Education renewal

Program handbook

Advanced Training in Geriatric Medicine (Adult Internal Medicine)



About this document

This program handbook outlines the learning, teaching, and assessment (LTA) programs for Advanced Training in Geriatric Medicine (Adult Internal Medicine) for trainees and supervisors.

This handbook should be used in conjunction with the Advanced Training in Geriatric Medicine (Adult Internal Medicine) curriculum standards.

For more information or to provide feedback contact <u>curriculum@racp.edu.au</u>.

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Program overview

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.



Learning, teaching, and assessment (LTA) 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 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.



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.

Learning goals

The <u>curriculum standards</u> are summarised as **26** learning goals. Learning and assessment activities are linked to the learning goals to ensure that these activities align with the standards and trainees are able to demonstrate learning across the breadth of the curriculum.

The learning goals articulate what trainees need to be, do, and know, and are assessed throughout training on a five-point scale.

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		Completion criteria
	Learning goals	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 4 need to work on behaviour in 1 or 2 domains of professional practice	Level 5 consistently behave in line with all 10 domains of professional practice	Level 5 consistently behave in line with all 10 domains of professional practice
	1. Team leadership: Lead a team of health professionals	Level 2 be able to act with direct supervision	Level 4 be able to act with supervision at a distance	Level 5 be able to provide supervision
	2. Teaching and supervision: Supervise and teach professional colleagues	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. Quality improvement: Identify and address failures in healthcare delivery	Level 1 be able to be present and observe	Level 4 be able to act with supervision at a distance	Level 5 be able to provide supervision
	4. Clinical assessment and management: Clinically assess and manage the ongoing care of patients	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. Management of transitions in care: Manage the transition of patient care between health care professionals, providers, and contexts	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
ork tasks)	6. Acute care : Manage the early care of acutely unwell patients	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
Do (worl	7. Longitudinal care: Manage and coordinate the longitudinal care of patients with chronic illness, disability and/or long-term health issues	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 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 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: Select, organise, and interpret investigations	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 2 be able to act with direct supervision	Level 4 be able to act with supervision at a distance	Level 5 be able to provide supervision
	12. End of life care: Manage the care of patients at the end of their lives	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

	Progression criteria		Completion criteria
Learning goals	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:
13. Cognitive assessment and management: Assess and manage patients with possible cognitive impairment	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
14. Comprehensive geriatric assessment: Assess patients using comprehensive geriatric assessment	Level 2 be able to act with direct supervision	Level 4 be able to act with supervision at a distance	Level 5 be able to provide supervision
15. Complex family meetings : Lead and manage family meetings relating to patients' care	Level 2 be able to act with direct supervision	Level 4 be able to act with supervision at a distance	Level 5 be able to provide supervision

		Progression criteria		Completion criteria
	Learning goals	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:
	1. Clinical and social sciences	Level 3 know how to apply the knowledge in this knowledge guide to patient care (knows how)	Level 4 frequently show they can apply knowledge in this knowledge guide to patient care (shows how)	Level 5 consistently apply sound knowledge in this knowledge guide to patient care (does)
	2. Cognition and mental state	Level 2 know the topics and concepts in this knowledge guide that underpin patient care (knows)	Level 4 frequently show they can apply knowledge in this knowledge guide to patient care (shows how)	Level 5 consistently apply sound knowledge in this knowledge guide to patient care (does)
	3. Falls and mobility	Level 2 know the topics and concepts in this knowledge guide that underpin patient care (knows)	Level 4 frequently show they can apply knowledge in this knowledge guide to patient care (shows how)	Level 5 consistently apply sound knowledge in this knowledge guide to patient care (does)
Know (Knowledge Guides)	4. Frailty and functional decline	Level 2 know the topics and concepts in this knowledge guide that underpin patient care (knows)	Level 4 frequently show they can apply knowledge in this knowledge guide to patient care (shows how)	Level 5 consistently apply sound knowledge in this knowledge guide to patient care (does)
	5. Continence	Level 2 know the topics and concepts in this knowledge guide that underpin patient care (knows)	Level 4 frequently show they can apply knowledge in this knowledge guide to patient care (shows how)	Level 5 consistently apply sound knowledge in this knowledge guide to patient care (does)
	6. Pain management	Level 2 know the topics and concepts in this knowledge guide that underpin patient care (knows)	Level 4 frequently show they can apply knowledge in this knowledge guide to patient care (shows how)	Level 5 consistently apply sound knowledge in this knowledge guide to patient care (does)
	7. Neurological disorders	Level 2 know the topics and concepts in this knowledge guide that underpin patient care (knows)	Level 4 frequently show they can apply knowledge in this knowledge guide to patient care (shows how)	Level 5 consistently apply sound knowledge in this knowledge guide to patient care (does)
	8. Specialty medical conditions and ageing	Level 2 know the topics and concepts in this knowledge guide that underpin patient care (knows)	Level 4 frequently show they can apply knowledge in this knowledge guide to patient care (shows how)	Level 5 consistently apply sound knowledge in this knowledge guide to patient care (does)
	9. Peri- and postoperative assessment	Level 2 know the topics and concepts in this knowledge guide that underpin patient care (knows)	Level 4 frequently show they can apply knowledge in this knowledge guide to patient care (shows how)	Level 5 consistently apply sound knowledge in this knowledge guide to patient care (does)

	Progression criteria		Completion criteria
Learning goals	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:
10. Rehabilitation of specific conditions as applied to ageing	Level 2 know the topics and concepts in this knowledge guide that underpin patient care (knows)	Level 3 know how to apply the knowledge in this knowledge guide to patient care (knows how)	Level 4 frequently show they can apply knowledge in this knowledge guide to patient care (shows how)

Training program requirements summary

Entry and registration requirements

What do I need to do?	When do I need to do it?
1 registration form	At the start of each phase of training

Prospective trainees can demonstrate:

Entry attributes	Prospective trainees can demonstrate:
	 a commitment and capability to pursue a career as a physician in geriatric 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	 Completed RACP Basic Training, including the Written and Clinical Examinations.
	 General medical registration with the Medical Board of Australia if applying in Australia, or a medical registration with a general scope of practice with the Medical Council of New Zealand and a practising certificate if applying in Aotearoa New Zealand.
	 An Advanced Training position in an RACP-accredited training setting or network.

Learning program requirements

What do I need to do?	When do I need to do it?			
Clinical experience				
 Complete at least 36 months of relevant professional experience in approved rotations in at least 2 different training settings. 	 In any sequence over the course of training. 			
Location of training				
 Complete training in at least 2 different accredited training settings. Complete at least 24 months of training in accredited training settings in Australia and/or Aotearoa New Zealand. Non-accredited settings: training at non-accredited settings can only be undertaken for non-geriatric medicine rotations. 	 In any sequence over the course of training. 			
Experiential training				
Overview				

The Advanced Training Program in Geriatric Medicine allows adequate time for you to gain the necessary learning experiences across a range of relevant rotations during your 3-year total training period (36 months FTE).

There is a wide range of training options reflecting the diversity of practice undertaken by geriatricians. You're advised to plan your whole Advanced Training Program while maintaining flexibility.

Advanced Training is differentiated from service commitments on the basis that training follows a prospectively approved training plan in accredited settings, under the supervision of an accredited supervisor.

Your rotation duration should be enough to ensure that your training needs can be met – a minimum of 3 months.

Rotations less than 3 months long, relieving terms or night cover won't satisfy the criteria for training in Australia and Aotearoa New Zealand.

18-36 months of geriatric medicine	of training.
 rotations across a range of disciplines. A minimum of 18 months must be spent in geriatric medicine rotations. These include but are not limited to: acute aged care ambulatory care community care geriatric emergency medicine geriatric rehabilitation orthogeriatrics perioperative medicine stroke rehabilitation Up to 18 months of training in geriatric medicine or other complementary disciplines (it is recommended that no more than 6 months are in any 1 subspecialty unless dual training). These disciplines include but are not limited to: general medicine rehabilitation psychiatry of old age 12 months of training in other areas of relevance to geriatric medicine, including research, education, and other subspecialties of relevance. Complete training in at least 2 different accredited training settings. 	

Overseas training

If you intend to undertake training outside Australia or Aotearoa New Zealand, enquire about the suitability of the training position with the ATC/ATS well before the prospective approval of training application period.

A period of overseas training must comply with the requirements of training outlined in the handbook, including completion of work-based learning and assessments, supervision, and achievement of learning objectives as outlined in the Curriculum Standards for Geriatric Medicine. Once the ATC/ATS has confirmed the suitability of the post, you may complete the application process for prospective approval of training as normal.

There are many relief organisations where supervised clinical experience can be gained. This type of experience is believed to enhance trainees' breadth and depth of knowledge and allows for opportunities not possible in an Australian or Aotearoa New Zealand training setting. All trainees, if undertaking such a position, should consider having an Australian or Aotearoa New Zealand co-supervisor they communicate with at least every 3 months.

3 required learning courses	
RACP Induction to Advanced Training 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 <u>Supervisor Professional</u> Development Program	• Before the end of Advanced Training.
	*Resource to be developed.

Teaching program requirements

What do I need to do?	When do I need to do it?
Name 2 individuals for the role of Education Supervisor for 36 months of training.	 Each accredited or approved training rotation.
 1 supervisor per rotation, who can be a practising geriatrician or Fellow of the RACP (or relevant College) (as appropriate to the rotation) 1 clinical supervisor per rotation, who is a practising geriatrician and Fellow of the RACP 	
Recommended: wherever possible, trainees should maintain the same Education Supervisors throughout a phase of training. No exemptions apply to dual trainees.	
Nominate 1 RACP training committee to act as a Progress Review Panel	• 1 over the course of training.
Name 1 individual for the role of Research Project Supervisor (may or may not be the Education Supervisor).	 1 over the course of training.

□ Assessment program requirements

What do I need to do?	When do I need to do it?
	Per phase of training (i.e., each year)
1 learning plan	• At the start of each phase training and reviewed every 3 months.
12 learning captures, across the range of learning goals	Minimum 1 per month.
12 observation captures, across the range of learning goals	Minimum 1 per month.
4 progress reports	 Minimum of 1 every 3 months. (Note: final progress report for each phase includes end-of-phase review.)
	Once over the course of training (if passed)
1 research project proposal	• Submitted by the end of the Specialty foundation phase.
1 research project	• Submitted for marking before the start of the Transition to Fellowship phase.

The RACP has set these as the minimum assessment requirements, though more work-based assessments are encouraged.

See <u>Appendix 1</u> for details on each of the learning and assessment tools.

Program requirements by phase of Advanced Training

Specialty entry phase



Purpose

• Orient trainees and confirm their readiness to progress in their Advanced Training specialty.



Duration

• 12 months full-time equivalent (FTE).



Entry attributes and criteria

Entry attributes

Prospective trainees can demonstrate:

- the commitment and capability to pursue a career as a physician in geriatric 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

- Completed RACP Basic Training, including the Written and Clinical Examinations.
- An Advanced Training position in an RACP-accredited training setting or network.
- 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.



Learning program

- 12 months' FTE relevant professional experience in approved training rotations.
- Required learning courses:
 - » RACP Induction to Advanced Training resource*
 - » Health Policy, Systems and Advocacy resource*^
- Recommended learning courses:
 - » RACP Research Projects resource
 - » RACP <u>eLearning resources</u>
 - » RACP curated collections

*Resource to be developed. *Required over the course of Advanced Training.



Teaching program

- 2 named individuals for the role of Education Supervisor:
 - » 1 supervisor per rotation, who can be a practising geriatrician or Fellow of the RACP (or relevant College) (as appropriate to the rotation)
 - » 1 clinical supervisor per rotation, who is a practising geriatrician and Fellow of the RACP
- 1 nominated **RACP training committee** to act as a Progress Review Panel
- 1 named individual for the role of Research Project Supervisor (may or may not be the Education Supervisor)
- Supplementary resources for **supervisors**:
 - » Supervisor Professional Development Program
 - » RACP Research Supervision resource
 - » RACP Training Support resource
 - » RACP Creating a Safe Workplace resource
- Supplementary resources for training settings and networks:
 - » Training provider standards for clinical training programs
 - » Training network principles
 - » RACP Trainee Selection and Recruitment guide



Assessment program

- **12** Learning captures (minimum of ~1 per month) across the range of learning goals
- **12** Observation captures (minimum of ~1 per month) across a range of learning goals
- **1** Learning plan, reviewed 3-monthly
- **4** Progress reports (minimum 1 per 3 months)
- **1** Research project proposal (by the end of the Specialty foundation phase)



Progression criteria

To progress to the Specialty consolidation phase, trainees can demonstrate:

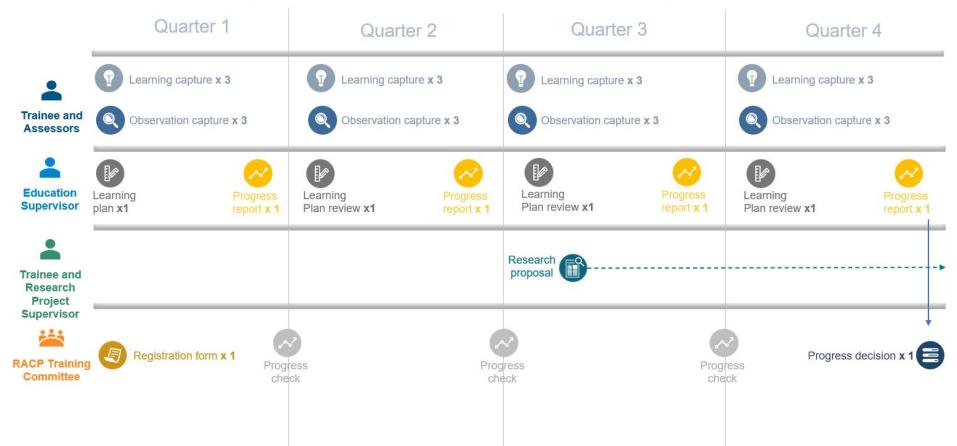
- the ability to plan and manage their learning and to complete their learning and assessment requirements in a timely manner
- achievement of the learning goals to the levels outlined in the progression criteria

It is **recommended** that trainees the following learning courses (if not completed previously):

- » RACP Communication skills resource
- » RACP Australian Aboriginal, Torres Strait Islander and Māori Cultural Competence resource
- » RACP Ethics and Professional Behaviour resource
- » RACP Leadership, Management, and Teamwork resource

If a trainee cannot demonstrate they have satisfied the above criteria, they need to continue in their current phase and complete a learning plan to focus on areas in which they need to improve.

Specialty foundation phase



Specialty consolidation phase



Continue trainees' professional development in the specialty and support progress towards the learning goals.



Duration

• 12 months full-time equivalent (FTE).



Prospective trainees can demonstrate:

- certification of the Specialty foundation phase by the training committee overseeing the Specialty consolidation phase
- an Advanced Training position in an RACP-accredited training setting or network



Learning program

- 12 months' FTE professional experience in approved training rotations.
- Required learning courses:
 » Health Policy, Systems and Advocacy resource*^
- Recommended learning course:
 » RACP Communicating Risks and Benefits resource

*Resource to be developed. ^Required over the course of Advanced Training.



Teaching program

• As per Specialty foundation phase.

Assessment program

- **12** learning captures (minimum of ~1 per month) across the range of learning goals.
- **12** observation captures (minimum of ~1 per month) across a range of learning goals.
- **1** learning plan, reviewed 3-monthly.
- **1** research project.
- 4 progress reports (minimum 1 per 3 months).



Progression criteria

To progress to the Transition to Fellowship phase, trainees can demonstrate: • submission of the Research project:

- w there will be an opportunity to re-submit the research project in the final phase of training if requested by the Advanced Training Committee
- 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 progression criteria

If a trainee cannot demonstrate they have satisfied the above criteria, they need to continue in their current phase and complete a learning plan to focus on areas in which they need to improve.

Specialty consolidation phase



Transition to Fellowship phase



- Confirm trainees' achievement of the curriculum standards, completion of Advanced Training, and admission to Fellowship.
- Support trainees' transition to unsupervised practice.



Duration

12 months full-time equivalent (FTE).



Entry criteria

Prospective trainees can demonstrate:

- certification of the Specialty consolidation phase by the training committee overseeing the Transition to Fellowship phase
- submission of 1 research project
- an Advanced Training position in an RACP-accredited training setting or network



• 12 months' FTE **professional experience** in approved training rotations.



Teaching program

• As per Specialty foundation phase.



Assessment program

- **12** learning captures (minimum of ~1 per month) across the range of learning goals.
- **12** observation captures (minimum of ~1 per month) across a range of learning goals.
- **1** learning plan, reviewed 3-monthly.
- **4** progress reports (minimum 1 per 3 months).



Completion criteria

To complete the Advanced Training program, trainees can demonstrate:

- the ability to evaluate and manage their learning and to complete all requirements of training in a timely manner
- achievement of the learning goals to the levels outlined in the progression criteria
- completion of a satisfactory research project
- completion of the Supervisor Professional Development Program
- completion of the following learning courses (if not completed previously):
 - » RACP Communication skills resource
 - » RACP Australian Aboriginal, Torres Strait Islander and Māori Cultural Competence resource
 - » RACP Ethics and Professional Behaviour resource
 - » RACP Leadership, Management, and Teamwork resource

If a trainee cannot demonstrate they have satisfied the above criteria, they need to continue in their current phase and complete a learning plan to focus on areas in which they need to improve.

Transition to Fellowship phase



Appendix 1: Learning and assessment tools

A suite of tools will be used to support learning and assess the curriculum standards.

E	Registration form A College-run process to enrol trainees and assess entry attributes and criteria.
	Learning plan
	A work-based tool to facilitate the planning and review of learning goals at regular intervals.
?	Learning capture
	A trainee-driven tool to facilitate the gathering of evidence of work-based learning linked to learning goals.
	Observation capture
	Supervised observation of trainees' work-based performance, linked to learning goals.
	Research project
	Enable trainees to develop experience in research methods in a work-based context, the ability to interpret research literature and quality improvement skills, and achieve the Professional Behaviours learning goal (the Research domain).



Progress report

Assess progress against all learning goals for the quarter and the phase, and progress against the criteria to progress to the next phase.