NEW ©URRICULA

Learning, teaching, and assessment programs

Advanced Training in Sexual Health Medicine



About this document

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

This document outlines the Advanced Training in Sexual Health Medicine LTA programs for trainees and supervisors. It should be used in conjunction with the Advanced Training in Sexual Health Medicine <u>curriculum standards</u>.

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

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Program overview

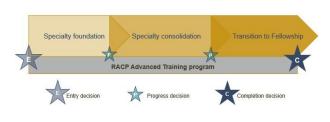
CURRICULUM STANDARDS

The <u>curriculum standards</u> are summarised as 20 learning goals. The learning goals articulate what trainees need to be, do and know, and are assessed throughout training.

BE	1. Professional behaviours
DO	 Team leadership Supervision and teaching Quality improvement Clinical assessment and management Management of transitions in care Emergency and longitudinal care Communication with patients Prescribing Investigations and procedures Clinic management
KNOW	 Scientific foundations and basic principles of sexual health medicine Infections HIV Dermatological conditions Sexual function and dysfunction Reproductive health Gender-affirming care Sexual assault Public health

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 OR hold Fellowship from an eligible medical college
- general medical registration with the Medical Board of Australia if applying in Australia, or a medical registration with a general scope of practice with the Medical Council of New Zealand and a practising certificate if applying in Aotearoa New Zealand.
- an Advanced Training position in an RACPaccredited training setting or network or an approved non-core 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

Developmental and psychosocial training (Paediatrics and child health only)

1 rotation plan per rotation Fertility regulation course HIV s100 prescriber course Reproductive health logbook HIV medicine 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

Laboratory methods (recommended)

Elective logbook (recommended)

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
- 1 exit examination

<u>curriculum@racp.edu.au</u>

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

Sexual health medicine is the specialised area of medical practice concerned with healthy sexual relationships, including freedom from sexually transmitted infections (STIs) and their sequelae, unplanned pregnancy, coercion, and physical or psychological discomfort associated with sexuality and gender. Its practice encompasses the individual, population, social, cultural, interpersonal, microbial, and immunological factors that contribute to STIs, sexual assault, sexual dysfunction, and fertility regulation.

Sexual health medicine is concerned with the promotion of the sexual health of the community by identifying and minimising the impact of the above problems through education, stigma reduction, behavioural change, advocacy, targeted medical and laboratory screening, diagnostic testing, clinical service provision, surveillance, and research. The practice of sexual health medicine embraces two perspectives: a clinical perspective and a public health approach to sexual health.

Sexual health physicians are specialists in sexual and reproductive health care throughout the life course, including sexual function and wellbeing, the management of STIs and blood-borne viruses (BBVs), sexual assault, aspects of medical gynaecology and dermatology, abortion, unplanned pregnancy, contraception, and psychosexual care.

Sexual health specialists most commonly provide care in outpatient settings, including public and private sexual health clinics, sexual assault services, HIV clinics, priority services for marginalised communities, and reproductive / family planning services.

Sexual health specialists have specific professional skills, including:

- **applying a multidisciplinary approach.** Sexual health specialists work collaboratively with other health professionals and within a team.
- working sensitively with a variety of patients. Sexual health specialists develop an ability to deal with patients from a diverse range of backgrounds in a professional and empathetic manner.

- **strong communication skills.** Sexual health specialists must develop a personable interviewing technique and an ability to relate to patients from all walks of life. It is also essential that they appreciate when referral to a more appropriate or more qualified practitioner in a particular subspecialty is necessary.
- managing resources for the benefit of patients and communities. Sexual health specialists develop and implement health promotion activities in relation to sexual health and apply public health principles to the prevention of STIs and BBVs.
- **applying a scholarly approach.** Sexual health specialists conduct academic research to discover better ways of understanding, diagnosing, treating, and preventing disease, applying research to improve the management of patients.

Supervising committee

The program is supervised by the Training Committee in Sexual Health Medicine.

Qualification

Trainees who successfully meet the completion standards and criteria of this program will be awarded Fellowship of the Australasian Chapter of Sexual Health Medicine.

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 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.
 - 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

Entry attributes	 Prospective trainees can demonstrate: a commitment and capability to pursue a career as a physician in sexual health 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 OR hold Fellowship from an eligible medical college general medical registration with the Medical Board of Australia if applying in Australia, or a medical registration with a general scope of practice with the Medical Council of New Zealand and a practising certificate if applying in Aotearoa New Zealand. an Advanced Training position in an RACP-accredited training setting or network or an approved non-core 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 <u>learning goal</u> 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 20 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
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 or 2 domains 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 (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
Know: Knowledge guides	Has heard of some of the topics in this knowledge guide that underpin specialty practice <i>(heard of)</i>	Knows the topics and concepts in this knowledge guide that underpin specialty practice (knows)	Knows how to apply the knowledge in this knowledge guide to specialty practice (knows how)	Frequently shows they can apply knowledge in this knowledge guide to specialty practice (shows how)	Consistently applies sound knowledge in this knowledge guide to specialty practice (does)

		Entry criteria	eria Progression criteria		Completion criteria
	Learning goals	Entry into training At entry into training, trainees will:	Specialty foundation By the end of this phase, trainees will:	Specialty consolidation By the end of this phase, trainees will:	Transition to fellowship By the end of training, trainees will:
Be	1. Professional behaviours	Level 5 consistently behave in line with all 10 domains of professional practice			
	2. Team leadership: Lead a team of health professionals	Level 2 be able to act with direct supervision	Level 3 be able to act with indirect supervision	Level 4 be able to act with supervision at a distance	Level 5 be able to provide supervision
	3. Supervision and teaching: Supervise and teach professional colleagues	Level 2 be able to act with direct supervision	Level 3 be able to act with indirect supervision	Level 4 be able to act with supervision at a distance	Level 5 be able to provide supervision
	Level 1 Identify and address failures in health care delivery		Level 3 be able to act with indirect supervision	Level 4 be able to act with supervision at a distance	Level 5 be able to provide supervision
	5. Clinical assessment and management: Clinically assess and manage the ongoing care of patients	Level 1 be able to be present and observe	Level 3 be able to act with indirect supervision	Level 4 be able to act with supervision at a distance	Level 5 be able to provide supervision
	6. Management of transitions in care: Manage the transition of patient care between health care professionals, providers, and contexts	Level 1 be able to be present and observe	Level 3 be able to act with indirect supervision	Level 4 be able to act with supervision at a distance	Level 5 be able to provide supervision
ß	7. Emergency and longitudinal care: Manage emergencies and coordinate the longitudinal care of patients with chronic illness and/or long-term health issues	Level 1 be able to be present and observe	Level 3 be able to act with indirect supervision	Level 4 be able to act with supervision at a distance	Level 5 be able to provide supervision
	8. Communication with patients: Discuss diagnoses and management plans with patients	Level 2 be able to act with direct supervision	Level 3 be able to act with indirect supervision	Level 4 be able to act with supervision at a distance	Level 5 be able to provide supervision
	9. Prescribing: Prescribe therapies tailored to patients' needs and conditions	Level 1 be able to be present and observe	Level 3 be able to act with indirect supervision	Level 4 be able to act with supervision at a distance	Level 5 be able to provide supervision
	10. Investigations and procedures: Select, organise, and interpret investigations and procedures	Level 1 be able to be present and observe	Level 3 be able to act with indirect supervision	Level 4 be able to act with supervision at a distance	Level 5 be able to provide supervision
	11. Clinic management : Manage an outpatient clinic	Level 1 be able to be present and observe	Level 3 be able to act with indirect supervision	Level 4 be able to act with supervision at a distance	Level 5 be able to provide supervision

		Entry criteria	Progression criteria		Completion criteria
		Entry into training	Specialty foundation	Specialty consolidation	Transition to fellowship
	Learning goals	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:
	12. Scientific foundations and basic principles of sexual health medicine	Level 1 have heard of some of the topics in this knowledge guide that underpin specialty practice (heard of)	Level 3 know how to apply the knowledge in this knowledge guide to specialty practice (knows how)	Level 4 frequently show they can apply knowledge in this knowledge guide to specialty practice (shows how)	Level 5 consistently apply sound knowledge in this knowledge guide to specialty practice <i>(does)</i>
	13. Infections	Level 1 be able to be present and observe	Level 3 be able to act with indirect supervision	Level 4 frequently show they can apply knowledge in this knowledge guide to specialty practice (shows how)	Level 5 consistently apply sound knowledge in this knowledge guide to specialty practice <i>(does)</i>
Know	14. HIV	Level 1 be able to be present and observe	Level 3 be able to act with indirect supervision	Level 4 frequently show they can apply knowledge in this knowledge guide to specialty practice (shows how)	Level 5 consistently apply sound knowledge in this knowledge guide to specialty practice <i>(does)</i>
	15. Dermatological conditions	Level 1 be able to be present and observe	Level 3 be able to act with indirect supervision	Level 4 frequently show they can apply knowledge in this knowledge guide to specialty practice (shows how)	Level 5 consistently apply sound knowledge in this knowledge guide to specialty practice <i>(does)</i>
	16. Sexual function and dysfunction	Level 1 be able to be present and observe	Level 3 be able to act with indirect supervision	Level 4 frequently show they can apply knowledge in this knowledge guide to specialty practice (shows how)	Level 5 consistently apply sound knowledge in this knowledge guide to specialty practice (does)
	17. Reproductive health	Level 1 be able to be present and observe	Level 3 be able to act with indirect supervision	Level 4 frequently show they can apply knowledge in this knowledge guide to specialty practice (shows how)	Level 5 consistently apply sound knowledge in this knowledge guide to specialty practice <i>(does)</i>
	18. Gender-affirming care	Level 1 be able to be present and observe	Level 3 be able to act with indirect supervision	Level 4 frequently show they can apply knowledge in this knowledge guide to specialty practice (shows how)	Level 5 consistently apply sound knowledge in this knowledge guide to specialty practice (does)

	Entry criteria	Progression criteria		Completion criteria
	Entry into training	Specialty foundation	Specialty consolidation	Transition to fellowship
Learning goals	At entry into training, trainees will:	By the end of this phase, trainees will:	By the end of this phase, trainees will:	<i>By the end of training, trainees will:</i>
19. Sexual assault	Level 1 be able to be present and observe	Level 3 be able to act with indirect supervision	Level 3 be able to act with indirect supervision	Level 4 frequently show they can apply knowledge in this knowledge guide to specialty practice (shows how)
20. Public health	Level 1 be able to be present and observe	Level 3 be able to act with indirect supervision	Level 4 frequently show they can apply knowledge in this knowledge guide to specialty practice (shows how)	Level 5 consistently apply sound knowledge in this knowledge guide to specialty practice (does)

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	Before the end of Advanced Training, if not completed during Basic Training.
Fertility regulation course	Before the end of Advanced Training.
HIV s100 prescriber course	Before the end of Advanced Training.
Reproductive health logbook	Before the end of Advanced Training.
HIV medicine logbook	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.
Laboratory methods (recommended)	Recommended completion before the specialty consolidation phase.
Elective logbook (recommended)	Recommended completion over the course of Advanced Training.
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 <u>research project</u>	Before the end of Advanced Training. Recommended submission before the transition to fellowship phase.
1 <u>exit examination</u>	During the final year of Advanced Training

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.

Developmental & psychosocial training (paediatric and 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

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 3-month full-time equivalent 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

Developmental & psychosocial (D&P) training is currently a time-based requirement consisting of a minimum of six months full-time equivalent (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 (6 months fulltime equivalent). This can be completed as:
 - o 2 x 3-month terms, or
 - 1 x 6-month block, or
 - a continuous part-time position, such as 2.5 days a week for 12 months (A conglomerate of experience for shorter time periods adding up to 6 months will not be accepted.)
- Option B: A prospectively approved rural position (6 months full-time equivalent). Complete the 6 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:
 - o 2 x sessions a week for 18 months, or
 - 1 x session a week for 3 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
- 3 x referenced case reports/essays demonstrating comprehensive understanding of 3 different issues in the areas of psychosocial training – for example rehabilitation or community paediatrics (1500 to 2000 words each); or
- Completion of the Griffith Mental Developmental Scales course.

Other prospectively approved modules may be considered.

Apply

Contact <u>SHMedTraining@racp.edu.au</u> to apply for approval of D&P Training.

Resources

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

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 <u>TMP</u>.

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 requirements					
Learning goals	Professional experience	Rotation 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	х	х	х	х	х
3. Supervision and teaching	Could align	х	х	Will align	х	х
4. Quality improvement	Could align	х	х	х	х	х
5. Clinical assessment and management	Could align	х	х	х	х	х
6. Management of transitions in care	Could align	Х	х	Х	x	х
7. Emergency and longitudinal care	Could align	Х	х	Х	x	х
8. Communication with patients	Could align	х	Х	х	x	х
9. Prescribing	Could align	x	х	х	x	х
10. Investigations and procedures	Could align	x	х	х	x	х
11. Clinic management	Could align	х	х	х	Х	Will align

12. Scientific foundations and basic principles of sexual health medicine	Could align	х	х	х	x	х
13. Infections	Could align	х	х	х	х	х
14. HIV	Could align	х	х	х	х	Х
15. Dermatological conditions	Could align	х	х	х	х	х
16. Sexual function and dysfunction	Could align	х	х	х	х	х
17. Reproductive health	Could align	х	х	х	х	х
18. Gender-affirming care	Could align	х	Х	Х	x	х
19. Sexual assault	Could align	х	Х	Х	x	Х
20. Public health	Could align	х	х	х	х	х

	Learning requirements						
Learning goals	Fertility regulation course	HIV s100 prescriber course	Reproductive health logbook	HIV logbook	Laboratory methods (recommended)	Epidemiology course (recommended)	Elective logbook (recommended)
1. Professional behaviours	х	х	х	х	х	х	х
2. Team leadership	х	х	х	х	Х	х	Х
3. Supervision and teaching	х	х	х	Х	Х	х	Х
4. Quality improvement	х	х	х	х	Х	х	Х
5. Clinical assessment and management	Could align	Could align	Could align	Could align	Х	х	Could align
6. Management of transitions in care	Could align	Could align	Could align	Could align	Х	х	Could align
7. Emergency and longitudinal care	Could align	Could align	Could align	Could align	х	х	Could align
8. Communication with patients	Could align	Could align	Could align	Could align	Х	х	Could align
9. Prescribing	Could align	Could align	Could align	Could align	Х	х	Could align
10. Investigations and procedures	Could align	Could align	Could align	Could align	Will align	х	Could align
11. Clinic management	х	х	х	Х	Х	х	Х
12. Scientific foundations and basic principles of sexual health medicine	Could align	Could align	х	х	Will align	Could align	Could align
13. Infections	Could align	Could align	х	х	Will align	Could align	Could align
14. HIV	Could align	Will align	х	Will align	Could align	x	Could align
15. Dermatological conditions	Could align	Could align	х	х	Could align	х	Could align
16. Sexual function and dysfunction	Could align	Could align	х	х	х	х	Could align
17. Reproductive health	Will align	Could align	Will align	х	Х	x	Could align

18. Gender-affirming care	Could align	Could align	х	х	х	х	Could align
19. Sexual assault	Could align	Could align	Х	х	х	х	Could align
20. Public health	Could align	Could align	Х	х	х	Will align	Could 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. Exceptions will be considered on a case-by-case basis.
- Complete at least 24 months of training in accredited training settings in Australia and/or Aotearoa New Zealand.

Experiential training

- Minimum 24 months FTE in accredited core sexual health medicine training positions, which must include:
 - at least 6 months HIV medicine
 - Maximum 12 months in approved non-core training, such as, but not limited to:
 - o reproductive health
 - o forensic and medical sexual assault
 - o infectious diseases
 - obstetrics and gynaecology
 - o reproductive health
 - o sexual dysfunction
 - o transgender and gender affirming medicine
 - research related to SHM

Rotation plan

•

Requirement

1 x 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 <u>TMP</u> under the training plan tab.

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.

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.

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.

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.

Fertility regulation course

Requirement

1 x fertility regulation course over the course of training. Trainees must complete either:

- Family Planning Alliance Australia (FPAA) National Certificate in Sexual & Reproductive Health for Doctors theory only course
- Royal Australian and New Zealand College of Obstetricians and Gynaecologists (RANZCOG) Certificate of Women's Health

Description

The FPAA course is offered over a five-month period. It comprises self-paced online learning which includes pre-reading, online activities, compulsory interactive live case studies sessions and viewing pre-recorded lectures. The RANZCOG course comprises of workplace-based assessments, logbook requirements and a written examination.

Purpose

The course enables trainees to expand their knowledge and develop their clinical skills in reproductive and sexual health, including contraception, cervical screening, sexually transmissible infections (STIs), menopause, common gynaecological conditions, and other topics in reproductive and sexual health.

How to complete it

Register for either the FPAA course or the RANZCOG course.

Trainees need to submit certificate of completion to SHMedTraining@racp.edu.au

HIV s100 prescriber course

Requirement

1 x HIV s100 prescriber course at least once during Advanced Training.

Description

This four-week Australasian Society for HIV Medicine (ASHM) facilitated course is comprised of online-self paced activities and weekly interactive case study webinars. Upon successful completion of this training and the associated post-course assessment, eligible participants may apply to the relevant state departments of health for authority to prescribe section 100 drugs for the management of HIV in Australia.

Purpose

The course provides a general understanding regarding the science and management of HIV infection.

How to complete it

Register for the ASHM Health HIV s100 Prescriber Course.

Trainees need to submit certificate of completion to SHMedTraining@racp.edu.au

Reproductive health logbook

Requirement

1 x 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.

HIV medicine logbook

Requirement

1 x logbook, completed by the end of Advanced Training. Recommended completion during the trainees 6-month HIV rotation.

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 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 <u>Advanced Training Orientation resource</u> 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 <u>TMP</u>.

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 <u>Supervisor Professional Development Program</u> 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 <u>Australian Aboriginal</u>, <u>Torres Strait Islander and Māori Cultural</u> <u>Competence and Cultural Safety resource</u> 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 <u>TMP</u>.

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 <u>RACP Health Policy</u>, <u>Systems and Advocacy resource</u> 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 <u>TMP</u>.

Laboratory methods (recommended)

Requirement

Recommended completion during the specialty foundation phase.

Description

The trainee can organise a mutually beneficial time to complete the learning activity with their clinics laboratory staff. The activity takes approximately half a day. A Laboratory Methods Approval Form must be signed by their supervisor as evidence of completion.

Purpose

To ensure trainees obtain hands-on experience with how the investigations they order are performed and how this affects the reliability of the result.

How to complete it

A <u>Laboratory Methods Approval Form</u> (DOC) must be signed by your supervisor as evidence of completion, and submitted to <u>SHMedTraining@racp.edu.au</u>.

Elective logbook (recommended)

Requirement

1 x logbook, recommended completion 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.

Recommended resources

- Epidemiology course, such as:
 - University of Sydney
 - PUBH5010 Epidemiology Methods and Uses
 - <u>CEPI5100 Introduction to Clinical Epidemiology</u>
 - University of Melbourne
 - Graduate Certificate in Sexual Health
 - o James Cook University
 - TM5515 Epidemiology for Public Health
 - o University of Queensland
 - PUBH7600 Introduction to Epidemiology
 - University of New South Wales
 - PHCM9794 Foundations of Epidemiology
 - PHCM9498 Epidemiology and Statistics for Public Health
 - University of Auckland

- POPLHLTH 708 Epidemiology
- University of Otago, Wellington
 - PUBH721 Advanced Epidemiology
- RACP Communication Skills resource
- RACP Ethics resource
- RACP Introduction to Leadership, Management and Teamwork resource
- RACP Research Projects resource
- <u>RACP eLearning resources</u>
- <u>RACP curated collections</u>

Teaching

Supervision

Rotation supervisors

Core and non-core training

- 2 individuals for the role of Education Supervisor
 - Minimum of 1 supervisor per rotation who is a Fellow of the AChSHM*

* During non-core training, may be a third/remote supervisor.

Nominating eligible supervisors

Trainees will be asked to nominate rotation supervisors as part of their learning plan. Trainees are required to nominate <u>eligible supervisors</u> who meet the above requirements.

A list of eligible supervisors can be found on <u>MyRACP</u>. The list is not available for post-Fellowship trainees. Post-Fellowship trainees can <u>contact us</u> 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.

	Assessment tools					
Learning goals	Learning capture	Observation capture	Progress report	Research project	Exit exam	
1. Professional behaviours	Could assess	Could assess	Will assess	Will assess	Could assess	
2. Team leadership	Could assess	Could assess	Will assess	х	Could assess	
3. Supervision and teaching	Could assess	Could assess	Will assess	х	Could assess	
4. Quality improvement	Could assess	Could assess	Will assess	Could assess	Could assess	
5. Clinical assessment and management	Could assess	Could assess	Will assess	Х	Could assess	
6. Management of transitions in care	Could assess	Could assess	Will assess	Х	Could assess	
7. Emergency and longitudinal care	Could assess	Could assess	Will assess	Х	Could assess	
8. Communication with patients	Could assess	Could assess	Will assess	Х	Could assess	
9. Prescribing	Could assess	Could assess	Will assess	Х	Could assess	
10. Investigations and procedures	Could assess	Could assess	Will assess	Х	Could assess	
11. Clinic management	Could assess	Could assess	Will assess	х	Could assess	
12. Scientific foundations and basic principles of sexual health medicine	Could assess	Could assess	Will assess	x	Could assess	
13. Infections	Could assess	Could assess	Will assess	х	Could assess	

14. HIV	Could assess	Could assess	Will assess	х	Could assess
15. Dermatological conditions	Could assess	Could assess	Will assess	х	Could assess
16. Sexual function and dysfunction	Could assess	Could assess	Will assess	х	Could assess
17. Reproductive health	Could assess	Could assess	Will assess	х	Could assess
18. Gender-affirming care	Could assess	Could assess	Will assess	х	Could assess
19. Sexual assault	Could assess	Could assess	Will assess	х	Could assess
20. Public health	Could assess	Could assess	Will assess	х	Could assess

Learning capture

Requirement

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

Refer to <u>RACP Flexible Training Policy</u> 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 <u>TMP</u> 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 <u>RACP Flexible Training Policy</u> 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 <u>TMP</u> under the assessment requirements tab.

For more information on how to complete an observation capture review the <u>training</u> resources.

Progress report

Requirement

4 x progress reports per phase of training, minimum 1 every 3 months.

Refer to <u>RACP Flexible Training Policy</u> for further 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 x 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. Broadly relevant can be defined as topics that can enhance, complement and inform trainees' practice in the chosen specialty.

Three types of research projects are accepted:

- 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 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 <u>Research.Project@racp.edu.au</u> by one of the following deadlines:

- 31 March
- 15 June
- 15 September

Exit examination

Requirement

Complete during final year of Advanced Training

Description

The exit exam is an in-person assessment that is offered once a year.

Purpose

The exit exam will evaluate trainees' overall knowledge on the practice of sexual health medicine and ensure that all trainees have achieved a suitable level of knowledge for safe practice.

How to complete it

Visit <u>AChSHM Exit Assessment | RACP</u> for key dates and registration details.

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
 - $\circ\;$ actively seek and reflect on feedback from assessors, supervisors, and other colleagues
 - plan, reflect on, and manage their learning and progression against the curricula standards
 - \circ 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 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

See <u>RACP Online Learning</u> 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