NEW CURRICULA

Proposed draft Learning, Teaching and Assessment programs

Advanced Training in General Paediatrics

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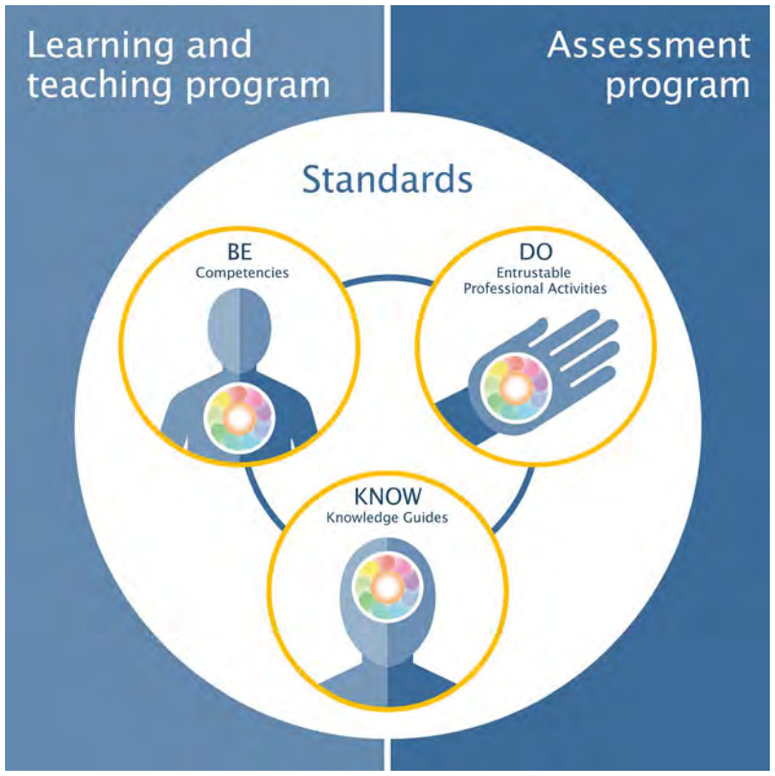
Advanced Training in General Paediatrics At a glance

CURRICULUM STANDARDS

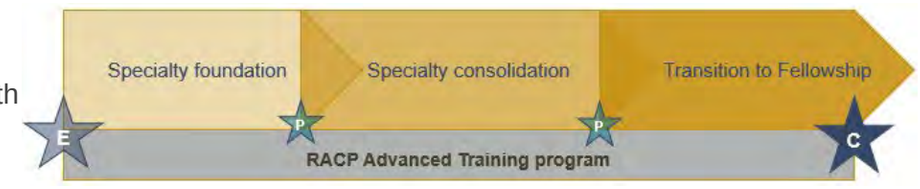
The curriculum standards are summarised as **learning goals.** The learning goals articulate what trainees need to **be**, **do** and **know,** and are assessed throughout training.

Learning and assessment activities are mapped to learning goals to ensure that trainees demonstrate learning across the breadth of the curriculum.



BE	DO	KNOW
Competencies are statements of professional behaviours, values and practices	**Entrustable Professional Activities (EPAs)** are essential work tasks that trainees need to be able to do unsupervised by the end of training	**Knowledge Guides** provide guidance on important topics and concepts trainees need to know

Advanced Training is structured in three phases with clear checkpoints for progression and completion.



LEARNING GOALS

BE	1. Professional behaviours
DO	2. Team leadership 3. Supervision and teaching 4. Quality improvement 5. Clinical assessment 6. Clinical management 7. Acute care and procedures 8. Communication with patients, families and health professionals 9. Promote improved outcomes in child and adolescent health and development 10. Care for patients from rural/remote areas
KNOW	11. Foundations of general paediatrics 12. Neonatal and perinatal medicine 13. Acute care 14. Developmental paediatrics 15. Adolescent and young adult medicine 16. Child safety and maltreatment 17. Rural paediatrics

LEARNING, TEACHING AND ASSESSMENT

ENTRY CRITERIA

- Completed RACP Basic Training, including the Written and Clinical Examinations
- General medical registration
- An Advanced Training position

PROFESSIONAL EXPERIENCE

36 months of relevant professional experience in approved rotations, recommended in at least two different training settings.

- Minimum 30 months of relevant core professional experience in approved rotations
- Maximum 6 months in non-core training

LEARNING PROGRAM

- 1 rotation plan (per year)
- Induction to Advanced Training resource (online)
- Health Policy, Systems and Advocacy resource (online)
- Supervisor Professional Development Program (online or face-to-face)
- Australian Aboriginal, Torres Strait Islander and Māori Cultural Competence and Cultural Safety resource (online)
- Paediatrics Advanced Life Support course (or equivalent)
- Working with Migrants, Refugees and Asylum Seekers (online)
- Neurodevelopmental course

TEACHING PROGRAM

- 2 supervisors (minimum 1 of whom is a Fellow of the RACP in General Paediatrics)
- 1 Research Project Supervisor (may be the supervisor)

ASSESSMENT PROGRAM

- **12** learning captures, on the range of learning goals (per year)
- **12** observation captures, on the range of learning goals (per year)
- **4** progress reports (per year)
- **1** Advanced Training Research Project (during course of training)

DRAFT

LEARNING THEMES

Summary of proposed changes

New Learning Themes have been added to provide options and flexibility for trainees to meet learning goals in line with the General Paediatrics Advanced Training curriculum standards. Trainees must demonstrate competence in all the curriculum learning goals, fulfill the options outlined in the learning themes, and complete all learning and assessment requirements, to complete general paediatrics training.

1. DEVELOPMENTAL AND BEHAVIOURAL PAEDIATRICS

Maps specifically to learning goal 14: Developmental paediatrics knowledge guide

To fulfill the **Developmental and Behavioural Paediatrics** Learning Theme, trainees must complete requirements 1, 2 and 3.

1. Complete a developmental and behavioural professional experience (where there is a focus on seeing patients with complex behavioural, neurodevelopmental, psychosocial presentations)

AND

2. Complete a developmental and behavioural paediatric learning activity (see list of examples)

AND

3. Submit minimum of 18 learning or observation captures related to developmental and behavioural paediatrics (learning goal 14).

2. RURAL PAEDIATRICS AND PROVIDING HIGH LEVEL PAEDIATRIC CARE FOR PATIENTS FROM RURAL AND REMOTE AREAS

Maps specifically to learning goal 10: Care for patients from rural/remote areas EPA and learning goal 17: Rural paediatrics knowledge guide

To fulfill the **Rural Paediatrics and Providing High Level Paediatric Care For Patients from Rural and Remote Areas** learning theme, trainees should plan to complete the requirement outlined in option 1. Trainees unable to complete option 1 for personal/individual reasons may seek special consideration and if granted, complete option 2.

1. **Rural training rotation.** An advanced training professional experience rotation of a minimum 6 months' FTE at a training site accredited for rural, regional or remote general paediatrics training. Trainees should plan to complete this option if it is possible to do so.

OR

2. Portfolio of rural medicine exposure. Trainees granted special consideration on a case-by-case basis may complete a portfolio demonstrating rural medicine exposure that is prepared and submitted for consideration by the training committee/Progress Review Panel. **The portfolio should include 2a and at least one of the options listed under 2b.**

2a. Minimum 12 learning captures AND 12 observation captures addressing rural paediatrics learning goals 10 and 17 identified as the primary learning outcomes, specifically referencing the trainee's involvement in care of rural/regional patients.
AND

2b. Evidence of **one** of these professional experience options that demonstrate achievement of rural learning goals 10 and 17:

i. A training rotation relevant to rural and remote paediatrics completed as part of any stage of paediatric training. E.g., a rural rotation in Basic Training.
OR

ii. A training rotation completed in a rural or remote training setting at PGY1 or PGY2 level. E.g., a 3-month rural rotation in resident year.
OR

iii. An Advanced Training rotation with a specific focus on liaising and in-person care of patients at rural and remote sites. This will require prospective approval via a rotation plan before the start of the proposed rotation.

LEARNING THEMES continued

3. ACUTE AND EMERGENCY CARE

Maps specifically to learning goal 7: Acute care and procedures EPA and learning goal 13: Acute care knowledge guide

To fulfill the **Acute & Emergency Care** Learning Theme, trainees must complete requirements 1, 2 and 3.

1. Complete a professional experience rotation with a significant component of care of patients with acute and emergency presentations

AND

2. Complete a Paediatric Advanced Life Support course (or equivalent), valid at end of Advanced Training

AND

3. Complete **one** of the following:

Option A. Minimum 6 observation captures with acute care or emergency learning goals identified as the primary learning goal (LGs 7 and 13)

OR

Option B. Advanced Training Research Project (ATRP) with acute care or neonatal and perinatal medicine learning goals identified as the primary learning outcome

4. NEONATAL AND PERINATAL MEDICINE

Maps specifically to learning goal 7: Acute care and procedures EPA and learning goal 12: Neonatal and perinatal medicine knowledge guide

To fulfill the **Neonatal & Perinatal Medicine** Learning Theme, trainees must complete requirements 1 and 2.

1. Complete a professional experience rotation that:

- contains a significant neonatal or perinatal component, including attending elective/emergency deliveries, completing baby checks, ward rounds on special care nursery babies, neonatal procedures
- may include NICU or neonatal retrieval services experience

AND

2. Complete **one** of the following:

Option A. Minimum 6 learning or observation captures with neonates or perinates learning goals (LGs 7 and 12) identified as the primary learning goal

OR

Option B. Advanced Training Research Project (ATRP) with neonatal and perinatal medicine learning goals identified as the primary learning outcome

5. ADOLESCENT AND YOUNG ADULT MEDICINE

Maps specifically to learning goal 15:Adolescent and young adult medicine knowledge guide

To fulfill the **Adolescent & Young Adult** Learning Theme, trainees must complete one of requirements 1 OR 2 OR 3.

1. A professional experience rotation with a significant adolescent component that aligns with the adolescent and young adult medicine learning goal. This refers to a learning experience such as adolescent medicine or adolescent psychiatry.

OR

2. Minimum 6 learning or observation captures with the adolescent and young adult medicine knowledge guide identified as the primary learning goal (LG 15)

OR

3. Advanced Training Research Project (ATRP) with adolescent and young adult medicine learning goals identified as the primary learning outcome

LEARNING THEMES continued

6. PROMOTE IMPROVED OUTCOMES IN CHILD AND ADOLESCENT HEALTH AND DEVELOPMENT

Maps specifically to learning goal 9: Promote improved outcomes in child and adolescent health and development EPA

To fulfill the **Improved Outcomes in Child/Adolescent Health & Development** Learning Theme, trainees must complete requirements 1 and 2.

1. Complete the RACP cultural competency working with migrants, refugees and asylum seekers online resource

AND

2. Complete **one** of the following options:

Option A) **a professional experience** that targets improving health equity (including, but not limited to, rural paediatrics, Aboriginal and Torres Strait Islander or Māori health, refugee health, working with children in out of home care) **AND** minimum 6 learning or observation captures with a focus on improved outcomes (learning goal 9) identified as the primary learning goal

OR

Option B) Advanced Training Research Project with improved outcomes in child health and development (LG 9) identified as the primary learning outcome **OR** Minimum 12 learning or observation captures with a focus on improved outcomes learning goals (LG 9)

7. CHILD SAFETY AND MALTREATMENT

Maps specifically to learning goal 16: Child safety and maltreatment knowledge guide

To fulfill the **Child Safety & Maltreatment** Learning Theme, trainees must complete one of requirements 1 OR 2, and one of 3 OR 4.

1. Complete a professional experience in a child protection rotation

OR

2. A child protection course (see list of acceptable courses)

AND one of:

3. Minimum 6 learning captures with child safety and maltreatment identified as the primary learning goal (LG 16)

OR

4. Completion of an Advanced Training Research Project with child safety and maltreatment identified as the primary learning goal

8. RESEARCH, QUALITY AND IMPROVEMENT

Maps specifically to learning goal 1: Professional behaviours, research domain and learning goal 4: Quality improvement EPA

To fulfil the **Research Quality & Improvement Learning Theme,** trainees must complete an Advanced Training Research Project (ATRP). An ATRP that fulfils any criteria in Learning Themes 1-7 is also eligible to fulfill Learning Theme 8.

Trainees may also undertake the following **optional** learning activities aligned to this theme to enhance knowledge and skills in research and quality improvement.

1. A supervised quality improvement or improvement science project.
2. A portfolio demonstrating participation in quality improvement (LG 4) and reflection on practice. This can include examples of:
    - quality improvement work, including evidence of presentations, posters or publications
    - evidence of presentations in mortality and morbidity meetings
    - policy and guideline development
    - completion of improvement science courses or learnings
    - reflective practice

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Proposed draft learning, teaching and assessment programs *summary*

ENTRY CRITERIA

Summary of proposed changes

- Wording changes to clarify entry requirements

CURRENT REQUIREMENT	Prospective trainees must: • have completed RACP Basic Training, including the Written and Clinical Examinations • hold a current medical registration • have been appointed to an appropriate Advanced Training position
PROPOSED REQUIREMENT	Prospective trainees must: • have completed RACP Basic Training, including the Written and Clinical Examinations • hold 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. • have been appointed to an appropriate Advanced Training position

LOCATION OF TRAINING

Summary of proposed changes

- Recommended that training is completed at minimum two settings.

CURRENT REQUIREMENT	• Complete at least 24 months of training in accredited training settings in Australia and/or Aotearoa New Zealand. • You must complete your Advanced Training at more than 1 training setting, with at least 6 months at a second setting.
PROPOSED REQUIREMENT	• Complete **at least 24 months** of training in accredited training settings in Australia and/or Aotearoa New Zealand. • Recommended that you complete training in at least 2 different types of accredited training settings • You should plan your training locations to meet the requirements set out in the learning themes and professional experience requirements.

TEACHING PROGRAM

Summary of proposed changes

- All training rotations require a supervisor with FRACP in General Paediatrics
- Introduction of Progress Review Panels

CURRENT REQUIREMENT	1 x supervisor per rotation, who is a Fellow of the RACP 1 x supervisor per rotation, who can be a Fellow of the RACP
PROPOSED REQUIREMENT	• **2 individuals for the role of supervisor:** o Minimum of 1 supervisor per rotation who is a Fellow of the RACP in General Paediatrics *Recommended to maintain one supervisor across span of training* • Nominate **1 x RACP training committee to act as a Progress Review Panel** • Nominate **1 x individual for the role of Research Project Supervisor** (may or may not be the supervisor).

Advanced Training in General Paediatrics

Proposed draft learning, teaching and assessment programs summary

PROFESSIONAL EXPERIENCE

Summary of proposed changes

Professional experience requirements have been redefined.

CURRENT REQUIREMENT	36 months of certified training time consisting of:
	• **minimum 24 months of core training** in accredited settings, including:
	  • **12 months of general paediatrics** training, including:
	  • 6 months with a **perinatal** component
	  • 6 months in a **rural** training setting
	  • **6 months core acute training**
	  • **6 months core community/ developmental training**
	• **maximum 12 months** non-core training

PROPOSED REQUIREMENT	Complete at least 36 months FTE (full-time equivalent) of relevant professional experience in approved rotations:
	• **minimum 30 months FTE of relevant core professional experience** in approved rotations at accredited training sites. This must include:
	  • minimum 12 months essential general paediatrics
	  • minimum 6 months hospital paediatrics
	  • minimum 6 months developmental and behavioural paediatrics
	Trainees must ensure their training rotations cover all learning themes, e.g., the 6-month rural rotation required as part of learning theme 2.
	• **maximum 6 months FTE** of non-core training

- Core training **must** be completed at accredited training sites.
- A site or setting accredited for general paediatrics may have multiple positions that meet the criteria for multiple professional experience types (refer to lists of accredited sites for Australia and Aotearoa New Zealand).

ESSENTIAL GENERAL PAEDIATRICS – minimum 12 months

- Must be at a site/setting accredited for Advanced Training in General Paediatrics
- Is a distinct advanced training (non-basic training) role
- Is a role that provides exposure to **general paediatric** patients across the age range in a breadth of settings: emergency department, paediatric and neonatal wards and outpatient clinics
- Includes a neonatal or perinatal component. For example: attending elective/emergency deliveries, completing baby checks, ward rounds on special care nursery babies, and neonatal procedures.
- Includes an average of one outpatient clinic per week per trainee
- Has a case-mix that includes patients with behavioural and/or developmental problems.

HOSPITAL PAEDIATRICS – minimum 6 months

- Must be at a site/setting accredited for Advanced Training in General Paediatrics
- A role that involves frequent care of acutely unwell general paediatric patients in hospital-based settings
- Role should include care for patients with acute and emergency presentations and include responding to acutely deteriorating patients. Examples may include attendance to review patients in a paediatric emergency department, paediatric/neonatal intensive care unit or as part of a weekly paediatric on call roster where attendance is required
- Examples of suitable rotations include: paediatric emergency medicine, paediatric or neonatal intensive care unit; hospital medical lead, hospital in the home (HITH); general paediatrics at a regional/rural hospital that involves on call and responding to deteriorating patients.
- Paediatric subspecialty rotations are not suitable.

DEVELOPMENTAL AND BEHAVIOURAL PAEDIATRICS – minimum 6 months

- Must be at a site/setting accredited for Advanced Training in General Paediatrics
- A distinct advanced trainee role where there is a focus on seeing patients with complex behavioural, neurodevelopmental, and psychosocial presentations
- Includes outpatient clinics, which must comprise (but does not have to be exclusively) patients with behavioural and/or developmental problems
- Examples of suitable rotations include: neurodevelopmental clinics, community paediatric clinics (public or private); child protection; adolescent and young adult medicine; Aboriginal and Torres Strait Islander or Māori health; refugee and immigrant health; rural rotation with substantial developmental or outpatient paediatrics.

NON-CORE TRAINING – maximum 6 months

- A role where trainees can demonstrate the relevance of the rotation to one or more general paediatrics learning goals
- Examples of suitable rotations include: paediatric subspecialties; research or quality improvement; medical education, leadership or service improvement; global, public health or overseas rotation; nights or relief.

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Proposed draft learning, teaching and assessment programs *summary*

LEARNING PROGRAM

Summary of proposed changes

- Learning Needs analysis replaced with Rotation Plan
- PQR and logbooks replaced with Learning Captures

CURRENT REQUIREMENT	**2** Learning Needs Analysis per year **1** Logbook recording 100 new outpatient cases, including 30 developmental paediatric cases **1** Logbook documenting 15 child protection cases and course (or training time)
PROPOSED REQUIREMENT	**1** Rotation Plan per phase of training, reviewed quarterly

LEARNING COURSES

Summary of proposed changes

- Added required learning courses

PROPOSED REQUIREMENT

- RACP **Orientation to Advanced Training** resource (within the first six months of Advanced Training)
- RACP **Health Policy, Systems and Advocacy** resource (recommended completion before the Transition to Fellowship phase)
- RACP **Supervisor Professional Development Program,** by the end of Advanced Training
- **Australian Aboriginal, Torres Strait Islander and Māori Cultural Competence and Cultural Safety** resource, by the end of Advanced Training
- **Paediatric advanced life support course,** valid at end of Advanced Training
- RACP **Working with Migrants, Refugees and Asylum Seekers** resource, by the end of Advanced Training
- A **neurodevelopmental course** (see list of acceptable courses on following page)

ASSESSMENT PROGRAM

Summary of proposed changes

- Case-based discussions, Mini-CEX and DOPS replaced with Observation Captures
- Supervisor's report replaced by Progress report
- Trainee's report has been removed
- Neonatal training and child protection training is captured in the activities outlined in the learning goals and learning themes

CURRENT REQUIREMENT	**1** Professional Qualities Reflection (PQR) per year **4** Case-based discussions per year **4** Mini-Clinical Evaluation Exercises (Mini-CEX) per year **1** Supervisor's report per rotation **1** Trainee's Report per rotation (Aotearoa NZ only) **6** Direct Observation of Procedural Skills (DOPS) over course of training **1** Advanced Training Research Project
PROPOSED REQUIREMENT	**12** Learning captures per year **12** Observation captures per year **4** Progress reports per year **1** Advanced Training Research Project Within the learning themes there are requirements for learning and observation captures to address particular curriculum learning goals.

LEARNING ACTIVITIES

Summary of proposed changes

- Lists of courses and activities are provided to assist with supplementary learning and development of competence in the Learning Goals

ACCEPTABLE LEARNING COURSES

Child protection courses

- Assessment of Suspected Sexual Abuse in Children and Adolescents (ASAC) or Assessment of Suspected Physical Abuse in Children and Adolescents (APAC) (Te Puaruruhau, Starship Children's Health)
- Medical Evaluation of Suspected Abuse in Children & Adolescents (SCHN)
- Forensic Medical Assessment of Suspected Child Abuse (SCHN)
- Forensic and Medical Management of Adult and Child Sexual Assault and Abuse (Darwin Sexual Assault Referral Centre)
- An Approach to Assessment of Concerns regarding Physical and Sexual Abuse (Queensland Children's Hospital)
- Recognising and Responding to Child Maltreatment (Women's and Children's Hospital, Child Protection Services)
- Medical Evaluation of Suspected Child Abuse (Victorian Forensic Paediatric Medical Service)
- Master of Forensic Medicine unit – FOR5012 Child and adolescent sexual abuse or FOR5013 Non accidental injury childhood (Monash University's Department of Forensic Medicine)
- Child Abuse and Neglect: A Comprehensive Course on the Medical Evaluation of Child Abuse (Perth Children's Hospital, Child Protection Unit)
- The Medical Assessment of Sexually Abused Children & Adolescents

Neonatal resuscitation courses

- NLS Advanced Course (New Zealand Resuscitation Council)
- Neoresus (The Royal Hospital for Women, Randwick)
- Neoresus (Mater Hospital, Queensland)
- Neoresus (Rural Health West)

Neurodevelopmental courses

- Engaging infants: an introduction to training in Infant Mental Health (RCH, Melbourne)
- Newborn Behavioural Observations (NBO) training (RWH, Melbourne)
- Annual Professional Development Program for Community Paediatricians
- Prechtl's General Movements Assessment Course
- Advanced Training Committee in Community Child Health Educational Tutorial Series (12 months equivalent) – Trainees are to submit CCH Educational Tutorial Series Attendance Record
- Mater Growth and Development Unit Conference
- The Newborn Individualized Developmental Care and Assessment Program (NIDCAP) Course
- Completion of the Griffith Mental Developmental Scales or Bayley's course
- Family and Infant Neurodevelopmental Education (FINE) program

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Proposed draft learning, teaching and assessment programs *summary*

LTA STRUCTURE

- A learning, teaching and assessment (LTA) structure defines the framework for delivery and trainee achievement of the curriculum standards
- Advanced Training is structured in three phases that establish checkpoints for progression and completion.

DECISION POINTS

- 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.

RATING SCALES

Levels	1	2	3	4	5
Be: Competencies (professional behaviours)	Needs to work on behaviour in **more than five domains** of professional practice	Needs to work on behaviour in **four or five domains** of professional practice	Needs to work on behaviour in **two or three domains** of professional practice	Needs to work on behaviour in **one domain** of professional practice	**Consistently** behaves in line with all ten domains of professional practice
Do: 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** (i.e., ready access to a supervisor)	Is able to **act with supervision at a distance** (i.e., limited access to a supervisor)	Is able to supervise others
Know: Knowledge guides	Has **heard of** some of the topics in this knowledge guide	**Knows the topics and concepts** in this knowledge guide	**Knows how to apply** this knowledge to practice	**Frequently shows they apply** this knowledge to practice	**Consistently** demonstrates application of this knowledge to practice

PROGRESSION CRITERIA

		Progression criteria			Completion criteria
	Learning goals	**Beginning of specialty foundation**	**End of specialty foundation**	**End of specialty consolidation**	**End of Transition to Fellowship**
Be	**1. Professional behaviours**	**Level 5**	**Level 5**	**Level 5**	**Level 5**
Do (Entrustable Professional Activities)	**2. Team leadership:** Lead and work collaboratively with a team of health professionals	**Level 2**	**Level 3**	**Level 4**	**Level 5**
	3. Supervision and teaching: Demonstrate commitment to ongoing professional development and health professional's education	**Level 2**	**Level 3**	**Level 4**	**Level 5**
	4. Quality improvement: Contribute to improving the safety, efficacy, and experience of health care	**Level 1**	**Level 3**	**Level 4**	**Level 5**
	5. Clinical assessment: Clinically assess paediatric patients across multiple settings	**Level 3**	**Level 3**	**Level 4**	**Level 5**
	6. Clinical management: Clinically manage paediatric patients across multiple settings	**Level 3**	**Level 3**	**Level 4**	**Level 5**
	7. Acute care and procedures: Assess and manage acutely unwell paediatric and neonatal patients	**Level 3**	**Level 3**	**Level 4**	**Level 5**
	8. Communication with patients, families and health professionals: Communicate effectively and professionally with patients, carers, families, health professionals, and other community members engaging with the health service	**Level 3**	**Level 3**	**Level 4**	**Level 5**
	9. Promote improved outcomes in child and adolescent health and development: Take actions to promote improved health and developmental outcomes for paediatric patients in healthcare systems and the community	**Level 2**	**Level 3**	**Level 4**	**Level 5**
	10. Care for patients from rural/remote areas: Provide high-level paediatric care for patients from rural and remote areas	**Level 3**	**Level 3**	**Level 4**	**Level 5**
Know (Knowledge Guides)	**11. Foundations of general paediatrics**	**Level 3**	**Level 3**	**Level 4**	**Level 5**
	12. Neonatal and perinatal medicine	**Level 3**	**Level 3**	**Level 4**	**Level 5**
	13. Acute care	**Level 3**	**Level 3**	**Level 4**	**Level 5**
	14. Developmental paediatrics	**Level 3**	**Level 3**	**Level 4**	**Level 5**
	15. Adolescent and young adult medicine	**Level 3**	**Level 3**	**Level 4**	**Level 5**
	16. Child safety and maltreatment	**Level 3**	**Level 3**	**Level 4**	**Level 5**
	17. Rural paediatrics	**Level 3**	**Level 3**	**Level 4**	**Level 5**