

# NEW CURRICULA

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## Learning, teaching, and assessment programs

### Advanced Training in Endocrinology (Adult Medicine)



**RACP**  
Specialists. Together

#### About this document

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

This document outlines the Advanced Training in Endocrinology (Adult Medicine) LTA programs for trainees and supervisors. It should be used in conjunction with the Advanced Training in Endocrinology (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 25 learning goals. The learning goals articulate what trainees need to be, do and know, and are assessed throughout training.

<b>BE</b>	1. Professional behaviours
<b>DO</b>	2. Team leadership 3. Supervision and teaching 4. Quality improvement 5. Clinical assessment and management 6. Management of transitions in care 7. Acute care 8. Longitudinal care 9. Communication with patients 10. Prescribing 11. Procedures 12. Investigations 13. Clinic management
<b>KNOW</b>	14. Scientific foundations of endocrinology 15. Disorders of glucose metabolism 16. Disorders of body weight 17. Lipid disorders 18. Disorders of the pituitary, hypothalamus and of water balance 19. Thyroid disorders 20. Adrenal disorders 21. Parathyroid, calcium and bone disorders 22. Neuroendocrine and inherited tumour syndromes 23. Male reproductive endocrinology 24. Female reproductive endocrinology 25. Variations in sex characteristics and gender identity

## 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.
- hold a 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.
- have 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 FTE [professional experience](#)

- 1 [rotation plan](#) per rotation

[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](#)

[Endocrinology meeting attendance](#)

[Endocrinology learning courses](#)

[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

Endocrinology is the study of hormones and hormone-producing tissues. The specialty of clinical endocrinology encompasses the diagnosis and management of disorders of the endocrine system. Hormones from the body's major gland systems (pituitary, thyroid, parathyroid, pancreas, adrenal, and gonads) regulate all body systems and bodily processes, including growth and development, bone, metabolism, electrolytes, blood pressure, reproduction, vascular disease, bowel function, and neurological processes.

Endocrinologists assess, diagnose, and manage endocrine disorders resulting from an excess or deficiency of hormone action, or neoplasms of endocrine organs; perform diagnostic and laboratory analyses, provide treatment, and conduct basic and applied research in a wide range of humoral and metabolic conditions. Communication skills are paramount in the management of people of all ages and in the care of those with chronic disease. Endocrinologists:

- **diagnose and treat disorders of the endocrine system.** The spectrum of endocrine disorders includes diabetes type 1, 2, and others, their complications, and other disorders of glucose metabolism; thyroid, pituitary, and adrenal disease; menopause, gonadal disorders, and infertility; neuroendocrine conditions; benign and malignant glandular tumours; disorders of growth; obesity; genetic and congenital glandular dysfunction; lipid and nutritional abnormalities; osteoporosis and metabolic bone disease.
- **possess specialist investigation and laboratory skills.** Endocrinologists need to be able to interpret biochemical tests relating to endocrine diagnosis and have a good understanding of the laboratory methods underlying these analyses and their limitations. Consequently, experience in clinical or laboratory research and in diagnostic endocrine laboratory medicine is a strongly recommended component of training.
- **are responsible for long term patient management.** Endocrine conditions are diverse in their requirement for specialist medical advice and in most cases their impact is lifelong. Disorders may present across the age spectrum. Many pose a diagnostic challenge, and in

some the application of new or partially effective treatment requires fine judgement. Endocrine disorders affect many body systems and call for expertise in interpretation of clinical biochemistry and immunochemistry, including dynamic tests, genetic testing and counselling, and a strong therapeutic partnership between the endocrinologist and patient and/or their family. Multidisciplinary team care is integral to treatment decisions for diabetes, thyroid cancer, pituitary disease, neuroendocrine tumours, and complex bone disease.

- **provide life-stage endocrine care.** Endocrinologists have expertise in managing people with hormone disorders to progress through puberty, achieve optimal preconception preparation, manage in pregnancy and lactation, menopause, and aging. They can provide gender-affirming treatment and assess and reduce cardiovascular risk in people according to age and comorbidities.
- **provide lifestyle management advice** for disorders such as obesity/overweight, polycystic ovarian syndrome, diabetes, osteoporosis prevention and subfertility.
- **manage medications.** Endocrinologists have expertise in the management of complex medications and specialist knowledge of medication delivery devices/technology.
- **deliver endocrine care.** Endocrinology services are pivotal to a broad spectrum of health care. Endocrinologists provide consultation services to hospital inpatients, as well as dedicated inpatient endocrine care. Most endocrine care is delivered in outpatient settings, in hospital clinics, community settings, and private practice. Endocrine care is well suited to incorporation of telehealth and other digital health technologies.

Endocrinologists are experts in the treatment and management of disorders of the endocrine system with a focus on communication, problem-solving, long-term care of chronic conditions, and evidence-based practice and research. Skills include:

- **communication and interpersonal skills.** Endocrinologists have an important role in taking complete medical histories, determining differential diagnoses, explaining investigations and treatment options, which may include advice on lifestyle, nutrition, and medications, and preventative treatments and measures. Endocrinologists work with multidisciplinary teams including, but not limited to, diabetes educators, dietitians, podiatrists, psychologists, social workers, genetic counsellors, surgeons as well as other medical specialists in multidisciplinary teams. Communication with referring general practitioners is paramount.
- **attention to detail and problem-solving skills.** Endocrinologists must carefully analyse medical histories, physical examinations, and test results, to make accurate diagnoses.
- **research.** Conducting research and studies on the endocrine system and its diseases, disorders, and conditions to review quality of existing treatment techniques and to develop new treatment techniques can be an important component of a career in endocrinology. Developing new models of care for chronic disease and benchmarking care outcomes is important to improve outcomes for people with chronic disease. Remaining up to date on current discoveries, developments, trends, research, and technology is necessary to deliver best endocrine care.

## **Supervising committee**

The program is supervised by the Advanced Training Committee in Endocrinology and the Aotearoa New Zealand Advanced Training Subcommittee in Endocrinology.

## **Qualification**

Trainees who successfully meet the completion standards and criteria of this program will be awarded Fellowship of the Royal Australasian College of Physicians (FRACP).

# 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 experience, and progression and completion decisions are based on evidence of trainees' competence.



## Entry criteria

<b>Entry attributes</b>	<p>Prospective trainees can demonstrate:</p> <ul style="list-style-type: none"><li>• a commitment and capability to pursue a career as an endocrinologist</li><li>• the ability and willingness to achieve the common learning goals for Advanced Training:<ul style="list-style-type: none"><li>• team leadership</li><li>• supervision and teaching</li><li>• the professional behaviours, as outlined in the Competencies</li></ul></li></ul>
<b>Entry criteria</b>	<p>Prospective trainees must:</p> <ul style="list-style-type: none"><li>• have completed RACP Basic Training, including the Written and Clinical Examinations.</li><li>• hold a 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.</li><li>• have been appointed to an appropriate Advanced Training position.</li></ul>

## 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 **25** 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 which allows trainees to demonstrate competence across each learning goal.

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

		Entry criteria	Progression criteria		Completion criteria
	Learning goals	Entry into training <i>At entry into training, trainees will:</i>	Specialty foundation <i>By the end of this phase, trainees will:</i>	Specialty consolidation <i>By the end of this phase, trainees will:</i>	Transition to fellowship <i>By the end of training, trainees will:</i>
Be	1. Professional behaviours	<b>Level 5</b> consistently behave in line with <b>all 10 domains</b> of professional practice	<b>Level 5</b> consistently behave in line with <b>all 10 domains</b> of professional practice	<b>Level 5</b> consistently behave in line with <b>all 10 domains</b> of professional practice	<b>Level 5</b> consistently behave in line with <b>all 10 domains</b> of professional practice
	2. Team leadership: Lead a team of health professionals	<b>Level 2</b> be able to act with direct supervision	<b>Level 3</b> be able to act with indirect supervision	<b>Level 4</b> be able to act with supervision at a distance	<b>Level 5</b> be able to provide supervision
Do	3. Supervision and teaching: Supervise and teach professional colleagues	<b>Level 3</b> be able to act with indirect supervision	<b>Level 3</b> be able to act with indirect supervision	<b>Level 4</b> be able to act with supervision at a distance	<b>Level 5</b> be able to provide supervision
	4. Quality improvement: Identify and address failures in health care delivery	<b>Level 1</b> be able to be present and observe	<b>Level 3</b> be able to act with indirect supervision	<b>Level 4</b> be able to act with supervision at a distance	<b>Level 5</b> be able to provide supervision
	5. Clinical assessment and management: Clinically assess and manage the ongoing care of patients	<b>Level 3</b> be able to act with indirect supervision	<b>Level 3</b> be able to act with indirect supervision	<b>Level 4</b> be able to act with supervision at a distance	<b>Level 5</b> be able to provide supervision
	6. Management of transitions in care: Manage the transition of patient care between health professionals, providers, and contexts	<b>Level 3</b> be able to act with indirect supervision	<b>Level 3</b> be able to act with indirect supervision	<b>Level 4</b> be able to act with supervision at a distance	<b>Level 5</b> be able to provide supervision
	7. Acute care: Manage the care of acutely unwell patients	<b>Level 3</b> be able to act with indirect supervision	<b>Level 3</b> be able to act with indirect supervision	<b>Level 4</b> be able to act with supervision at a distance	<b>Level 5</b> be able to provide supervision
	8. Longitudinal care: Manage and coordinate the longitudinal care, and appropriate transitions in care, of patients with chronic illness, disability, and/or long-term health issues	<b>Level 3</b> be able to act with indirect supervision	<b>Level 3</b> be able to act with indirect supervision	<b>Level 4</b> be able to act with supervision at a distance	<b>Level 5</b> be able to provide supervision
	9. Communication with patients: Discuss diagnoses and management plans with patients and their families/carers	<b>Level 3</b> be able to act with indirect supervision	<b>Level 3</b> be able to act with indirect supervision	<b>Level 4</b> be able to act with supervision at a distance	<b>Level 5</b> be able to provide supervision
	10. Prescribing: Prescribe and monitor therapies tailored to patients' needs and conditions	<b>Level 2</b> be able to act with direct supervision	<b>Level 3</b> be able to act with indirect supervision	<b>Level 4</b> be able to act with supervision at a distance	<b>Level 5</b> be able to provide supervision
	11. Procedures: Plan, prepare for, perform, and provide aftercare for important practical procedures	<b>Level 1</b> be able to be present and observe	<b>Level 2</b> be able to act with direct supervision	<b>Level 4</b> be able to act with supervision at a distance	<b>Level 5</b> be able to provide supervision

		Entry criteria	Progression criteria		Completion criteria
	Learning goals	Entry into training <i>At entry into training, trainees will:</i>	Specialty foundation <i>By the end of this phase, trainees will:</i>	Specialty consolidation <i>By the end of this phase, trainees will:</i>	Transition to fellowship <i>By the end of training, trainees will:</i>
	<b>12. Investigations:</b> Select, organise, and interpret investigations	<b>Level 2</b> be able to act with direct supervision	<b>Level 3</b> be able to act with indirect supervision	<b>Level 4</b> be able to act with supervision at a distance	<b>Level 5</b> be able to provide supervision
	<b>13. Clinic management:</b> Manage an outpatient clinic	<b>Level 2</b> be able to act with direct supervision	<b>Level 3</b> be able to act with indirect supervision	<b>Level 4</b> be able to act with supervision at a distance	<b>Level 5</b> be able to provide supervision
Know	<b>14. Scientific foundations of endocrinology</b>	<b>Level 2</b> know the topics and concepts in this knowledge guide that underpin specialty practice ( <i>knows</i> )	<b>Level 3</b> know how to apply the knowledge in this knowledge guide to specialty practice ( <i>knows how</i> )	<b>Level 4</b> frequently show they can apply knowledge in this knowledge guide to specialty practice ( <i>shows how</i> )	<b>Level 5</b> consistently apply sound knowledge in this knowledge guide to specialty practice ( <i>does</i> )
	<b>15. Disorders of glucose metabolism</b>	<b>Level 3</b> know how to apply the knowledge in this knowledge guide to specialty practice ( <i>knows how</i> )	<b>Level 4</b> frequently show they can apply knowledge in this knowledge guide to specialty practice ( <i>shows how</i> )	<b>Level 4</b> frequently show they can apply knowledge in this knowledge guide to specialty practice ( <i>shows how</i> )	<b>Level 5</b> consistently apply sound knowledge in this knowledge guide to specialty practice ( <i>does</i> )
	<b>16. Disorders of body weight</b>	<b>Level 2</b> know the topics and concepts in this knowledge guide that underpin specialty practice ( <i>knows</i> )	<b>Level 3</b> know how to apply the knowledge in this knowledge guide to specialty practice ( <i>knows how</i> )	<b>Level 4</b> frequently show they can apply knowledge in this knowledge guide to specialty practice ( <i>shows how</i> )	<b>Level 5</b> consistently apply sound knowledge in this knowledge guide to specialty practice ( <i>does</i> )
	<b>17. Lipid disorders</b>	<b>Level 2</b> know the topics and concepts in this knowledge guide that underpin specialty practice ( <i>knows</i> )	<b>Level 3</b> know how to apply the knowledge in this knowledge guide to specialty practice ( <i>knows how</i> )	<b>Level 4</b> frequently show they can apply knowledge in this knowledge guide to specialty practice ( <i>shows how</i> )	<b>Level 5</b> consistently apply sound knowledge in this knowledge guide to specialty practice ( <i>does</i> )
	<b>18. Disorders of the pituitary, hypothalamus and of water balance</b>	<b>Level 2</b> know the topics and concepts in this knowledge guide that underpin specialty practice ( <i>knows</i> )	<b>Level 2</b> know the topics and concepts in this knowledge guide that underpin specialty practice ( <i>knows</i> )	<b>Level 4</b> frequently show they can apply knowledge in this knowledge guide to specialty practice ( <i>shows how</i> )	<b>Level 5</b> consistently apply sound knowledge in this knowledge guide to specialty practice ( <i>does</i> )
	<b>19. Thyroid disorders</b>	<b>Level 3</b> know how to apply the knowledge in this knowledge guide to specialty practice ( <i>knows how</i> )	<b>Level 3</b> know how to apply the knowledge in this knowledge guide to specialty practice ( <i>knows how</i> )	<b>Level 4</b> frequently show they can apply knowledge in this knowledge guide to specialty practice ( <i>shows how</i> )	<b>Level 5</b> consistently apply sound knowledge in this knowledge guide to specialty practice ( <i>does</i> )

		Entry criteria	Progression criteria		Completion criteria
	Learning goals	Entry into training <i>At entry into training, trainees will:</i>	Specialty foundation <i>By the end of this phase, trainees will:</i>	Specialty consolidation <i>By the end of this phase, trainees will:</i>	Transition to fellowship <i>By the end of training, trainees will:</i>
	20. Adrenal disorders	<b>Level 2</b> know the topics and concepts in this knowledge guide that underpin specialty practice ( <i>knows</i> )	<b>Level 3</b> know how to apply the knowledge in this knowledge guide to specialty practice ( <i>knows how</i> )	<b>Level 4</b> frequently show they can apply knowledge in this knowledge guide to specialty practice ( <i>shows how</i> )	<b>Level 5</b> consistently apply sound knowledge in this knowledge guide to specialty practice ( <i>does</i> )
	21. Parathyroid, calcium and bone disorders	<b>Level 2</b> know the topics and concepts in this knowledge guide that underpin specialty practice ( <i>knows</i> )	<b>Level 3</b> know how to apply the knowledge in this knowledge guide to specialty practice ( <i>knows how</i> )	<b>Level 4</b> frequently show they can apply knowledge in this knowledge guide to specialty practice ( <i>shows how</i> )	<b>Level 5</b> consistently apply sound knowledge in this knowledge guide to specialty practice ( <i>does</i> )
	22. Neuroendocrine and inherited tumour syndromes	<b>Level 1</b> have heard of some of the topics in this knowledge guide that underpin specialty practice ( <i>heard of</i> )	<b>Level 2</b> know the topics and concepts in this knowledge guide that underpin specialty practice ( <i>knows</i> )	<b>Level 3</b> know how to apply the knowledge in this knowledge guide to specialty practice ( <i>knows how</i> )	<b>Level 4</b> frequently show they can apply knowledge in this knowledge guide to specialty practice ( <i>shows how</i> )
	23. Male reproductive endocrinology	<b>Level 1</b> have heard of some of the topics in this knowledge guide that underpin specialty practice ( <i>heard of</i> )	<b>Level 2</b> know the topics and concepts in this knowledge guide that underpin specialty practice ( <i>knows</i> )	<b>Level 3</b> know how to apply the knowledge in this knowledge guide to specialty practice ( <i>knows how</i> )	<b>Level 4</b> frequently show they can apply knowledge in this knowledge guide to specialty practice ( <i>shows how</i> )
	24. Female reproductive endocrinology	<b>Level 1</b> have heard of some of the topics in this knowledge guide that underpin specialty practice ( <i>heard of</i> )	<b>Level 2</b> know the topics and concepts in this knowledge guide that underpin specialty practice ( <i>knows</i> )	<b>Level 3</b> know how to apply the knowledge in this knowledge guide to specialty practice ( <i>knows how</i> )	<b>Level 4</b> frequently show they can apply knowledge in this knowledge guide to specialty practice ( <i>shows how</i> )
	25. Variations in sex characteristics and gender identity	<b>Level 1</b> have heard of some of the topics in this knowledge guide that underpin specialty practice ( <i>heard of</i> )	<b>Level 2</b> know the topics and concepts in this knowledge guide that underpin specialty practice ( <i>knows</i> )	<b>Level 3</b> know how to apply the knowledge in this knowledge guide to specialty practice ( <i>knows how</i> )	<b>Level 4</b> frequently show they can apply knowledge in this knowledge guide to specialty practice ( <i>shows how</i> )

# 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?
<b>Entry</b>	
1 <a href="#">training application</a>	At the start of the specialty foundation phase.
<b>Learning</b>	
Minimum 36 months full time equivalent (FTE) <a href="#">professional experience</a>	Minimum 12 months FTE during each phase.
<a href="#">RACP Advanced Training Orientation resource</a>	During the first 6 months of the specialty foundation phase.
<a href="#">RACP Supervisor Professional Development Program</a>	Before the end of Advanced Training.
<a href="#">RACP Australian Aboriginal, Torres Strait Islander and Māori Cultural Competence and Cultural Safety resource</a>	Before the end of Advanced Training, if not completed during Basic Training. Recommended completion before the specialty consolidation phase.
<a href="#">RACP Health Policy, Systems and Advocacy resource</a>	Before the end of Advanced Training. Recommended completion before the transition to fellowship phase.
<a href="#">Endocrinology meeting attendance</a>	Before the end of Advanced Training.
<a href="#">Endocrinology learning courses</a>	Before the end of Advanced Training.
<a href="#">Recommended resources</a>	Recommended completion over the course of Advanced Training.
<b>Teaching</b>	
Nominate 1 <a href="#">research project supervisor</a>	Recommended to be nominated before the specialty consolidation phase.
<b>Assessment</b>	
1 <a href="#">research project</a>	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?
<b>Learning</b>	
1 <a href="#">rotation plan</a> per rotation	At the start of (or prior to starting) the rotation. Due 28 February for rotations in the first half or whole of the year and 31 August for rotations in the second half of the year.
<b>Teaching</b>	
Nominate 2 <a href="#">supervisors</a> per rotation	At the start of each accredited or approved training rotation.
<b>Assessment</b>	
12 <a href="#">learning captures</a>	Minimum 1 per month.
12 <a href="#">observation captures</a>	Minimum 1 per month.
4 <a href="#">progress reports</a>	Minimum 1 every 3 months.

## Entry

### Training application

#### Requirement

1 x training application, at the start of the specialty foundation phase.

#### Purpose

The training application supports trainees to:

- confirm that they meet the program [entry criteria](#)
- provide essential details for program enrolment, ensuring compliance with RACP standards
- establishes a formal foundation for their training pathway, enabling access to program resources and support

The application form will be reviewed by the RACP staff. Trainees will be able to track the status of your application 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 the learning requirements *could align* and *will align* with.

Learning goals	Learning requirements					
	Professional experience	Learning plan	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
1. Professional behaviours	Could align	Will align	Will align	Will align	Will align	Will align
2. Team leadership	Could align	x	x	x	x	x
3. Supervision and teaching	Could align	x	x	Will align	x	x
4. Quality improvement	Could align	x	x	x	x	x
5. Clinical assessment and management	Could align	x	x	x	x	x
6. Management of transitions in care	Could align	x	x	x	x	x
7. Acute care	Could align	x	x	x	x	x
8. Longitudinal care	Could align	x	x	x	x	x
9. Communication with patients	Could align	x	x	x	Will align	x
10. Prescribing	Could align	x	x	x	x	x
11. Procedures	Could align	x	x	x	x	x

12. Investigations	Could align	x	x	x	x	x
13. Clinic management	Could align	x	x	x	x	Will align
14. Scientific foundations of endocrinology	Could align	x	x	x	x	x
15. Disorders of glucose metabolism	Could align	x	x	x	x	x
16. Disorders of body weight	Could align	x	x	x	x	x
17. Lipid disorders	Could align	x	x	x	x	x
18. Disorders of the pituitary, hypothalamus and of water balance	Could align	x	x	x	x	x
19. Thyroid disorders	Could align	x	x	x	x	x
20. Adrenal disorders	Could align	x	x	x	x	x
21. Parathyroid, calcium and bone disorders	Could align	x	x	x	x	x
22. Neuroendocrine and inherited tumour syndromes	Could align	x	x	x	x	x
23. Male reproductive endocrinology	Could align	x	x	x	x	x
24. Female reproductive endocrinology	Could align	x	x	x	x	x
25. Variations in sex characteristics and gender identity	Could align	x	x	x	x	x

## Endocrinology meetings and courses blueprint

Learning goals	Learning requirements										
	ESA Seminar meeting	ADS John R Turtle Diabetes Clinical Skills Course	ADS John R Turtle Diabetes Practical Skills Course	ANZBMS Annual Scientific Meeting	ANZBMS Advanced Clinical Postgrad Meeting	New Zealand Society for the Study of Diabetes ASM	ANZBMS Clinical Bone Densitometry Course	A bone meeting (such as Rotorua Bone Meeting or ANZBMS Annual Meeting)	All Aotearoa NZ Society of Endocrinology clinical meetings/ trainee days	New Zealand Society for the Study of Diabetes trainee days	American or European endocrine meeting (recommended)
1. Professional behaviours	Could align	Could align	Could align	Could align	Could align	Could align	Could align	Could align	Could align	Could align	Could align
2. Team leadership	x	x	x	x	x	Could align	x	x	Could align	Could align	Could align
3. Supervision and teaching	x	x	x	x	x	Could align	x	x	Could align	Could align	Could align
4. Quality improvement	Could align	x	x	x	x	Could align	Could align	x	Could align	Could align	Could align
5. Clinical assessment and management	Could align	Will align	x	x	x	Could align	Will align	x	Could align	Could align	Could align
6. Management of transitions in care	x	x	x	x	x	Could align	x	x	Could align	Could align	Could align
7. Acute care	Could align	x	x	x	x	Could align	x	x	Could align	Could align	Could align
8. Longitudinal care	Could align	Will align	x	x	x	Could align	Could align	x	Could align	Could align	Could align
9. Communication with patients	x	x	x	x	x	Could align	x	x	Could align	Could align	Could align
10. Prescribing	Could align	x	Will align	x	x	Could align	Will align	x	Could align	Could align	Could align
11. Procedures	Could align	Will align	Will align	x	x	Could align	Could align	x	Could align	Could align	Could align
12. Investigations	Could align	Will align	Will align	x	x	Could align	Will align	x	Could align	Could align	Could align
13. Clinic management	x	x	x	x	x	Could align	Will align	x	Could align	Could align	Could align
14. Scientific foundations of endocrinology	Could align	x	x	Could align	x	Could align	Will align	Could align	Could align	Could align	Could align
15. Disorders of glucose metabolism	Could align	Will align	Will align	x	x	Could align	x	x	Could align	Could align	Could align

<b>16. Disorders of body weight</b>	Could align	x	x	x	x	Could align	x	x	Could align	Could align	Could align
<b>17. Lipid disorders</b>	Could align	Will align	x	x	x	Could align	x	x	Could align	Could align	Could align
<b>18. Disorders of the pituitary, hypothalamus and of water balance</b>	Could align	x	x	x	x	x	x	x	Could align	Could align	Could align
<b>19. Thyroid disorders</b>	Could align	x	x	x	x	x	x	x	Could align	Could align	Could align
<b>20. Adrenal disorders</b>	Could align	x	x	x	x	x	x	x	Could align	Could align	Could align
<b>21. Parathyroid, calcium and bone disorders</b>	Could align	x	x	Could align	x	x	Will align	Could align	Could align	Could align	Could align
<b>22. Neuroendocrine and inherited tumour syndromes</b>	Could align	x	x	x	x	x	x	x	Could align	Could align	Could align
<b>23. Male reproductive endocrinology</b>	Could align	x	x	x	x	x	x	x	Could align	Could align	Could align
<b>24. Female reproductive endocrinology</b>	Could align	x	x	x	x	x	x	x	Could align	Could align	Could align
<b>25. Variations in sex characteristics and gender identity</b>	Could align	x	x	x	x	x	x	x	Could align	Could align	Could align

## Professional experience

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

<b>Professional experience</b>
Complete at least 36 months of relevant professional experience in approved rotations.
<b>Location of training</b>
<ul style="list-style-type: none"><li>Australian trainees are required to complete training in at least 2 different accredited training settings.</li><li>Aotearoa New Zealand trainees are recommended to complete training in at least 2 different accredited training settings.</li><li>All trainees must complete at least 24 months of training in Australia and/or Aotearoa.</li></ul>
<b>Experiential training</b>
<ul style="list-style-type: none"><li>12 months in an accredited RCY training position, attending a minimum of 4 outpatient endocrine clinics per week</li><li>12 months minimum in an accredited core clinical training position, attending a minimum of 3 endocrine outpatient clinics or 2 endocrine outpatient clinics per week and an inpatient load with equivalent workload of one outpatient clinic per week</li><li>12 months maximum in an approved non-core training position.</li></ul>

## Rotation plan

<b>Requirement</b>
1 x rotation plan per rotation.
<b>Description</b>
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.
<b>Purpose</b>
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.
<b>How to complete it</b>
<p>Trainees can submit a rotation plan in <a href="#">TMP</a> under the training plan tab.</p> <p>Trainees undertaking their first rotation of their training program must select the following checkbox, 'The rotation start date is also the start date of my Training Program' to record the start date for their training program.</p> <p>If a trainee is expecting a learning goal to be covered during a rotation, select 'yes' for 'coverage offered' and outline the learning opportunities available.</p> <p>This information will be used by supervisors and overseeing RACP training committee to determine the relevance of the rotation to the program's professional experience requirements.</p>

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 that 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, and they 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](#).

## Endocrinology meeting attendance

### Requirement

#### Australia

Trainees must attend either an Endocrine Society of Australia (ESA) Seminar meeting OR an New Zealand Society of Endocrinology (NZSE) Clinical meeting, once over the course of training.

It is also strongly recommended that trainees attend the following once over the course of training:

- An American or European endocrine meeting
- Australia & New Zealand Bone & Mineral Society (ANZBMS) annual scientific meeting

#### Aotearoa New Zealand

Trainees must attend the following meetings:

- New Zealand Society of Endocrinology (NZSE) Clinical meeting OR Endocrine Society of Australia (ESA) Seminar meeting, once over the course of Advanced Training
- New Zealand Society for the Study of Diabetes (NZSSD) annual scientific meeting, once over the course of Advanced Training
- Australia & New Zealand Bone & Mineral Society (ANZBMS) annual scientific meeting, once over the course of Advanced Training
- All NZSSD and NZSE trainee days

It is also strongly recommended that trainees attend an American or European endocrine meeting, once over the course of training.

### Purpose

Attendance at professional gathering of endocrinologists allows the opportunity for many learning opportunities, including:

- providing trainees with a variety of experiences relevant to education and training and prepares them for the ongoing professional development
- learning about updates in evidence based clinical practice and new research frontiers
- learning about state-of-the art advances in the fields of endocrinology and bone and mineral research, including awards sessions, oral presentations and poster abstracts
- networking and sharing expertise with industry professionals
- in-depth teaching, from sources independent of training sites, across all training years to cover the learning goals

- presenting research that the trainee may have been involved with.

### How to complete it

More information regarding each meeting can be found at:

- [ESA Seminar meeting](#)
- [NZSE Clinical meeting](#)
- [NZSSD Annual Scientific Meeting](#)
- [ANZBMS Annual Scientific Meeting](#)
- [NZSSD Trainee days](#)
- [NZSE Trainee days](#)

Trainees are to submit evidence of their attendance to [Endocrinology@racp.edu.au](mailto:Endocrinology@racp.edu.au) or [Endocrinology@racp.org.nz](mailto:Endocrinology@racp.org.nz)

## Courses

### Endocrinology learning courses

#### Requirement

##### Australia

Trainees must attend two learning courses over the course of Advanced Training. The following courses are suitable:

- Australian Diabetes Society (ADS) John R Turtle Diabetes Clinical Skills Course OR ADS Practical Skills Course (Recommended completion during the specialty foundation phase)
- ANZBMS Clinical Bone Densitometry Course OR ANZBMS Advanced Clinical Postgraduate Course
- New Zealand Society for the Study of Diabetes (NZSSD) Clinician's Weekend

##### Aotearoa New Zealand

Trainees must attend two learning courses over the course of Advanced Training:

- NZSSD Clinician's Weekend

Plus, one of:

- Australian Diabetes Society (ADS) John R Turtle Diabetes Clinical Skills Course OR ADS Practical Skills Course (Recommended completion during the specialty foundation phase)
- ANZBMS Clinical Bone Densitometry Course OR ANZBMS Advanced Clinical Postgraduate Course

#### Description

These learning courses allow for teaching from senior endocrinologists and peer interaction while upskilling trainees in endocrinology learning goals, such as complex diabetes management including diabetes and pregnancy and advanced diabetes complications.

#### Purpose

Learning courses have several purposes such as:

- improving confidence and competence in the early period of training to manage diabetes on a day-to-day basis
- providing opportunity for networking with new trainees in each state

- upskilling trainees in the practical aspects of diabetes care as they move from basic physician training to advanced training
- networking with other endocrinologists and learn in a more informal way from conversations with them
- providing high quality learning of issues that trainees may have limited access to in their normal training.

### How to complete it

More information regarding each course can be found at:

- [ADS John R Turtle Diabetes Clinical Skills Course](#)
- [ADS Practical Skills Course](#)
- [ANZBMS Clinical Bone Densitometry](#)
- [ANZBMS Advanced Clinical Graduate Course](#)
- [NZSSD Clinician's Weekend](#)

Trainees are to submit evidence of their attendance to [Endocrinology@racp.edu.au](mailto:Endocrinology@racp.edu.au) or [Endocrinology@racp.org.nz](mailto:Endocrinology@racp.org.nz)

## RACP Advanced Training Orientation resource

### Requirement

1 x 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's a 'one-stop shop' that 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 x 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 [Supervisor Professional Development Program](#) for more information on the program.

### 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 three 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 x 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 however it's recommended they complete it 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 x 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 x supervisors per rotation:

- 1 supervisor, who is a Fellow of the RACP in endocrinology

It is recommended that trainees should maintain the same supervisor throughout a phase of training. If a trainee spends two phases of training at the same setting, it is recommended that a different supervisor(s) should be named to oversee each phase.

### Nominating eligible supervisors

Trainees will be asked to nominate rotation supervisors as part of their rotation 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 us](#) to confirm supervisor eligibility.

### Research project supervisor

Trainees are to nominate 1 x research project supervisor over the course of Advanced Training. Recommended to be nominated 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. Management of transitions in care	Could assess	Could assess	Will assess	x
7. Acute care	Could assess	Could assess	Will assess	x
8. Longitudinal care	Could assess	Could assess	Will assess	x
9. Communication with patients	Could assess	Could assess	Will assess	x
10. Prescribing	Could assess	Could assess	Will assess	x
11. Procedures	Could assess	Could assess	Will assess	x
12. Investigations	Could assess	Could assess	Will assess	x

<b>13. Clinic management</b>	Could assess	Could assess	Will assess	Could assess
<b>14. Scientific foundations of endocrinology</b>	Could assess	Could assess	Will assess	Could assess
<b>15. Disorders of glucose metabolism</b>	Could assess	Could assess	Will assess	Could assess
<b>16. Disorders of body weight</b>	Could assess	Could assess	Will assess	Could assess
<b>17. Lipid disorders</b>	Could assess	Could assess	Will assess	Could assess
<b>18. Disorders of the pituitary, hypothalamus and of water balance</b>	Could assess	Could assess	Will assess	Could assess
<b>19. Thyroid disorders</b>	Could assess	Could assess	Will assess	Could assess
<b>20. Adrenal disorders</b>	Could assess	Could assess	Will assess	Could assess
<b>21. Parathyroid, calcium and bone disorders</b>	Could assess	Could assess	Will assess	Could assess
<b>22. Neuroendocrine and inherited tumour syndromes</b>	Could assess	Could assess	Will assess	Could assess
<b>23. Male reproductive endocrinology</b>	Could assess	Could assess	Will assess	Could assess
<b>24. Female reproductive endocrinology</b>	Could assess	Could assess	Will assess	Could assess
<b>25. Variations in sex characteristics and gender identity</b>	Could assess	Could assess	Will assess	Could assess

## Learning capture

### Requirement

12 x learning captures per phase of training, minimum 1 per month.

Refer to [RACP Flexible Training Policy](#) for further 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 x observation captures per phase of training, minimum 1 per month.

Refer to [RACP Flexible Training Policy](#) for further 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 x progress reports per phase of training, minimum 1 every 3 months. <i>Refer to <a href="#">RACP Flexible Training Policy</a> for further information on part-time training (item 4.2).</i>
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 the College's new Training Management Platform. Instructions on how to complete a progress report will be available in 2025.

## Research project

Requirement
1 x research project over the course of Advanced Training.
Description
<p>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.</p> <p>Research projects are not required to be specialty-specific but are required to be broadly relevant to trainees' area of specialty. Broadly relevant can be defined as topics that can enhance, complement and inform trainees' practice in the chosen specialty.</p> <p>Three types of research projects are accepted:</p> <ul style="list-style-type: none"><li>• Research in human subjects, populations and communities or laboratory research</li><li>• Audit</li><li>• Systematic review</li></ul> <p>The trainee must have a research project supervisor who may or may not be one of their rotation supervisors.</p> <p>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.</p>



### Purpose

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

### 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](mailto: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
<ul style="list-style-type: none"><li>• Maintain employment in accredited training settings.</li><li>• Act as a self-directed learner:<ul style="list-style-type: none"><li>○ be aware of the educational requirements outlined in the relevant curricula and education policies</li><li>○ actively seek and reflect on feedback from assessors, supervisors, and other colleagues</li><li>○ plan, reflect on, and manage their learning and progression against the curricula standards</li><li>○ adhere to the deadlines for requirements of the training program.</li></ul></li><li>• Actively participate in training setting / network accreditation undertaken by the RACP.</li><li>• Complete the annual Physician Training Survey to assist the RACP and training settings with ongoing quality improvement of the program.</li></ul>

## Rotation supervisor

Role
A consultant who provides direct oversight of an Advanced Trainee during a training rotation.
Responsibilities
<ul style="list-style-type: none"><li>• Be aware of the educational requirements outlined in the relevant curricula and education policies.</li><li>• Oversee and support the progression of Advanced Trainees within the setting:<ul style="list-style-type: none"><li>○ Assist trainees to plan their learning during the rotation.</li><li>○ Support colleagues to complete observation captures with trainees.</li><li>○ Provide feedback to trainees through progress reports.</li></ul></li><li>• Actively participate in rotation accreditation undertaken by the RACP.</li><li>• Complete the annual Physician Training Survey to assist the RACP and training settings with ongoing quality improvement of the program.</li></ul>

## 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 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.
  - Monitor the accreditation of training settings.
  - Case manage trainees on the Training Support pathway.
  - Review progression and certification decisions on application in accordance with the RACP Reconsideration, Review, and Appeals By-Law.
- Work collaboratively with 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

## 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](#)