ENTRY CRITERIA

Summary of proposed changes
- No proposed changes

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

PROFESSIONAL EXPERIENCE

Summary of proposed changes
- Removal of 6-month time-based neonatal retrieval services rotation requirement. Trainees will be required to obtain neonatal retrieval experience over the course of training in perinatal and/or surgical settings or retrieval services, where available, without a mandated time-based requirement. The following learning goals outline experience or knowledge in retrievals:
    - EPA 5: Management of transitions in care and longitudinal care
    - KG1: Scientific foundations of neonatal and perinatal medicine
    - KG 4: Circulatory conditions
- Maximum non-core training time has increased to 12 months and the definition of non-core training has been updated.
- Removal of the requirement that trainees can have no more than 6 months of core training certified at a registrar level.

CURRENT REQUIREMENT	**36 months of certified training time** consisting of:
	
	• **30 months of core training in neonatal and perinatal medicine training** including:
	
	    ○ **18 months** in a perinatal setting
	
	    ○ **6 months** (or equivalent) in a neonatal setting that is accredited for and performs major surgery
	
	    ○ **6 months** further core training or neonatal retrieval services rotations
	
	• **6 months of non-core training** in a related specialty
	
	Trainees can have no more than 6 months of core training certified at a registrar level.

PROPOSED REQUIREMENT	Complete at **least 36 months of relevant professional experience** in approved rotations in at least two different training settings, including:
	
	• **Minimum 24 months FTE** in core Neonatal Perinatal Medicine training positions, including:
	
	    ○ **Minimum 18 months** in a perinatal setting, with exposure to fetal medicine and developmental follow-up
	
	    ○ **Minimum 6 months** (or equivalent) in a surgical setting, with exposure to developmental follow-up
	
	• **Maximum 12 months FTE** in approved non-core training settings, including:
	
	    ○ Paediatric intensive care
	    ○ Developmental medicine
	    ○ Community paediatrics
	    ○ General paediatrics
	    ○ Palliative care
	    ○ Infant mental health

LOCATION OF TRAINING

Summary of proposed changes

- Increase from 12 to 24 months of training required to be completed in Australia and/or Aotearoa New Zealand.
- The requirement that no more than 24 months can be completed at a single setting has been amended to a recommendation that no longer than 18 months is undertaken in a single setting.

CURRENT REQUIREMENT	• You must complete training at a minimum of 2 training settings • No more than 18 months of core training and 24 months of training in total can be completed at the same training setting. • Complete at least 12 months of training in Australia and/or Aotearoa New Zealand.
PROPOSED REQUIREMENT	• Complete training in at least 2 different training settings (recommended that no longer than 18 months is undertaken at a single setting) • Complete at least 24 months of training in Australia and/or Aotearoa New Zealand.

LEARNING PROGRAM

Summary of proposed changes

- Learning Needs Analysis replaced by new Learning plan tool that will be common across all RACP Advanced Training programs.
- Professional Qualities Reflections replaced by new Learning capture tool that will be common across all RACP Advanced Training programs (see assessment program).

CURRENT REQUIREMENT	• **2** Learning Needs Analysis per year • **2** Professional Qualities Reflections per training year (recommended)
PROPOSED REQUIREMENT	• **1** Learning plan per rotation

LEARNING COURSES

Summary of proposed changes
- Addition of learning courses that will be common across all RACP Advanced Training programs.

CURRENT REQUIREMENT	• **Australian Aboriginal, Torres Strait Islander and Māori Cultural Competence and Cultural Safety resource**, by the end of Advanced Training
PROPOSED REQUIREMENT	• RACP **Advanced Training Orientation** resource (within the first six months of Advanced Training) • RACP **Health Policy, Systems and Advocacy** resource (recommended completion before the Transition to Fellowship phase) • RACP **Supervisor Professional Development Program,** by the end of Advanced Training • **Australian Aboriginal, Torres Strait Islander and Māori Cultural Competence and Cultural Safety resource**, by the end of Advanced Training

LEARNING ACTIVITIES

Summary of proposed changes
- Logbooks have been removed as they will be replaced by the new Learning capture and Observation capture tools
- Addition of recommended learning activities include:
  - Attendance at a biostatics or quality improvement course
  - Attendance at a neonatal conference or meeting
  - Presentation of research at hospital grand rounds, conferences or journal clubs.

CURRENT REQUIREMENT	• 4 Logbooks:
	   ○ Communication and Professional Development Logbook
	   ○ Follow-up Activities Logbook
	   ○ Neonatal Emergency Transport Services (NETS) Logbook
	   ○ Procedures Logbook

PROPOSED REQUIREMENT	• Attendance at a biostatics or quality improvement course (recommended), once over the course of training
	• Attendance at a neonatal conference/meeting over the course of training (recommended). Suitable conferences and meetings include:
	   ○ Perinatal Society of Australia and New Zealand (PSANZ)
	   ○ Australian and New Zealand Neonatal Network Clinical Practice Improvement Conference (ANZNN CPI)
	• Presentation of a research project at hospital grand rounds, conferences or journal clubs, once over the course of training, (recommended).

TEACHING PROGRAM

Summary of proposed changes
- Increase from minimum of one supervisor per rotation to minimum of two supervisors per rotation
- Introduction of Progress Review Panels across all RACP Advanced Training programs

CURRENT REQUIREMENT	**Core training** • 1 x supervisor per rotation, who is a Fellow of the RACP • 1 x supervisor per rotation, who can be a Fellow of the RACP (recommended) **Non-core training** • 1 x supervisor per rotation, who is a Fellow of the RACP • 1 x supervisor per rotation, who can be a Fellow of the RACP (recommended)

PROPOSED REQUIREMENT	**Core training:**
	• **2** individuals for the role of Education Supervisor
	  o **Minimum of 1** supervisor per rotation who is a Fellow of the RACP
	  o **Minimum of 1** eligible supervisor providing direct supervision of the trainee for the duration of the rotation
	Non-core training:
	• **2** individuals for the role of Education Supervisor
	  • **Minimum of 1** supervisor per rotation who is a Fellow of the RACP
	  • **Minimum of 1** eligible supervisor providing direct supervision of the trainee for the duration of the rotation
	
	Other:
	• **1 individual for the role of Research Project Supervisor** (may or may not be the Education Supervisor)
	• **1 RACP committee to act as a Progress Review Panel**

ASSESSMENT PROGRAM

Summary of proposed changes
- Supervisors' report replaced by new Progress report tool that will be common across all RACP Advanced Training programs.
- Case-based Discussions (CbDs) replaced by new Learning capture tool that will be common across all RACP Advanced Training programs.
- Mini-Clinical Evaluation Exercises (Mini-CEX) and Direct Observation of Procedural Skills (DOPS) replaced by new Observation capture tool that will be common across all RACP Advanced Training programs.

CURRENT REQUIREMENT	• **1** Supervisor's report per rotation • **2** CbDs per year • **2** Mini-CEX per year • **6** DOPS per core training year • **1** Research project
PROPOSED REQUIREMENT	• **12** Observation captures per phase • **12** Learning captures per phase • **4** Progress reports per phase • **1** Research project over the course of training

RACP — Specialists. Together — EDUCATE ADVOCATE INNOVATE

LTA STRUCTURE

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

PROGRESS POINTS

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

RATING SCALES

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

PROGRESSION CRITERIA

	Learning goals	Entry criteria — At entry into training	Progression criteria — End of specialty foundation	Progression criteria — End of specialty consolidation	Completion criteria — End of Transition to Fellowship
Be	1. Professional behaviours	Level 5	Level 5	Level 5	Level 5
Do (work tasks)	1. Team leadership	Level 2	Level 3	Level 4	Level 5
	2. Supervision and teaching	Level 2	Level 3	Level 4	Level 5
	3. Quality improvement	Level 2	Level 3	Level 4	Level 5
	4. Clinical assessment and management	Level 2	Level 3	Level 4	Level 5
	5. Management of transitions in care and longitudinal care	Level 3	Level 3	Level 4	Level 5
	6. Acute care	Level 2	Level 3	Level 4	Level 5
	7. Communication with patients	Level 2	Level 3	Level 4	Level 5
	8. Prescribing	Level 3	Level 4	Level 5	Level 5
	9. Procedures	Level 2	Level 3	Level 4	Level 5
	10. Investigations	Level 2	Level 3	Level 4	Level 5
	11. Clinical management	Level 2	Level 3	Level 4	Level 5
	12. End of life care	Level 2	Level 3	Level 4	Level 5
Know (Knowledge Guides)	1. Scientific foundations of neonatal and perinatal medicine	Level 2	Level 3	Level 4	Level 5
	2. Infections and immune disorders	Level 2	Level 3	Level 4	Level 5
	3. Respiratory conditions	Level 2	Level 3	Level 4	Level 5
	4. Circulatory conditions	Level 2	Level 3	Level 4	Level 5
	5. Neurological and neuromuscular conditions	Level 2	Level 3	Level 4	Level 5
	6. Hematological and malignant conditions	Level 2	Level 3	Level 4	Level 5
	7. Metabolic and endocrine conditions	Level 2	Level 3	Level 4	Level 5
	8. Kidney and urinary system conditions	Level 2	Level 3	Level 4	Level 5
	9. Gastrointestinal and hepatobiliary conditions	Level 2	Level 3	Level 4	Level 5
	10. Dermatological conditions	Level 2	Level 3	Level 4	Level 5
	11. Ophthalmological abnormalities	Level 2	Level 3	Level 4	Level 5
	12. Ear, nose and throat abnormalities	Level 2	Level 3	Level 4	Level 5
	13. Fetal and perinatal medicine	Level 2	Level 3	Level 4	Level 5