

Basic Training in Victoria

Joint statement from the Royal Australasian College of Physicians (RACP); Department of Health, Victoria; Postgraduate Medical Council of Victoria (PMCV); Australian Medical Council (AMC)

Wednesday, 29 January 2025

Background

As we collectively prepare for the first year of full implementation of the revised [National Framework for Prevocational \(PGY1 and PGY2\) Medical Training](#) (NFPMT) in 2025, we understand many of you have questions about how this will intersect with Basic Training. These questions come at a time of another significant change, the implementation of the [RACP's new Basic Training Programs](#).

This statement seeks to address some common questions and has been developed in partnership with the Postgraduate Medical Council of Victoria (PMCV), Department of Health, Victoria, the Australian Medical Council (AMC) and representative Directors of Physician Education and trainees from Victorian training settings.

The RACP earlier released a [series of FAQs](#) regarding prevocational training and entry to Basic Training. This statement builds upon these FAQs within the Victorian context.

How will the NFPMT and Basic Training be delivered alongside each other?

PGY2 doctors may enrol in a Basic Physician Training program in their first year of full registration without completing the second year of the National Framework for PGY1 and PGY2, provided college and other local entry criteria are satisfied. If a trainee is enrolled in RACP Basic Training Year 1 (BPT1), they are not required to complete the second year of the NFPMT.

However, we remain mindful of:

- the need to support flexibility in trainee career pathways and the concern that doctors-in-training who do not gain the PGY2 Certificate of Completion via the NFPMT may be disadvantaged
- system capacity constraints in delivering both the NFPMT and Basic Training as stand-alone programs

We have collectively identified a general pathway forward for postgraduate medical training in Victoria which features:

1. the retention of RACP eligibility criteria for entry to Basic Training as PGY2 and above for 2025 recruitment activities for positions commencing in 2026;
2. collaboration to maximise the alignment of training requirements of both PGY2 of the NFPMT and BPT1, with the intention for some PGY2 doctors-in-training to meet the requirements of both programs concurrently;
3. the exploration of opportunities for a streamlined and networked approach to recruitment/selection of trainees across Victoria.

These are discussed in more detail in the sections overpage.

1. Eligibility for entry to Basic Training remains unchanged from PGY2 and above

The RACP's policy on eligibility for entry to Basic Training remains unchanged, allowing doctors in PGY2 and above to be accepted for training. Doctors in their second postgraduate year are able to commence RACP Basic Training, subject to meeting other unaltered eligibility criteria.

Employing health services will have additional eligibility and selection criteria. When designing these criteria, health services are strongly advised to consider how the criteria will ensure:

- educationally justified training pathway durations
- increased flexibility throughout training pathways for doctors-in-training
- competency-based (as opposed to primarily time-based) approaches to determining entry to and progression through programs for doctors-in-training
- patient safety and socially accountable training programs
- trainee and educator wellbeing
- responsible use of training capacity across our health systems
- transparent and timely communication about changes relating to doctors-in-training and other key stakeholders

Where changes that extend training are being considered, transparent stakeholder engagement (including with doctors-in-training) is expected to occur early and throughout all phases of the discussion.

The Department of Health advises that any major change to eligibility criteria which prolongs training pathways for a large number of trainees and may have notable financial implications, would require workforce planning and departmental involvement if any additional budget is required.

2. Intention for co-delivery of NFPMT and Basic Training in PGY2

Education leaders advise that managing two side-by-side discrete cohorts in PGY2 will be difficult in terms of rotation allocations and selection. Meanwhile, doctors-in-training advise that they want flexibility to move between programs, and no further extension to current training pathway durations.

We will undertake further work to address this challenge by firstly mapping the PGY2 year requirements across the two programs to identify opportunities whereby both sets of requirements may be met concurrently. This will commence in early 2025 with a goal to establish a number of co-compliant rotation combinations/plans. Work will also be undertaken to provide streamlined processes that recognise prior learning for any rotations completed by doctors in PGY2 (noting that some may have been completed while in a BPT1 position).

3. Centralising selection of trainees for RACP training programs in Victoria

There is a wide range of models currently in use for the selection/recruitment for doctors-in-training in Victoria. Centralising selection/recruitment may have benefits in terms of equity, workforce distribution, data management, process streamlining and by providing a foundation for re-establishing networked training pathways. We recognise some risks in centralised approaches that will need careful management and will seek to address these through co-design and appropriate implementation planning. The PMCV has indicated that it will collaborate with all stakeholders in the exploration of potential models and aid co-design of a process for centralising selection/recruitment for RACP programs in Victoria. There will be more discussion and consultation on this throughout 2025.

Thank you for your collaborative mindset

We've heard from Victorian educational leaders and doctors-in-training over several years about these issues. It has taken some time to gain traction, as the issues and solutions are complex, with numerous stakeholders. Please collaborate with us as we navigate solutions. We are united by common goals - ensuring quality education and supporting trainee and educator wellbeing, both of which go hand-in-hand with high-quality healthcare services.

You can direct your questions and feedback via membersupport@racp.edu.au in the first instance. As we are in the early days of this collaborative work, we may not be able to answer all your queries just yet, but we'll do our best to keep you well informed and engaged.