1 supervisor per rotation, who is a Fellow of the AFRM, RACP, or other appropriate college
 - » 1 training program director (recommended).
- 1 nominated **RACP training committee** to act as a Progress Review Panel.
- **1** named individual for the role of **Research Project Supervisor** (may or may not be the Education Supervisor).
- Supplementary resources for supervisors:
 - » Supervisor Professional Development Program
 - » RACP Research Supervision resource
 - » RACP Training Support resource
 - » RACP Creating a Safe Workplace <u>resource</u>.
- Supplementary resources for training settings and networks:
 - » training provider standards for clinical training programs
 - » training network principles
 - » RACP Trainee Selection and Recruitment guide.

15

Assessment program

- **12** learning captures (minimum of ~1 per month) across the range of learning goals.
- 8 observation captures (minimum of ~2 per quarter) across a range of learning goals.
- 1 learning plan, reviewed 3-monthly.
- 4 in-training Long Case Assessments.
- 4 progress reports (minimum 1 per 3 months).
- 1 research project proposal (by the end of the Specialty foundation phase).
- **1** AFRM entry phase examination.



Progression criteria

To progress to the Specialty consolidation phase, trainees can demonstrate:

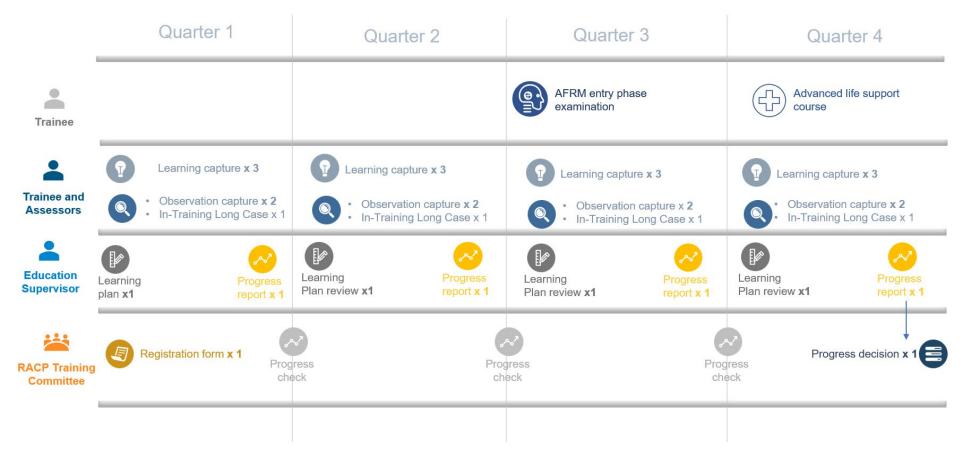
- the ability to plan and manage their learning, and to complete their learning and assessment requirements in a timely manner
- achievement of the learning goals to the levels outlined in the progression criteria
- successful completion of the AFRM entry phase examination.

It is **recommended** that trainees complete the following learning courses (if not completed previously):

- RACP Communication Skills <u>resource</u>
- RACP Ethics and Professional Behaviour <u>resource</u>
- RACP Leadership, Management, and Teamwork <u>resource</u>.

If a trainee cannot demonstrate they have satisfied the above criteria, they are required to continue in their current phase and complete a learning plan to focus on areas in which they need to improve.

Specialty entry phase



* Please note not all required learning courses are reflected in the phase diagram.

Specialty foundation phase



Purpose

• Continue trainees' professional development in the specialty and support progress towards the learning goals.



Duration

• 12 months full-time equivalent (FTE).



Entry criteria

Prospective trainees can demonstrate:

- certification of the Specialty entry phase by the training committee overseeing the Specialty foundation phase
- an Advanced Training position in an RACP-accredited training setting or network.



Learning program

- 12 months' FTE professional experience in approved training rotations.
- Required learning courses:
 - » Health Policy, Systems and Advocacy resource*^.
- Recommended learning course:
 - » RACP Communicating Risks and Benefits resource.

*Resource to be developed. ^Required over the course of Advanced Training.



Teaching program

• As per Specialty entry phase.

Assessment program

- **12** learning captures (minimum of ~1 per month) across the range of learning goals.
- 8 observation captures (minimum of ~2 per quarter) across a range of learning goals.
- **1** learning plan, reviewed 3-monthly.
- 1 research project.
- **4** in-training Long Case Assessments.
- 4 progress reports (minimum 1 per 3 months).



Progression criteria

To progress to the Specialty 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
- achievement of the learning goals to the levels outlined in the progression criteria.

If a trainee cannot demonstrate they have satisfied the above criteria, they are required to continue in their current phase and complete a learning plan to focus on areas in which they need to improve.

Specialty foundation phase



* Please note not all required learning courses are reflected in the phase diagram.

Specialty consolidation phase



 Continue trainees' professional development in the specialty and support progress towards the learning goals.



Duration

• 12 months full-time equivalent (FTE).



Entry criteria

Prospective trainees can demonstrate:

- certification of the Specialty foundation training phase by the training committee overseeing the Specialty consolidation phase
- an Advanced Training position in an RACP-accredited training setting or network.



Learning program

- 12 months' FTE professional experience in approved training rotations.
- Required learning courses:
 - » Health Policy, Systems and Advocacy resource*^.
- Recommended learning course:
 - » RACP Communicating Risks and Benefits resource.

*Resource to be developed. ^Required over the course of Advanced Training.



Teaching program

• As per Specialty entry training phase.

Assessment program

- **12** learning captures (minimum of ~1 per month) across the range of learning goals.
- 8 observation captures (minimum of ~2 per quarter) across a range of learning goals.
- **1** learning plan, reviewed 3-monthly.
- 1 research project.
- **4** in-training Long Case Assessments.
- 4 progress reports (minimum 1 per 3 months).



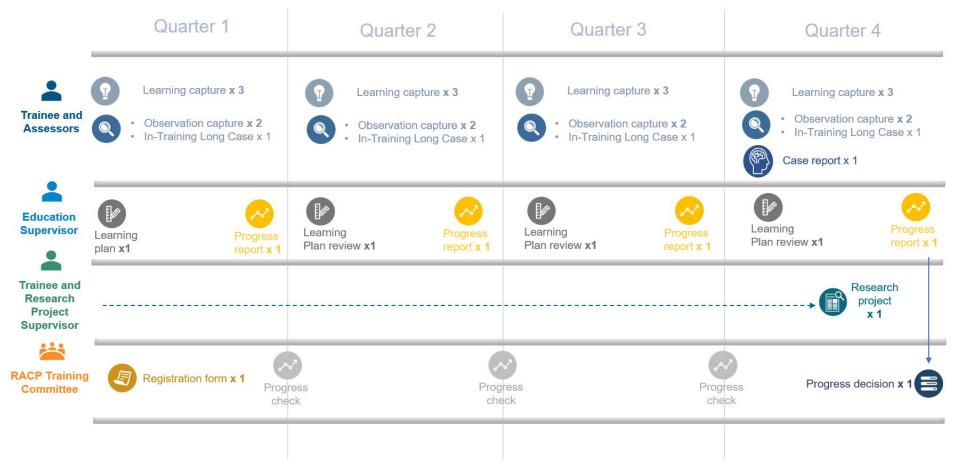
Progression criteria

To progress to the Transition to Fellowship phase, trainees can demonstrate:

- submission of the research project
 - » there will be an opportunity to re-submit the research project in the final phase of training if requested by the Faculty Training Committee
- the ability to plan and manage their learning, and to complete their learning and assessment requirements in a timely manner
- achievement of the learning goals to the levels outlined in the progression criteria.

If a trainee cannot demonstrate they have satisfied the above criteria, they are required to continue in their current phase and complete a learning plan to focus on areas in which they need to improve.

Specialty consolidation phase



* Please note not all required learning courses are reflected in the phase diagram.

Transition to Fellowship phase

Purpose

- Confirm trainees' achievement of the curriculum standards, completion of Advanced Training, and admission to Fellowship.
- Support trainees' transition to unsupervised practice.



Duration

• 12 months full-time equivalent (FTE).



Entry criteria

Prospective trainees can demonstrate:

- certification of the Specialty consolidation phase by the training committee overseeing the Transition to Fellowship phase
- submission of 1 research project
- an Advanced Training position in an RACP-accredited training setting or network.



Learning program

• 12 months' FTE professional experience in approved training rotations.



Teaching program

• As per Specialty entry phase.



Assessment program

- 12 learning captures (minimum of ~1 per month) across the range of learning goals.
- 8 observation captures (minimum of ~2 per quarter) across a range of learning goals.
- 1 learning plan, reviewed 3-monthly.
- **4** in-training Long Case Assessments.
- 4 progress reports (minimum 1 per 3 months).



Completion criteria

To complete the Advanced Training program, trainees can demonstrate:

- the ability to evaluate and manage their learning and to complete all requirements of training in a timely manner
- achievement of the learning goals to the levels outlined in the progression criteria
- completion of a satisfactory research project
- completion of the Supervisor Professional Development Program
- completion of a satisfactory Case Report: The biopsychosocial approach
- completion of a satisfactory Case Report: Process/Experience of disability
- satisfactory completion of the AFRM Fellowship Written Examination
- satisfactory completion of the AFRM Fellowship Clinical Examination
- completion of the following learning courses (if not completed previously):
 - » RACP Communication Skills resource
 - » RACP Australian Aboriginal, Torres Strait Islander and Māori Cultural Competence resource
 - » RACP Ethics and Professional Behaviour resource
 - » RACP Leadership, Management, and Teamwork resource
 - » Clinical neuropsychology resource
 - » Functional Independence Measure training course.

If a trainee cannot demonstrate they have satisfied the above criteria, they are required to continue in their current phase and complete a learning plan to focus on areas in which they need to improve.

25

Transition to Fellowship phase

	Quarter 1	Quarter 2	Quarter 3	Quarter 4
Trainee	Fellowship Written Exam	Fellowship Clinical Examination		
-	Learning capture x 3			
Trainee and Assessors	 Observation capture x 2 In-Training Long Case x 1 	 Observation capture x 2 In-Training Long Case x 1 	 Observation capture x 2 In-Training Long Case x 1 	 Observation capture x 2 In-Training Long Case x 1
Education Supervisor	Learning Progress report x 1	Learning Plan review x1	Learning Plan review x1	Learning Plan review x1
RACP Training Committee			ress Prog eck che	Completion decision x 1 + ress eck Recommendation for Fellowship

* Please note not all required learning courses are reflected in the phase diagram.

Appendix 1: Learning and assessment tools

A suite of tools will be used to support learning and assess the curriculum standards.

E	Registration form A College-run process to enrol trainees and assess entry attributes and criteria.			
	Learning plan			
	A work-based tool to facilitate the planning and review of learning goals at regular intervals.			
Ŷ	Learning capture			
	A trainee-driven tool to facilitate the gathering of evidence of work-based learning linked to learning goals.			
	Observation capture			
	Supervised observation of trainees' work-based performance, linked to learning goals.			
	Research project			
	Enable trainees to develop experience in research methods in a work-based context, the ability to interpret research literature and quality improvement skills, and achieve the Professional Behaviours learning goal (the Research domain).			



Progress report

Assess progress against all learning goals for the quarter and the phase, and progress against the criteria to progress to the next phase.