NEW CURRICULA

Learning, teaching and assessment programs

Advanced Training in Adolescent and Young Adult Medicine

RACP
Specialists. Together

About this document

The new Advanced Training in Adolescent and Young Adult Medicine curriculum consists of curriculum standards and learning, teaching and assessment (LTA) programs.

This document outlines the Advanced Training in Adolescent and Young Adult Medicine LTA programs for trainees and supervisors. It should be used in conjunction with the Advanced Training in Adolescent and Young Adult Medicine curriculum standards.

The new curriculum was approved by the College Education Committee in February 2025. Please refer to the College website
for details on its implementation.

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Program overview

CURRICULUM STANDARDS

The curriculum standards are summarised as **16** learning goals. The learning goals articulate what trainees need to be, do, and know, and are assessed throughout training.

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KNOW	11. Foundations of adolescent and young adult medicine 12. Physical conditions 13. Psychological and behavioural health 14. Gender, sexual, and reproductive health 15. Alcohol and other substance use 16. Nutrition and disordered eating

LTA STRUCTURE

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

The program is structured in three phases. These phases establish clear checkpoints for trainee progression and completion.

Entry criteria

Prospective trainees must have:

- completed RACP Basic Training, including the Written and Clinical Examinations
- 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 practicing certificate if applying in Aotearoa New Zealand
- been appointed to an appropriate Advanced Training position.

LTA PROGRAMS

The LTA programs outline the strategies and methods to learn, teach, and assess the curriculum standards.

Entry
1 training application

Learning
Minimum 36 months full-time equivalent (FTE) professional experience

1 rotation plan per rotation

1 logbook

RACP Advanced Training Orientation resource

RACP Supervisor Professional Development Program

RACP Australian Aboriginal, Torres Strait Islander and Māori Cultural Competence and Cultural Safety resource

RACP Health Policy, Systems and Advocacy resource

Recommended resources

Teaching
2 supervisors per rotation

1 research project supervisor

Assessment
12 learning captures per phase

12 observation captures per phase

4 progress reports per phase

1 research project

About the program

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.

Overview of specialty

An adolescent and young adult (AYA) specialist cares for young people aged between 10 and 24 years. AYA physicians have expertise in the assessment, formulation, and holistic management of complex multifactorial conditions, considering biological, psychological, social, and environmental factors that may contribute to medical symptoms. They are advocates for the health of young people in a broad range of social and healthcare settings.

AYA physicians provide holistic, strengths-based, inclusive care in a range of settings, largely working as a part of multidisciplinary teams to provide assessment and management of complex medical and psychosocial issues across inpatient, outpatient, and community settings.

AYA medicine (AYAM) is a dynamic field, working in a variety of settings, including in:

- **acute medical care of adolescents and young adults.** AYA physicians work in inpatient settings, managing young people with acute medical problems, medical instability arising from eating disorders, complications of mental health problems (such as intentional overdose), medically unexplained symptoms, and somatoform presentations.
- **inpatient consultation and liaison services.** AYA physicians provide consultation to other medical and mental health teams for adolescent-specific issues, such as health-risk behaviours, eating disorder diagnosis, gender health and management, medically unexplained symptoms, and medical issues arising in acute inpatient mental health settings.
- **outpatient clinics.** AYA physicians work in hospital-based and community clinics managing young people with disability and chronic medical conditions, as well as specialist clinics for eating disorders, chronic fatigue syndrome, medically unexplained symptoms, drug and alcohol services, and gender services.
- **community-based care in non-healthcare settings.** AYA physicians may be involved in the care of young people, or provide consultation to primary care providers, in settings such as schools and educational institutions, juvenile justice facilities, temporary housing services, and drug and alcohol services, and support self-management of chronic conditions.

- **undertaking comprehensive assessments.** AYA physicians may manage complex psychosocial needs in the provision of holistic care of young people, including evaluation for health-risk behaviours, sexual health screening, gender health, substance use patterns, and mental health concerns.
- **providing longitudinal care.** AYA physicians provide care for young people with physical and developmental disabilities and chronic health conditions and help facilitate transition of care from paediatric to adult healthcare services.

AYA physicians advocate for young people and provide specialist medical care using an inclusive, strengths-based approach, establishing rapport and engagement with young people, and working within multidisciplinary teams through:

- **effective communication.** AYA physicians communicate with AYA patients, families, carers, whānau, and support people to build trust and rapport and encourage engagement with health services. AYA physicians adapt their communication style to meet a young person's developmental needs and will communicate with empathy and compassion.
- **holistic care of patients and their families.** AYA physicians are comfortable with complex health issues, working with uncertainty, and managing risk. They recognise the importance of emerging autonomy and the decision-making capacity of the young person, including the importance of assuring confidentiality within the patient-professional relationship.
- **working as an integral part of a multidisciplinary team.** AYA physicians may be called upon to be team leaders and have a collaborative approach focused on building relationships.
- **understanding health systems and inequities.** AYA physicians practice inclusive care, recognising the additional health inequities that may be faced by at-risk and marginalised adolescents and young adults.
- **applying a scholarly approach.** AYA physicians apply evidence to daily practise, but also recognise that evidence is not always available and that there is a need to participate in research to contribute to the body of knowledge within the specialty to improve practice and health outcomes.
- **advocating for health equity.** AYA physicians advocate for equitable and accessible healthcare for all young people, raise awareness of the health needs of young people, and develop health policies and procedures for adolescents, young adults, families, carers, whānau, and support people.

Supervising committee

The program is supervised by the Advanced Training Committee in Adolescent and Young Adult Medicine.

Trainees who successfully meet the completion standards and criteria of this program will receive a letter confirming their completion of the AYAM Advanced Training Program.

This training pathway does not qualify trainees for Fellowship of the Royal Australasian College of Physicians, and does not result in specialist recognition with the Medical Board of Australia or the Medical Council of New Zealand.

Learning goals and progression criteria

Learning, teaching and assessment 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 consolidation**	• 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.

Figure: Advanced Training 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.

Advanced Training is a **hybrid time- and competency-based training program**. There is a minimum time requirement of full-time equivalent (FTE) experience, and progression and completion decisions are based on evidence of trainees' competence.

Entry criteria

Entry attributes	Prospective trainees can demonstrate:
	
	• a commitment and capability to pursue a career as a physician or paediatrician in Adolescent and Young Adult 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 RACP Basic Training, including the Written and Clinical Examinations • 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 • been appointed to an appropriate Advanced Training position.

Progression criteria

To progress to the next phase or to complete the program, trainees must 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 learning goal progression criteria.

Training committees or delegated progress review panels will consider evidence supporting trainees' achievement of the progression criteria and make progress decisions.

If criteria have not been met, committees or panels may decide to place conditions on trainees' progression to the next phase of training or not to progress trainees until all criteria have been achieved.

Learning goals

The curriculum standards are summarised as **16** learning goals.

The learning goals articulate what trainees need to be, do, and know, and are assessed throughout training on a five-point scale. This scale determines the expected standard for each learning goal at the end of each training phase. Trainees must meet these standards to progress to the next phase or complete the program.

Learning and assessment tools are linked to the learning goals that allow trainees to demonstrate competence across each learning goal.

Levels	1	2	3	4	5
Be: Competencies (professional behaviours)	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 domain** of professional practice	Consistently behaves in line with **all 10 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

	Learning goals	**Entry criteria** Entry into training *At entry into training, trainees will:*	**Progression criteria** Specialty foundation *By the end of this phase, trainees will:*	Specialty consolidation *By the end of this phase, trainees will:*	**Completion criteria** Transition to fellowship *By the end of training, trainees will:*
Be	**1. Professional behaviours**	**Level 5** consistently behaves in line with **all 10 domains** of professional practice	**Level 5** consistently behaves in line with **all 10 domains** of professional practice	**Level 5** consistently behaves in line with **all 10 domains** of professional practice	**Level 5** consistently behaves in line with **all 10 domains** of professional practice
Do	**2. Team leadership:** Lead a team of health professionals	**Level 1** is able to be present and observe	**Level 2** is able to act with direct supervision	**Level 3** is able to act with indirect supervision	**Level 5** is able to supervise others
	3. Supervision and teaching: Supervise and teach professional colleagues	**Level 1** is able to be present and observe	**Level 2** is able to act with direct supervision	**Level 3** is able to act with indirect supervision	**Level 5** is able to supervise others
	4. Quality improvement: Identify and address failures in health care delivery	**Level 1** is able to be present and observe	**Level 2** is able to act with direct supervision	**Level 3** is able to act with indirect supervision	**Level 5** is able to supervise others
	5. Clinical assessment and management: Clinically assess and manage the ongoing care of patients	**Level 2** is able to act with direct supervision	**Level 3** is able to act with indirect supervision	**Level 4** is able to act with supervision at a distance	**Level 5** is able to supervise others
	6. Management of transitions in care: Manage the transition of patient care between health care professionals, providers, and contexts	**Level 2** is able to act with direct supervision	**Level 3** is able to act with indirect supervision	**Level 4** is able to act with supervision at a distance	**Level 5** is able to supervise others
	7. Longitudinal care: Manage and coordinate the longitudinal care of patients with chronic conditions, disability, and/or long-term health issues, including coordinating and delivering a successful transition from paediatric to adult care	**Level 2** is able to act with direct supervision	**Level 3** is able to act with indirect supervision	**Level 4** is able to act with supervision at a distance	**Level 5** is able to supervise others
	8. Communication with patients: Discuss diagnoses and management plans with patients	**Level 2** is able to act with direct supervision	**Level 3** is able to act with indirect supervision	**Level 4** is able to act with supervision at a distance	**Level 5** is able to supervise others
	9. Prescribing: Prescribe therapies tailored to patients' needs and conditions	**Level 2** is able to act with direct supervision	**Level 3** is able to act with indirect supervision	**Level 4** is able to act with supervision at a distance	**Level 5** is able to supervise others
	10. Clinic management: Manage an outpatient clinic	**Level 1** is able to be present and observe	**Level 2** is able to act with direct supervision	**Level 4** is able to act with supervision at a distance	**Level 5** is able to supervise others

	Learning goals	Entry criteria	Progression criteria		Completion criteria
		Entry into training	Specialty foundation	Specialty consolidation	Transition to fellowship
		At entry into training, 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:*
Know	**11. Foundations of adolescent and young adult medicine**	**Level 1** has heard of some of the topics in this knowledge guide	**Level 3** knows how to apply this knowledge to practice	**Level 3** knows how to apply this knowledge to practice	**Level 5** consistently demonstrates application of this knowledge to practice
	12. Physical conditions	**Level 1** has heard of some of the topics in this knowledge guide	**Level 2** knows the topics and concepts in this knowledge guide	**Level 3** knows how to apply this knowledge to practice	**Level 5** consistently demonstrates application of this knowledge to practice
	13. Psychological and behavioural health	**Level 1** has heard of some of the topics in this knowledge guide	**Level 2** knows the topics and concepts in this knowledge guide	**Level 3** knows how to apply this knowledge to practice	**Level 5** consistently demonstrates application of this knowledge to practice
	14. Gender, sexual, and reproductive health	**Level 1** has heard of some of the topics in this knowledge guide	**Level 2** knows the topics and concepts in this knowledge guide	**Level 3** knows how to apply this knowledge to practice	**Level 5** consistently demonstrates application of this knowledge to practice
	15. Alcohol and other substance use	**Level 1** has heard of some of the topics in this knowledge guide	**Level 2** knows the topics and concepts in this knowledge guide	**Level 3** knows how to apply this knowledge to practice	**Level 5** consistently demonstrates application of this knowledge to practice
	16. Nutrition and disordered eating	**Level 1** has heard of some of the topics in this knowledge guide	**Level 2** knows the topics and concepts in this knowledge guide	**Level 3** knows how to apply this knowledge to practice	**Level 5** consistently demonstrates application of this knowledge to practice

Developmental & psychosocial training (Paediatrics & Child Health Division)

Developmental and psychosocial (D&P) training assists 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.

A mandatory period of D&P training for all paediatricians was introduced to ensure that the changing nature of paediatric practice is reflected in the training programs.

Review of D&P training

The College is working to redefine how D&P training will be embedded in the new training programs. This will include defining learning goals and new options for trainees to achieve these learning goals, which will be embedded into the Basic and Advanced Training programs.

Alternative options for completing D&P training and a timeline for implementation will be communicated during 2025. New D&P requirements will be developed, and any updates will be included in the relevant curricula standards and learning, teaching and assessment programs. Trainees and supervisors will be informed of updates with sufficient notice of any changes to ensure no disadvantage.

Until alternatives are available, **it is important that trainees plan to complete the requirement for D&P training through one of the time-based options currently available, to ensure eligibility for admission to Fellowship on completion of the requirements of Advanced Training.** Trainees must satisfactorily complete this requirement to be eligible for admission to Fellowship under the Paediatrics & Child Health Division.

Aotearoa New Zealand

The D&P training requirement can be met by completing a three-month FTE rotation in relevant specialties. These areas reflect a holistic approach to the health problems of children and young people. An understanding of the roles and inter-relationships of many allied health and community-based services, in a way that distinguishes them from experience in organ-based specialties, is required.

Australia

D&P training is currently a time-based requirement consisting of a minimum of six months FTE in one or more of the following areas:

- developmental / behavioural paediatrics
- community paediatrics
- disability / rehabilitation paediatrics
- child and adolescent psychiatry
- child protection
- palliative medicine.

These areas reflect a holistic approach to the health problems of children and young people. An understanding of the roles and inter-relationships of many allied health and community-based services, in a way that distinguishes them from experience in organ-based specialties, is required.

Approved training options

- **Option A: A prospectively approved psychosocial training position (six months FTE).** This can be completed as:

  - two three-month terms, or
  - one six-month block, or
  - a continuous part-time position, such as two and a half days a week for 12 months (a conglomerate of experience for shorter time periods adding up to six months will not be accepted).

- **Option B: A prospectively approved rural position (six months FTE).** Complete the six months of training comprised of a documented weekly program in the psychosocial training areas with an appropriate level of supervision.

- **Option C: Attendance at a prospectively approved clinic AND completion of an approved learning module.** The D&P training requirement can be completed in one of these formats:

  - two sessions a week for 18 months, or
  - one session a week for three years.

  An approved clinic is determined to be a clinic where other health and/or educational professionals are involved, and supervision is directed by a paediatrician who is experienced in one or multiple areas of D&P training, such as behaviour, development, rehabilitation, and child protection.

  The approved learning module may be **one** of the following:

  - evidence of attendance at a lecture series at a recognised institution related to the D&P Training areas, or
  - three referenced case reports / essays (1500 to 2000 words each) demonstrating comprehensive understanding of three different issues in the areas of psychosocial training (e.g. rehabilitation or community paediatrics), or
  - completion of the Griffith Mental Developmental Scales course.

  Other prospectively approved modules may be considered.

Apply

Contact AdolescentMedTraining@racp.edu.au to apply for approval of D&P training.

Resources

- Developmental and Psychosocial Training Supervisor's Report form (DOC)

Learning, teaching and assessment requirements

Overview

Requirements over the course of training

What do trainees need to do?	When do trainees need to do it?
Entry	
1 training application	At the start of the specialty foundation phase.
Learning	
Minimum 36 months full-time equivalent (FTE) professional experience	Minimum 12 months FTE during each phase.
Developmental and psychosocial training (PCH)	Before the end of Advanced Training, if not completed during Basic Training.
1 logbook	Required completion before the end of Advanced Training.
RACP Advanced Training Orientation resource	During the first 6 months of the specialty foundation phase.
RACP Supervisor Professional Development Program	Before the end of Advanced Training.
RACP Australian Aboriginal, Torres Strait Islander and Māori Cultural Competence and Cultural Safety resource	Before the end of Advanced Training, if not completed during Basic Training. Recommended completion before the specialty consolidation phase.
RACP Health Policy, Systems and Advocacy resource	Before the end of Advanced Training. Recommended completion before the transition to Fellowship phase.
RACP Working with Adolescents and Young Adults resource	Before the end of Advanced Training, if not completed during Basic Training. Recommended completion before the specialty consolidation phase.
Recommended resources	Recommended completion over the course of Advanced Training.
Teaching	
Nominate 1 research project supervisor	Recommended to be nominated before the specialty consolidation phase.
Assessment	
1 research project	Before the end of Advanced Training. Recommended submission before the transition to Fellowship phase.

Requirements per phase

What do trainees need to do?	When do trainees need to do it?
Learning	
1 rotation plan per rotation	At the start of (or prior to starting) the rotation.
Teaching	
Nominate 2 supervisors per rotation	At the start of each accredited or approved training rotation.
Assessment	
12 learning captures	Minimum 1 per month.
12 observation captures	Minimum 1 per month.
4 progress reports	Minimum 1 every 3 months.

Entry

Training application

Requirement
1 training application, at the start of the specialty foundation phase.
Purpose
The training application supports trainees to: • confirm they meet the program entry criteria   • provide essential details for program enrolment, ensuring compliance with RACP standards   • establish a formal foundation for their training pathway, enabling access to program resources and support.   The application form will be reviewed by RACP staff. Trainees will be able to track the status of applications through the College's new Training Management Platform (TMP).   Trainees can submit rotation plans and complete assessments while waiting for their application to be approved.
How to apply
Trainees are to submit a training application for the program using TMP.

Learning

Learning blueprint

This high-level learning program blueprint outlines which of the learning goals *could align* and *will align* with the learning requirements.

Learning goals	Professional experience			Learning requirements						
	Accredited training	Extension training	Rotation Plan	RACP Australian Aboriginal, Torres Strait Islander and Māori Cultural Competence and Cultural Safety resource	RACP Orientation to Advanced Training resource	RACP Health Policy, Systems and Advocacy resource	RACP Supervisor Professional Development Program	RACP Working with Adolescents and Young Adults resource	Logbook
1. Professional behaviours	Will align	Will align	Will align	Will align	Will align	Will align	Will align	Will align	Could align
2. Team leadership	Could align	Could align	x	x	x	x	x	x	Could align
3. Supervision and teaching	Could align	Could align	x	x	x	x	Will align	x	Could align
4. Quality improvement	Could align	Could align	x	x	x	x	x	x	Could align
5. Clinical assessment and management	Will align	Could align	x	x	x	x	x	Will align	Could align
6. Management of transitions in care	Could align	Could align	x	x	x	x	x	x	Could align
7. Longitudinal care	Will align	Could align	x	x	x	x	x	Will align	Could align
8. Communication with patients	Will align	Could align	x	x	x	x	x	Will align	Could align
9. Prescribing	Could align	Could align	x	x	x	x	x	x	Could align
10. Clinic management	Will align	Could align	x	x	x	Will align	x	Will align	Could align

Learning goals	Professional experience			Learning requirements					
	Accredited training	Extension training	Rotation Plan	RACP Australian Aboriginal, Torres Strait Islander and Māori Cultural Competence and Cultural Safety resource	RACP Orientation to Advanced Training resource	RACP Health Policy, Systems and Advocacy resource	RACP Supervisor Professional Development Program	RACP Working with Adolescents and Young Adults resource	Logbook
11. Foundations of AYAM	Will align	Could align	x	x	x	x	x	Will align	Will align
12. Physical conditions	Will align	Could align	x	x	x	x	x	x	Will align
13. Psychological and behavioural health	Will align	Could align	x	x	x	x	x	x	Will align
14. Gender, sexual, and reproductive health	Could align	Could align	x	x	x	x	x	x	Will align
15. Alcohol and other substance use	Could align	Could align	x	x	x	x	x	x	Will align
16. Nutrition and disordered eating	Could align	Could align	x	x	x	x	x	x	Will align

Professional experience

These requirements can be completed in any sequence over the course of training.

Professional experience
• Complete at least 36 months of relevant professional experience in approved rotations.
Location of training
• Complete training in at least 2 different accredited or approved training settings.
• Complete at least 24 months of training in accredited training settings in Australia and/or Aotearoa New Zealand.
Experiential training

• Minimum 24 months FTE core training in an accredited setting, including:
    ○ minimum 12 months in an accredited RACP AYAM Advanced Training position
    ○ maximum 12 months in a position, accredited by the RACP or another College, working in AYAM in areas such as:
        ▪ mental, psychological, and behavioural health
        ▪ gender, sexual health, and reproductive health
        ▪ alcohol and other substance use
        ▪ high risk youth
        ▪ community-based.
• Maximum 12 months in an approved non-core training position.

Rotation plan

Requirement
1 rotation plan per rotation.
Description
The rotation plan is a work-based tool to document details of a training rotation and how a trainee intends to cover their program learning goals over the rotation period.
Purpose
The rotation plan helps trainees evaluate their learning gaps, curriculum needs, and local opportunities to meet expected standards. It is validated by College staff to ensure it aligns with the professional experience requirements for the program.
How to complete it
Trainees can submit a rotation plan in TMP under the 'training plan' tab. Trainees undertaking their first rotation of their training program must select the checkbox labelled 'The rotation start date is also the start date of my Training Program' to record the start date for their training program. If a trainee is expecting a learning goal to be covered during a rotation, they must select 'yes' for 'coverage offered' and outline the learning opportunities available.

This information will be used by supervisors and the overseeing RACP training committee to determine the relevance of the rotation to the program's professional experience requirements.

Trainees should upload a copy of the position description and any other supporting information that outlines the training position being undertaken. This should include regular / weekly activities that the trainee will be undertaking during the rotation (e.g. timetable).

Trainees can also set custom goals to define personal objectives they want to achieve during the rotation. These goals should be measurable and align with the trainee's professional objectives, skill gaps, or personal interests.

Trainees need to nominate their rotation supervisors in the plan. The supervisors will need to approve the plan in TMP via 'my assigned actions'.

For more information on how to complete a rotation plan review the training resources.

Logbook

Requirement
1 logbook, completed by the end of Advanced Training.
Description
The logbook is a learning tool that helps trainees capture data about and reflect on specific workplace experiences. The logbook tool is currently under development. More information on the tool and how to complete it will be available in 2025.

Courses

RACP Working with Adolescents and Young Adults resource

Requirement
1 RACP Working with Adolescents and Young Adults online course, by the end of the specialty foundation phase.

Description
Topics include: • adolescent development • ethical and legal issues • therapeutic engagement • psychosocial assessment • promoting self-management • transition to adult care. Estimated completion time: 5 hours.

Purpose
The Working with Adolescents and Young Adults online course has been designed to help trainees develop the knowledge, skills, and attitudes required to deliver effective health care to young people.

How to complete it
Trainees can complete the Working with Adolescents and Young Adult resource on RACP Online Learning. Trainees will receive a certificate of completion on RACP Online Learning when they complete the resource. Completion of this requirement will automatically update in TMP.

RACP Advanced Training Orientation resource

Requirement
1 RACP Advanced Training Orientation resource, completed during the first 6 months of the specialty foundation phase.

Description
This resource is designed to orient trainees to Advanced Training. It covers areas such as transition to Advanced Training, training and assessment, and trainee support. It is a 'one-stop shop' trainees can return to if they ever want to find a useful resource, or need a refresher on the supporting resources, policies, and systems available to them. Estimated completion time: 1–1.5 hours.

Purpose
The resource is intended to support trainees to successfully navigate their transition to Advanced Training and prepare for unsupervised practice as a specialist physician.

How to complete it

Trainees can complete the Advanced Training Orientation resource on RACP Online Learning.

Trainees will receive a certificate of completion on RACP Online Learning when they complete the resource. Completion of this requirement will automatically update in TMP.

RACP Supervisor Professional Development Program

Requirement
1 RACP Supervisor Professional Development Program (SPDP), completed by the end of Advanced Training.
Description
The SPDP consists of 3 workshops: • Educational Leadership and Management • Learning Environment and Culture • Teaching and Facilitating Learning for Safe Practice. See the Supervisor Professional Development Program for more information.
Purpose
This requirement aims to prepare trainees for a supervisory / educator role in the workplace and supports trainees' learning aligned with the 'team leadership' and 'supervision and teaching' learning goals.
How to complete it
Register for a supervisor workshop. Trainees can complete the SPDP in 3 ways: • virtual workshops • face-to-face workshops • online courses. Workshops are free and presented by volunteer Fellows trained in SPDP facilitation.

RACP Australian Aboriginal, Torres Strait Islander and Māori Cultural Competence and Cultural Safety resource

Requirement
1 Australian Aboriginal, Torres Strait Islander and Māori Cultural Competence and Cultural Safety resource, if not completed during Basic Training. Trainees must complete the resource by the end of their Advanced Training. Completion is recommended before the specialty consolidation phase.

Description
The Australian Aboriginal, Torres Strait Islander and Māori Cultural Competence and Cultural Safety resource teaches best practice medicine for Aboriginal, Torres Strait Islander, and Māori patients through reflection on the trainee's own cultural values and recognition of their influence on professional practice. Estimated completion time: 2 hours.

Purpose
This resource supports trainees' learning aligned with the 'professional behaviours' learning goal. Specialist training requires trainees to: • examine their own implicit biases • be mindful of power differentials • develop reflective practice • undertake transformative unlearning • contribute to a decolonisation of health services for Indigenous peoples.

How to complete it
Trainees can complete the Australian Aboriginal, Torres Strait Islander and Māori Cultural Competence and Cultural Safety resource on RACP Online Learning. Trainees will receive a certificate of completion on RACP Online Learning when they complete the resource. Completion of this requirement will automatically update in TMP.

RACP Health Policy, Systems and Advocacy resource

Requirement
1 RACP Health Policy, Systems and Advocacy resource, completed by the end of Advanced Training.

Description
This resource has been designed for Advanced Trainees as an introduction to health policy, systems, and advocacy. Estimated completion time: 5 hours.

Purpose
The resource aims to support Advanced Trainees in meeting the health policy, systems, and advocacy professional standard and underpinning competencies outlined in their specialty curriculum, and to enable connections between Advanced Trainees' own practice and the nature and attributes of local, national, and global health systems.

How to complete it
Trainees can complete the RACP Health Policy, Systems and Advocacy resource on RACP Online Learning. Trainees will receive a certificate of completion on RACP Online Learning when they complete the resource. Completion of this requirement will automatically update in TMP.

Recommended resources

- RACP Communication Skills resource
- RACP Ethics resource
- RACP Introduction to Leadership, Management and Teamwork resource
- RACP Research Projects resource
- RACP eLearning resources
- RACP curated collections

Teaching

Supervision

Rotation supervisors
Trainees are to have 2 supervisors per rotation: • **core training** – minimum of 1 supervisor per rotation who is a Fellow of the RACP and an AYAM specialist • **non-core training** – minimum of 1 supervisor per rotation who is a Fellow of the RACP. **Nominating eligible supervisors** Trainees will be asked to nominate rotation supervisors as part of their learning plan. Trainees are required to nominate eligible supervisors who meet the above requirements. A list of eligible supervisors can be found on MyRACP. The list is not available for post-Fellowship trainees. Post-Fellowship trainees can contact the College to confirm supervisor eligibility.

Research project supervisor
Trainees are to nominate 1 research project supervisor over the course of Advanced Training. Nominations are recommended before the specialty consolidation phase. The research project supervisor guides trainees with their project choice, method, data analysis and interpretation, and quality of written and oral presentation. More information about this role can be found in the Advanced Training research project guidelines.

Assessment

Assessment blueprint

This high-level assessment program blueprint outlines which of the learning goals *could be* and *will be* assessed by the assessment tools.

Learning goals	Assessment tools			
	Learning capture	Observation capture	Progress report	Research project
1. Professional behaviours	Could assess	Could assess	Will assess	Will assess
2. Team leadership	Could assess	Could assess	Will assess	x
3. Supervision and teaching	Could assess	Could assess	Will assess	x
4. Quality improvement	Could assess	Could assess	Will assess	Could assess
5. Clinical assessment and management	Could assess	Could assess	Will assess	x
6. Manage transitions in care	Could assess	Could assess	Will assess	x
7. Longitudinal care	Could assess	Could assess	Will assess	x
8. Communication with patients	Could assess	Could assess	Will assess	x
9. Prescribing	Could assess	Could assess	Will assess	x
10. Clinic management	Could assess	Could assess	Will assess	Could assess
11. Foundations of AYAM	Could assess	Could assess	Will assess	Could assess
12. Physical conditions	Could assess	Could assess	Will assess	Could assess
13. Psychological and behavioural health	Could assess	Could assess	Will assess	Could assess
14. Gender, sexual, and reproductive health	Could assess	Could assess	Will assess	Could assess
15. Alcohol and other substance use	Could assess	Could assess	Will assess	Could assess
16. Nutrition and disordered eating	Could assess	Could assess	Will assess	Could assess

Learning capture

Requirement
12 learning captures per phase of training, minimum 1 per month.
Refer to RACP Flexible Training Policy for information on part-time training (item 4.2).

Description
The learning capture is a work-based assessment that involves a trainee capturing, and reflecting on, professional development activities, including evidence of work-based learning linked to specific learning goals.

Purpose
The learning capture assists trainees to reflect on experiences, promotes critical thinking, and connects these to a trainee's learning goals and professional development. It is also a valuable mechanism for trainees to enhance their understanding of complex topics and less common experiences that may be difficult to encounter in traditional training.

How to complete it
The learning capture is completed via TMP under the 'assessment requirements' tab.
For more information on how to complete a learning capture review the training resources.

Observation capture

Requirement
12 observation captures per phase of training, minimum 1 per month.
Refer to RACP Flexible Training Policy for information on part-time training (item 4.2).

Description
An observation capture is a work-based assessment which provides a structured process for trainees to demonstrate their knowledge and skills in real-time workplace situations, while assessors observe and evaluate performance.

Purpose
The purpose of the observation capture is to assess skill development, track progress, and provide targeted feedback for improvement for trainees against specific learning goals.

How to complete it
Observation captures are completed via TMP under the 'assessment requirements' tab.
For more information on how to complete an observation capture review the training resources.

Progress report

Requirement
4 progress reports per phase of training, minimum 1 every 3 months. *Refer to [RACP Flexible Training Policy](#) for information on part-time training (item 4.2).*
Description
A progress report is an assessment that documents trainees' and supervisors' assessment of trainee progress against the training program learning goals over a period of training.
Purpose
Progress reports assess knowledge and skill development, track progress against the phase criteria, and provide targeted feedback for improvement.
How to complete it
Progress reports will be completed using [TMP](#). Instructions on how to complete a progress report will be available in 2025.

Research project

Requirement
1 research project over the course of Advanced Training.
Description
The research project should be one with which the trainee has had significant involvement in designing, conducting the research, and analysing data. Trainees may work as part of a larger research project but must have significant input into a particular aspect of the study. Research projects are not required to be specialty-specific but are required to be broadly relevant to trainees' area of specialty. This can be defined as topics that can enhance, complement, and inform trainees' practice in the chosen specialty. The 3 types of accepted research projects are: • research in human subjects, populations and communities, or laboratory research • audit • systematic review. The trainee must have a research project supervisor who may or may not be one of their rotation supervisors. The research project is marked by the training committee as satisfactory or unsatisfactory, and trainees receive qualitative feedback about their project. The research project should be submitted for marking by the end of the specialty consolidation phase to allow time for resubmission in the transition to Fellowship phase if the project is unsatisfactory.

Purpose

The research project enables trainees to develop quality improvement skills and gain experience in:

- research methods
- interpretation of research literature
- participation in research at some stage of their career.

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
- effective written communication.

How to complete it

Detailed information on how to complete the research project can be found in the Advanced Training research project guidelines.

Email research project submissions to Research.Project@racp.edu.au by one of the following deadlines:

Australia: 31 March, 15 June, or 15 September.

Aotearoa New Zealand: 31 March, 15 June, or 15 December.

Roles and responsibilities

Advanced Trainee

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

Rotation supervisor

Role
A consultant who provides direct oversight of an Advanced Trainee during a training rotation.
Responsibilities
- Be aware of the educational requirements outlined in the relevant curricula and education policies.   - Oversee and support the progression of Advanced Trainees within the setting: - assist trainees to plan their learning during the rotation   - support colleagues to complete observation captures with trainees   - provide feedback to trainees through progress reports.   - Actively participate in rotation accreditation undertaken by the RACP.   - Complete the annual Physician Training Survey to assist the RACP and training settings with ongoing quality improvement of the program.

Assessor

Role
A person who provides feedback to trainees via the observation capture or learning capture tool. This may include consultants and other medical professionals, allied health professionals, nursing staff, patients and their families, administrative staff, and consumer representatives.
Responsibilities
- Be aware of the learning goals of the training program.   - Provide feedback to support the progression of Advanced Trainees within the setting: - complete observation captures   - provide feedback on learning captures as required.

Progress Review Panel

Role
A group convened to make evidence-based decisions on Advanced Trainees' progression through and certification of training. More information on Progress Review Panels will be available in 2025.
Responsibilities
- Review and assess trainees' progress.   - Communicate and report on progression decisions.   - Monitor delivery of the Advanced Training program.   - Ensure compliance to regulatory, policy, and ethical matters.

RACP oversight committees

Role
RACP-administered committees with oversight of the Advanced Training Program in Australia and Aotearoa New Zealand. This includes the relevant training committee and/or Aotearoa New Zealand training subcommittee.
Responsibilities
- Oversee implementation of the Advanced Training program in Australia and Aotearoa New Zealand: - manage and review program requirements, accreditation requirements, and supervision requirements   - monitor implementation of training program requirements   - implement RACP education policy   - oversee trainees' progression through the training program

- o monitor the accreditation of training settings
  - o case manage trainees on the training support pathway
  - o review progression and certification decisions on application in accordance with the RACP Reconsideration, Review, and Appeals By-Law.
- Work collaboratively with Progress Review Panels to ensure the delivery of quality training.
- Provide feedback, guidance, recommendations, and reasoning for decision making to trainees and supervisors.
- Declare conflicts of interest and excuse themselves from decision-making discussions when conflicts arise.
- Report to the overseeing RACP committee as required.

Resources

See RACP Online Learning for new curricula training and support resources.

For trainees

- Education policies
- Trainee support
- Trainee responsibilities
- Accredited settings
- Training fees

For supervisors

- Supervisor Professional Development Program
- RACP Research Supervision resource
- RACP Training Support resource
- RACP Creating a Safe Workplace resource