STANDARDS

Supervisors and Teaching Posts

IN PRIMARY RURAL AND REMOTE TRAINING

Australian College of Rural and Remote Medicine

Contact details

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Acknowledgement

Table of Contents

1.   Background

The Australian College of Rural and Remote Medicine (ACRRM) is one of two medical colleges in Australia accredited to determine and uphold the standards that define and govern competent independent medical practice in the specialty of general practice. ACRRM is particularly focussed on standards that apply to appropriate and safe practice in rural and remote contexts.

The ACRRM Vocational Training Program is a four-year integrated program of clinical learning and experience. All training must take in place in accredited posts. Registrars can apply to enter the training program after completing one intern year.

The program consists of three stages of learning and experience:

Core Clinical Training (CCT) involves 12 months experience in an accredited metropolitan, regional, or rural hospital.

Primary Rural and Remote Training (PRRT) involves 24 months experience in ACRRM-accredited rural or remote posts including hospital, general practice, community, and other posts.

Advanced Specialised Training (AST) involves 12 months experience in one of ten ACRRM-specified disciplines.

2.   Introduction

This document contains the Standards for Supervisors and Teaching Posts in the Primary Rural and Remote Training years of registrar training. These standards define the characteristics required of supervisors and posts in order to engage in training ACRRM registrars for Primary Rural and Remote Training.

Separate standards apply to posts and supervisors during Core Clinical Training and each of the Advanced Specialised Training discipline posts.

ACRRM does not accredit teaching posts outside Australia. However, applications from registrars wishing to undertake a post in another country will be assessed on a case-by-case basis.

All supervision is required to be provided on site except for supervisors on the Remote Vocational Training Scheme (RVTS) and under exceptional circumstances in the Vocational Preparation Pathway (VPP) and the Independent Pathway (IP). Off site supervision for VPP and IP must be approved in advance by ACRRM.

3.   Purpose

The standards have been designed to ensure that posts provide a sufficient range and quality of clinical learning experiences to enable registrars to become competent across the ACRRM Primary Curriculum.

Indicator 8.5.1 describes the range of clinical learning experiences that registrars must gain during the PRRT years. This range of experience may be gained in a single facility that provides the full range of clinical learning experiences or by working in more than one facility with different scopes.

4.   Using the Standards

The standards are divided into criteria, which are further divided into sets of indicators. Descriptions are provided for each criterion and for each indicator within the criterion. Information is also provided regarding how each indicator will be assessed, including both the evidence required on application for provisional accreditation and the evidence required at the site visit for full accreditation.

Sites and supervisors can use these standards for self-assessment prior to applying for accreditation, and also to inform the official accreditation application and assessment process.

The standards are grouped into standards for supervisors and standards for teaching posts.

4.1   Supervisors

The standards for supervisors contain criteria relating to:

- qualifications and experience
- commitment as a teacher
- abilities as teacher, and
- commitment to supporting registrars.

4.2   Teaching posts

The standards for teaching posts contain criteria relating to:

- rural or remote location
- training resources
- a teaching plan
- clinical and office equipment
- clinical learning opportunities
- structured teaching
- organisational management, and
- evaluation of training within the post.

5.   The Accreditation Process

Supervisors and teaching posts meeting these standards are identified by the training provider and recommended to ACRRM for approval.

The steps involved in the accreditation of a Primary Rural and Remote supervisor or teaching post are as follows.

1. The training provider works with the prospective teaching post to assess suitability as a teaching post and/or supervisor for ACRRM Primary Rural and Remote Training.

2. The training provider and post complete application form and submit to ACRRM for approval.

3. ACRRM issues provisional accreditation for a period of 12 months if the post satisfactorily demonstrates in the written application that it has met the ACRRM standards. Posts with provisional accreditation can train registrars.

4. The training provider arranges a site visit within 12 months of provisional accreditation. An ACRRM endorsed surveyor must participate in the site visit.

5. The training provider will report to ACRRM and, if satisfactory, a certificate of full accreditation will be issued approving the teaching post and supervisor/s for a period of up to three years. The RTP will be notified and provided with details.

6. A grievance and appeals mechanism is available if needed.

7. ACRRM publicises practices with provisional and full accreditation to all potential registrars and rural doctors via its on online education site www.rrmeo.com.

6. Definitions

ACRRM uses the following definitions.

Registrar
An ACRRM registrar is any doctor training towards Fellowship of ACRRM.

Supervisor
A supervisor is the doctor responsible for the day to day performance of a registrar. The supervisor-registrar relationship forms the cornerstone of the enhanced apprenticeship model of learning in rural and remote general practice.

Supervision involves providing monitoring, guidance and feedback on matters of personal, professional and educational development in the context of the doctor's care of patients. This would include the ability to anticipate a doctor's strengths and weaknesses in particular clinical situations, in order to maximise patient safety.[1]

Teaching post
A teaching post refers to the environment in which the registrar trains and works under supervision. ACRRM does not define a particular practice business model or type of medical facility in which training can occur. A teaching post may be any environment which meets these standards.

A teaching post may include more than one primary location. For example, a private practice and the local hospital or an Aboriginal Medical service where the doctor provides clinical services may combine to form the "post".

ACRRM Vocational Training Program
The ACRRM Vocational Training Program is a four-year integrated program to train doctors towards ACRRM Fellowship. To successfully complete the program and obtain Fellowship of ACRRM (FACRRM) registrars must complete each of the following:

- 12 months Core Clinical Training (CCT),

- 24 months Primary Rural and Remote Training (PRRT),

- 12 months Advanced Specialised Training (AST) in one of ten ACRRM-specified disciplines,

- all summative assessment components outlined in the Primary Curriculum and in the relevant AST curriculum,

- the Primary Curriculum Procedural Skills Logbook,

- four Rural and Remote Medical Education Online (RRMEO) modules, and

- a minimum of two ACRRM approved emergency courses.

ACRRM training pathways
There are three pathways to achieve Fellowship of ACRRM:

- The Vocational Preparation Pathway delivered by Regional Training Providers in the Australian General Practice Training program.

- The Remote Vocational Training Scheme delivered by Remote Vocational Training Scheme (RVTS).

- The Independent Pathway delivered by ACRRM.

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[1] Kilminster SM, Jolly BC 2000, 'Effective supervision in clinical practice settings: a literature review'. *Medical Education*; 34: 827-840.

7. Standards for Supervisors

This section describes the criteria for accreditation of supervisors. It focuses on the capacity of individuals to provide monitoring, guidance and feedback in the patient care setting.

These supervisor standards apply to supervisors providing onsite and offsite supervision.

7.1 Criterion 1: Qualifications and experience

The supervisor must have appropriate qualifications and experience.

Indicator	Description	Evidence required
7.1.1	The supervisor demonstrates current full and unrestricted registration with the medical board of Australia. *Supervisors must have a full and unrestricted registration with the National Medical Board of Australia, without any imposed restrictions, conditions, or limitations. Any changes to registration status must be reported to the Training Provider and ACRRM.*	**Application** A current copy of the Medical Registration Certificate for each supervisor
7.1.2	The supervisor is a Fellow of ACRRM or has experience and qualifications which are assessed by ACRRM to be equivalent. *Equivalency is determined by the Non FACRRM Supervisor Accreditation Policy and point scale. Doctors who do not have Fellowship of ACRRM are required to score 16 points or more.* *See the appendix Accrediting Non-FACRRM Supervisors for more details.*	**Application** **Non FACRRM only** Curriculum vitae A copy of the Fellowship Certificate Certificates of other tertiary level training relevant to rural and remote medical practice Certificates of relevant accredited courses e.g. EMST, APLS Evidence of Clinical Privileges
7.1.3	The supervisor has not less than five years full-time experience in rural or remote general practice or other rural or remote specialist practice. *Up to three years of time spent in a rural or remote environment. Training towards FACRRM or FRACGP/FARGP, maybe counted.* *Potential supervisors who do not have five years rural or remote experience but have a mixture of urban and rural or remote practice experience will be assessed on a case-by-case basis according to their merits.* *Potential supervisors who have limited Australian work experience may be considered if overseas rural and remote experience is comparable.*	**Application** Curriculum vitae

7.1 Criterion 1: Qualifications and experience

The supervisor must have appropriate qualifications and experience.

Indicator	Description	Evidence required
7.1.4	The supervisor is an appropriate role model, exhibiting a high standard of clinical competence, communications skills and professional values in relation to patient care.	**Application** Recommendation from a Regional Training Provider, colleague, visiting specialist or employer **Site visit** Interview with supervisor and registrar Recent assessments such as multisource feedback would be desirable
7.1.5	The supervisor demonstrates commitment to ongoing professional development. *To demonstrate compliance with this indicator, supervisors must be up to date with professional development requirements of their College. 'Up to date' is defined as completion of requirements for the previous triennium and active participation in activities for the current triennium.*	**Application** Doctors participating in the ACRRM PDP program are not required to provide evidence for this indicator If participating in a non ACRRM PDP program, copies of statements from PDP provider showing completion of previous triennium and participation in current triennium

7.2 Criterion 2: Commitment as a teacher

The supervisor must have demonstrated commitment and competence as a teacher.

Indicator	Description	Evidence required
7.2.1	The supervisor demonstrates an understanding of the ACRRM Vocational Training program and the ACRRM Primary Curriculum. *It is important for supervisors to have an understanding of the scope of knowledge, skills and experience that are required of a registrar in order to gain FACRRM. These are detailed in the ACRRM Primary Curriculum as learning outcomes.*	**Site visit** Interview with supervisor
7.2.2	The supervisor demonstrates the ability to take overall responsibility for the clinical and educational supervision of a registrar in their post.	**Application** Recommendation from training provider/colleague **Site visit** Interview with supervisor and registrar
7.2.3	The supervisor complies with the structured educational activity requirements according to the registrar's training pathway and stage of training. ***Vocational Preparation Pathway*** *Supervisors training registrars on the VPP are required to provide structured educational activities meeting the following criteria:* • *3 hours per week in the first 6 months of PRRT* • *1.5 hours per week in the second 6 months of PRRT* • *thereafter according to registrars' needs.* ***RVTS*** *Supervisors training registrars on the RVTS pathway are required to maintain regular contact with their registrar as follows:* • *1 hour per week in the first 6 months* • *1 hour per fortnight in the second 6 months* • *1 hour per month for the remainder of the program.* • *Participate twice yearly in 3-way teleconferences between the registrar, supervisor and an RVTS medical educator. These will be arranged by the RVTS office and will form part of the regular contact between the supervisor and registrar.*	**Application** Recommendation from training provider/colleague **Site visit** Teaching plan or timetable outlining teaching times and subject matter A copy of the teaching plan is to be provided to the college with surveyor report Interview with supervisor and registrar Registrar feedback

7.2   Criterion 2: Commitment as a teacher

The supervisor must have demonstrated commitment and competence as a teacher.

Indicator	Description	Evidence required
	• *Visit the registrar once per year as part of a clinical teaching visit, and provide a written report on the visit to the RVTS office. This visit will be arranged in conjunction with the RVTS office.* • *Join the weekly teletutorials for which their registrar is presenting a case (twice per year).* ***Independent Pathway*** *Supervisors training registrars on the IP are required to demonstrate how they provide or intend to provide structured educational activities meeting the following criteria:* • *3 hours per week in the first 6 months* • *1.5 hour per week in the second 6 months* • *thereafter according to registrars needs.* *Note: this is based on a registrar undertaking a full four years of training towards FACRRM. Where the registrar is exempted one year or more of training time, structured education should be provided according to the needs of the registrar.*	
7.2.4	A supervisor is accessible and available to the registrar when the registrar is working. *A supervisor must be accessible to the registrar either on site, or by telephone, radio, or other electronic means while the registrar is working. If unavailable at any time the primary supervisor is responsible to ensure that another doctor is available to provide supervision.* *The amount of time a supervisor is required to be accessible and available to the registrar on site needs to be adjusted according to the stage of training and the ability of the registrar.* *As a guide ACRRM would expect:* • *80% in the first 6 months* • *50% in the second 6 months* • *25% thereafter.*	**Application** Recommendation from training provider/colleague **Site visit** View roster and on call arrangements Interview with supervisor, staff and registrar Registrar feedback
7.2.5	The supervisor organises an accredited deputy supervisor to provide supervision at times when the registrar cannot access the primary supervisor or when the post includes more than one site. *When the primary supervisor is not able to provide the amount of supervision outlined in 7.2.4 they are required to appoint a deputy supervisor. The deputy supervisor must also be accredited by ACRRM.* *If the post consists of more than one clinical*	**Application** A list of additional supervisors included in the application **Site visit** Interview with registrar, supervisors and staff

7.2 Criterion 2: Commitment as a teacher

The supervisor must have demonstrated commitment and competence as a teacher.

Indicator	Description	Evidence required
	environment e.g. hospital and a general practice the registrar must have access to an accredited supervisor in each site and both sites must be accredited. Note: in general a satellite practice does not require a separate supervisor and accreditation separate to the main practice.	
7.2.6	The supervisor agrees to meet with the registrar early in the post to discuss and appraise the registrar's skills and experience and develop a learning plan. *The supervisor is required to meet with the registrar as early as practical in the post. This must include:* • *observation of the registrar during consultations to enable assessment of areas of strength and weakness and to guide the level and type of supervision required in different areas.* • *discussion of the registrar's past experience, both within training and prior to training.* • *establishing a clear understanding of the learning needs for this post and ensuring that the registrar also has a clear understanding, including what procedural skills the registrar is required to practise and demonstrate competence in.* • *discussion of any formative assessments, that the registrar is expected to complete in this post, as well as any summative assessments the registrar has enrolled in.*	**Application** Recommendation from training provider/colleague **Site visit** Sight copies of learning plans and teaching plan Interview with supervisor and registrar
7.2.7	The supervisor conducts formative assessment of the registrar, in accordance with their stage of training. *In the first 12 months of training, the supervisor agrees to undertake regular reviews (at least once every 4 months) of registrar patient consultations. This may be achieved by sitting in on patient consultations or through reviewing videotaped/audio-taped consultations supplied by the registrar. The supervisor will use this exercise to provide the registrar with feedback on their performance and to guide the registrar in self evaluation.*	**Application** Recommendation from training provider/colleague **Site visit** Sight evidence such as: a copy of a supervisor report or a copy of a completed ACRRM miniCEX assessment Interview with supervisor, registrar and staff
7.2.8	The supervisor demonstrates a commitment to teaching.	**Application** Recommendation from training provider/colleague **Site visit** Interview with supervisor, registrar and staff

7.2 Criterion 2: Commitment as a teacher

The supervisor must have demonstrated commitment and competence as a teacher.

Indicator	Description	Evidence required
7.2.9	The supervisor organises own clinical workload to be compatible with teaching commitments. *Supervising a registrar (as outlined in indicator 7.2.3) requires the supervisor to adjust their clinical work load to allow time to provide supervision and structured teaching for the registrar.*	**Application** Recommendation from training provider/colleague **Site visit** Supervisor roster, teaching roster Interview with supervisors, registrar and staff
7.2.10	The supervisor participates in supervisor training and other activities to further develop teaching/mentoring skills. *This involves attendance at supervisor or teacher training. Examples may include workshops, online clinical forums or conferences, RTP or College supervisor training, and university courses in adult education.*	**Application** Recommendation from training provider/colleague **Site visit** Evidence of attendance at workshops or completion of training courses. Interview with supervisor, registrar and staff
7.2.11	The supervisor complies with limits set by the education provider on the number of registrars a supervisor can be responsible for at any one time. *The number of registrars per supervisor must not exceed the supervisor's ability to provide supervision in accordance with the registrar stage of training (see 7.2.3) and individual needs.*	**Application** Recommendation from training provider/colleague **Site visit** Interview with supervisor, registrar, practice staff

7.3   Criterion 3: Abilities as a teacher

The supervisor has demonstrated abilities as a teacher.

Indicator	Description	Evidence required
7.3.1	The supervisor is familiar with a range of teaching methods and select appropriately from these to assist the registrar's learning. *To facilitate registrar learning, supervisors are required to provide or direct the registrar to a range of teaching and learning activities. These may include small group discussions, case reviews, audio or videotape reviews, sitting in on consultations, tutorials, experiential learning and online learning.* *The supervisor does not need to provide all of these activities; the registrar can be directed to and encouraged to participate in appropriate education activities provided by others.* *Note: to achieve FACRRM, registrars are required to complete four RRMEO modules and at last two emergency medicine courses.*	**Application** Recommendation from training provider/colleague **Site visit** Interviews with supervisors, registrar and practice manager Sight teaching plan
7.3.2	The supervisor is skilled in assessing and providing feedback on performance, including establishing and reviewing learning plans. *It is very important that constructive feedback is given appropriately and in a timely fashion. Feedback is best when it is based on first hand observation and when it is constructive in nature. It should be given as soon as possible when the opportunity occurs in a learning situation. Waiting until mid-term or end of placement to give feedback about deficiencies is potentially dangerous for patients and provides the registrar with little opportunity to improve.*	**Application** Recommendation from training provider/colleague **Site visit** Sight copies of learning plans, formative assessments such as miniCEX Interview with supervisor and registrar Supervisor interview, including discussion of how poor performance would be managed & examples of how feedback is provided
7.3.3	The supervisor and registrar collaboratively plan exposure to activities required in the registrar learning plan, the ACRRM Primary Curriculum and the ACRRM Procedural Skills Logbook. *At the completion of training, registrars are expected to have covered the skills, knowledge and behaviours outlined in the ACRRM Primary Curriculum. All skills in the Procedural Skills Logbook are required to be certified prior to awarding of FACRRM.*	**Application** Recommendation from training provider/colleague **Site visit** Sight post teaching plan and example of a registrar learning plan Interview with supervisor, registrar and staff

7.3 Criterion 3: Abilities as a teacher

The supervisor has demonstrated abilities as a teacher.

Indicator	Description	Evidence required
7.3.4	The supervisor utilises a wide range of educational resources, including the ACRRM Primary Curriculum and RRMEO, to assist the registrar achieve specific learning goals. *The supervisor is required to have an understanding of the ACRRM Primary Curriculum and be able to direct the registrar to relevant resources such as RRMEO. See a suggested reading list at www.acrrm.org.au/assessment*	**Application** Recommendation from training provider/colleague **Site visit** Interview with supervisor and registrar
7.3.5	The supervisor assists the registrar with the documentation of training records, including sign off of the ACRRM Procedural Skills Logbook. *ACRRM registrars are required to learn and be assessed for competency in a range of procedural skills. Supervisors are required to witness and certify competency in these procedural skills; this can be completed online on RRMEO or by hard copy logbook.*	**Application** Recommendation from training provider/colleague **Site visit** Interview with supervisor and registrar Sight registrar Procedural Skills Logbook and/or examples of registrar learning records

7.4 Criterion 4: Commitment to supporting registrars

The supervisor is committed to supporting registrars. The supervisor must:

Indicator	Description	Evidence required
7.4.1	The supervisor takes responsibility for providing professional and personal support and guidance to a registrar.	**Application** Recommendation from training provider/colleague **Site visit** Interview with supervisor and registrar to determine understanding of the professional and personal support needs of registrars
7.4.2	The supervisor maintains confidentiality with the registrar. *This includes confidentiality around clinical decisions, progress in training, ethical matters and personal issues.*	**Application** Recommendation from training provider/colleague **Site visit** Interview with supervisor and registrar
7.4.3	The supervisor negotiates methods and frequency of communication with the registrar. *This includes communication with the registrar about day to day clinical issues as well as overall debriefing and planning of activities.*	**Application** Recommendation from training provider/colleague **Site visit** Interview with supervisor and registrar Sight teaching plan for the post
7.4.4	The supervisor possesses personal attributes suitable to undertaking a supervisory role, including: • well developed communication and interpersonal skills • self awareness • open mindedness • reliability • being innovative, resourceful and flexible • an understanding of their own limitations with the ability to refer on when necessary.	**Application** Recommendation from training provider/colleague **Site visit** Overall assessment determined through communications with the supervisor on the day Interview with supervisor and registrar

8.   Standards for Teaching posts

This section outlines the standards required of teaching posts for ACRRM registrars undertaking PRRT. These standards focus on the ability of the post to enable registrars to develop the necessary knowledge and skills to fulfil the learning outcomes in the ACRRM Primary Curriculum. They are concerned with issues surrounding organisation, facilities, clinical learning opportunities, policies and resources available to ACRRM registrars.

These standards do not prescribe a particular type of health service. Any health service that meets these standards is eligible for accreditation to supervise ACRRM registrars. Composite posts are also appropriate; for example, a private office based practice and the hospital where the supervisor has visiting rights may jointly meet the standards for accreditation. Information on all sites where the registrars will work must be included in the application form.

Where supervision is conducted off site, the post where the registrar works must meet these standards.

8.1   Criterion 1: Rural and remote location

The teaching post must be situated in a rural or remote location.

Indicator	Description	Evidence required
8.1.1	The teaching post is situated in a rural or remote location. *The post must possess the characteristics of rural and remote medical practice, particularly independence in clinical practice. The post must be located in a setting that lacks ready access to specialist medical and other services and requires the development of own knowledge and skills to match local community need.*	**Application** Population size and rural and remote characteristics of clinical practice ASGC-RA rating **Site visit** Sight teaching plan, roster, on-call roster Interview with supervisor, practice staff and registrar

8.2 Criterion 2: Training resources

The teaching post must provide appropriate resources for the registrar.

Indicator	Description	Evidence required
8.2.1	The teaching post provides access to telephone, fax, the internet and e-mail. *During work hours the registrar must have access to telephone, fax, the internet and email. While at work either in the post or working remotely e.g. at a clinic or undertaking home visits, the registrar must have telephone coverage. Where there is no mobile coverage a satellite phone must be provided.*	**Application** Recommendation from training provider/colleague **Site visit** Sight equipment
8.2.2	The teaching post provides access to a range of relevant clinical resources. *The registrar must have easy access to relevant, up to date clinical resources while consulting. This may include textbooks, journals, evidence based guidelines, electronic databases and training modules. The ACRRM Primary Curriculum and Procedural Skills Logbook must be available at the post (electronic or hard copy). In general, resources are considered up to date if published within the past five years.*	**Application** Recommendation from training provider/colleague **Site visit** Sight clinical resources Interview with supervisor, practice staff and registrar
8.2.3	The teaching post provides appropriate computer equipment for accessing and updating patient records. *The registrar must have ready access to appropriate computer equipment, including software and hardware for easy access and updating of patient records.*	**Application** Recommendation from training provider/colleague **Site visit** Sight equipment Interview with supervisor, practice staff and registrar
8.2.4	The teaching post provides access to contact details for other avenues of support. *The registrar should be provided with contact details of health professionals, allied health workers and other rural doctors to enable them to form wider support networks and avenues for gaining information and advice.*	**Application** Recommendation from training provider/colleague **Site visit** Sight contact list Interview with supervisor, registrar and practice staff
8.2.5	The teaching post provides access to equipment for participation in education activities. *The equipment required will depend on the mode of education delivery used. At a minimum, a computer and internet access must be provided. A satellite dish may be required to receive educational broadcasting. The satellite dish should be onsite or at a nearby facility e.g. hospital, RCS, telecentre. A digital camera, video recorder or web cam would be highly desirable.*	**Application** Recommendation from training provider/colleague **Site visit** Sight equipment Interview with supervisor, registrar and practice staff

8.3 Criterion 3: Teaching plan

The teaching post must have a documented teaching plan.

Indicator	Description	Evidence required
8.3.1	The teaching plan includes an outline of how the post organises orientation to the post, teaching, learning and supervision. *To include a timetable of activities identifying who is responsible.* *How the post ensures that appropriate supervision occurs including arranging a back up supervisor when primary supervisor not available.*	**Application** Copy of teaching plan if available **Site visit** Copy of teaching plan
8.3.2	The teaching plan includes a description of clinical, educational and social strengths and opportunities to offer registrars.	**Site visit** Copy of teaching plan
8.3.3	The teaching plan includes a description of the post, the patient or practice population and teaching resources. *This must cover practice population, management, staffing, appointments, how the practice provides extended continuity of care responsibilities such as hospital work, nursing home visits, rostering, after hours work, and how the practice is involved with the community and other health care providers. For hospital posts this will include roster details, change over, entitlements, educational opportunities and facilities.*	**Site visit** Copy of teaching plan
8.3.4	The teaching plan includes an outline of how supervisors will assess the performance of the registrar and manage feedback. *This should include a plan for documenting the frequency of assessments and methods used e.g. mini CEX.*	**Site visit** Copy of teaching plan
8.3.5	The teaching plan includes a description of how the post provides opportunities for registrars to be involved in quality assurance, clinical audit and peer review. *Posts are required to involve registrars in quality activities in the post. Plan should document activities planned for the year and role registrar will take.*	**Site visit** Copy of teaching plan
8.3.6	The teaching plan must include a description of how the post provides opportunities for off-site visits relevant to rural and remote medicine. *Posts are required to facilitate registrar visits to other health providers to gain knowledge and experience relevant to the ACRRM Primary Curriculum e.g. population health, Aboriginal Health and relevant allied health facilities.*	**Site visit** Interview with practice manager and supervisor

8.4 Criterion 4: Clinical and office equipment

The teaching post must be suitably equipped with clinical and office equipment sufficient to allow the registrar to practise competently and to learn new skills.

Indicator	Description	Evidence required
8.4.1	The teaching post provides a dedicated patient consultation room for the registrar that is suitably equipped. *The post is required to allocate a dedicated patient consultation room for the registrar. This room must have adequate equipment and resources for safe practice. If the registrar is required to move from room to room, then a place should be provided to store equipment and resources as well as a means to move them easily e.g. a container on wheels, trolley etc. Ideally the allocated consultation room should also be available to the registrar for study and educational sessions.*	**Application** Recommendation from training provider/colleague **Site visit** Sight room Interview with supervisor, practice manager and registrar
8.4.2	The teaching post provides onsite or immediate access to the essential equipment listed in table below	

Auriscope	Positive pressure oxygen/bag + mask
Baby scales	Pregnancy testing
Contaminated waste disposal	Refrigerator minimum-maximum thermometer
Dangerous drugs register book	Sharps disposal
Dangerous drugs storage	
Dressings	Spacer Device for Meter Does Inhalers
Ear syringe and/or cerumen loops	Specimen collection – tourniquet,
ECG (or availability for use)	syringes & needles, transport swabs,
Emergency bag	viral culture media, urine containers, paediatric urine bags.
Emergency drugs	Sphygmomanometer – standard, large, paediatric cuffs
Endotracheal tubes- laryngeal mask or equivalent seal mask/airway protection device	Sterilisation – preferred use of sterile disposables
Eye examination – staining, mydriatic, local anaesthetic	Off site – Local hospital/certified sterilisation provider
Eye charts for VA and colour vision assessment	On site – Steam under pressure
Gloves – disposable and sterile	Rarely – Dry heat, chemical disinfection
Guedal airways – preferably disposable	Specula – aural and nasal
Glucometer	Stethoscope
Height/weight scales	Suction
IV access	Suture instruments + LA
IV fluids	Syringes and needles - disposable
	Thermometer

8.4 Criterion 4: Clinical and office equipment

The teaching post must be suitably equipped with clinical and office equipment sufficient to allow the registrar to practise competently and to learn new skills.

Indicator	Description	Evidence required
	Laryngoscope Torch Liquid nitrogen Tourniquet Magnifying loupe Tuning fork Measuring tape Urinalysis – BHCG, Blood protein glucose ketones/multistix Nebulising air pump/mask – adult & paediatric Ophthalmoscope Vaginal specula Pap smear equipment Vaccination refrigerator Patella hammer X-ray viewing box Peak flow monitor	
8.4.3	The teaching post provides clear and adequate systems for clinical records and registers. *The teaching post at a minimum has:* • *medical records which are comprehensive & legible, with information easily retrievable* • *an adequate patient records system including health screening and recall systems* • *a separate medical record for non-transient current patients* • *records which contain an up to date health summary and copies of the supervisor, consultant and hospital referral letters and reports.*	**Application** Recommendation from training provider/colleague **Site visit** Practice accreditation Random record review
8.4.4	The teaching post provides adequate access to diagnostic and medical services. *The teaching post should have access to radiology, pathology and other diagnostic services. Results should be available within a reasonable timeframe. There should be access to consultant medical services and to appropriate neighbouring hospitals and allied health and community services.*	**Application** Recommendation from training provider/colleague **Site visit** Interview with supervisor, registrar and practice manager
8.4.5	The teaching post provides access to professional development for all staff. *The post should provide access to professional development for all staff, including the registrar.*	**Application** Recommendation from training provider/colleague **Site visit** Professional development plan Records of staff professional development attendance

8.5 Criterion 5: Clinical learning opportunities

The teaching post must provide an appropriate range of clinical learning opportunities.

Indicator	Description	Evidence required
8.5.1	The teaching post provides a range of learning experiences for the registrar, including: • managing undifferentiated acute and chronic health problems in an unreferred patient population • providing care to all age groups • providing continuing care for individuals with chronic conditions • providing extended continuity of care such as home visits, nursing home visits and hospital visits and other visits outside the practice premises • undertaking preventative activities such as screening, immunisation and health education • responding to emergencies, including stabilisation and definitive management as appropriate • providing hospital-based secondary care • participating in aspects of practice management including business aspects, quality and safety, time and resource management • delivering obstetric (antenatal and postnatal) care • undertaking procedures outlined in the ACRRM Primary Curriculum Procedural Logbook • undertaking a range of population health interventions at practice and community levels • participating in after hours care • providing culturally safe healthcare to Aboriginal and Torres Strait Islander persons. *Over the course of 'Primary Rural and Remote Training' the registrar is expected cover the scope described above.* *A registrar may spend their entire Primary Rural and Remote Training in a post (either single or composite posts) that can provide all of these learning experiences.* *Posts that do not provide the full scope of training required may be eligible for accreditation but a registrar would only be able to complete a part of PRRT in such a post.*	**Application** Recommendation from training provider/colleague **Site visit** Interview with supervisor, registrar and practice manager Sighting verifiable evidence such as roster, de-identified practice clinical service profile, clinical privileges document, hospital on call roster, registrar Procedural Skills Logbook progress

8.5 Criterion 5: Clinical learning opportunities

The teaching post must provide an appropriate range of clinical learning opportunities.

Indicator	Description	Evidence required
8.5.2	The teaching post provides opportunities for the registrar to become familiar with the principles of quality assurance, clinical audit, and peer review and to participate in the clinical audit cycle. *It is important for the post to involve the registrar in quality improvement processes such as clinical audits and peer review.*	**Application** Recommendation from training provider/colleague **Site visit** Sight examples of clinical audits showing involvement from the registrar Interview with supervisor, registrar and practice manager
8.5.3	The teaching post provides adequate but not excessive patient workload for the registrar. *National Minimum Terms & Conditions for GP Term 1 and GP Term 2 Registrars require a maximum on average of four patients per hour, but acknowledges that there are circumstances where this workload will vary.* *In subsequent years it is not possible to set parameters, as consideration has to be given to the registrar's experience and the types of services rendered. However, the clinical load should be such that the registrar is occupied with clinical work for most of the working day, allowing for normal daily and seasonal fluctuations. The key is ensuring balance for the registrar between gaining adequate clinical experience and having the opportunity to undertake other learning activities.*	**Application** Recommendation from training provider/colleague **Site visit** Interview registrar and supervisor Sight roster, patient bookings
8.5.4	The teaching post provides opportunities to be part of, and learn through, being a member of a rural or remote health care team. *It is important that the registrar has the opportunity to work with and be part of the broader rural and/or remote health care team, including nurses, consultant medical services, hospitals, allied health professionals, diagnostic services, Aboriginal Health Services and other community services.*	**Application** Recommendation from training provider/colleague **Site visit** Interview with supervisor, registrar and practice manager
8.5.5	The teaching post provides opportunities for the registrar to take on positions of community advocacy and leadership as appropriate.	**Application** Recommendation from training provider/colleague **Site visit** Interview with supervisor, registrar and practice manager

8.6 Criterion 6: Structured teaching

The teaching post must provide structured dedicated teaching times for training and study negotiated between the registrar and supervisor and overseen by the training provider.

Indicator	Description	Evidence Required
8.6.1	The teaching post provides time for educational release activities in accordance with the registrar's stage of training and the requirements of the training provider. ***Vocational Preparation Pathway*** *National Minimum Terms & Conditions for GP Term 1 and GP Term 2 Registrars specify formal, set aside practice based teaching averaged over 4 weeks in accordance with AGPTP policy; and includes educational release time averaging:* • *one session per week for registrars in PRRT 1,* • *one session per fortnight for registrars in PRRT 2,* • *in subsequent years as required by training provider.* ***Independent Pathway*** *Requires two five day workshops per year of training.* ***RVTS*** *Two five day workshops per year.*	**Application** Recommendation from training provider/colleague **Site visit** Sight evidence such as roster Interview with registrar, supervisor, practice manager and training provider
8.6.2	The teaching post provides time for opportunistic and structured teaching, especially of procedural skills training and emergency courses. *The post should allow registrars time to attend education activities that relate to the ACRRM Primary Curriculum and the requirements for training.* *FACRRM registrars enrolling in ACRRM vocational training from 2009 onwards must successfully complete a minimum of two emergency medicine courses such as REST, EMST or APLS.* *FACRRM registrars must complete Procedural Skills Logbook. Some of these skills may be gained through simulation.*	**Application** Recommendation from training provider/colleague **Site visit** Site evidence such as roster Interview with registrar, supervisor, practice manager and training provider

8.7 Criterion 7: Organisational management

The teaching post must have clear and adequate organisational management arrangements.

Indicator	Description	Evidence required
8.7.1	The teaching post enters into an appropriate employment arrangement with the registrar. *The employment arrangement needs to take into account learning/training opportunities, the registrar's professional ability and professional recognition in Australia, and be in line with any employer/employee relationship required by the over-arching training organisation.*	**Site visit** Site evidence such as employment contract Interview with registrar, supervisor, practice manager
8.7.2	The teaching post ensures that the registrar, supervisor and teaching post are covered by appropriate insurance and medical registration. *The post must ensure that the registrar, rural doctor supervisor and teaching post are covered at all times by appropriate insurance and registration with the Medical Board of Australia.*	**Site visit** Sight evidence such as insurance policy Interview with registrar, supervisor, practice manager
8.7.3	The teaching post provides adequate 24-hour supervision for the registrar when the registrar provides 24-hour cover for patients. (see indicator 7.2.4)	**Site visit** Interview with registrar, supervisor, practice manager
8.7.4	The teaching post reception and/or clinical staff are informed of the function and needs of the registrar and encouraged to include the registrar in aspects of practice administration and small business management where appropriate.	**Site visit** Interview with registrar, supervisor, practice manager
8.7.5	The teaching post has a policy/protocol available concerning the appointment system, home visits and responding to emergencies, and the supervision of registrars in such situations.	**Site visit** Sight evidence such as policy Interview with registrar supervisor, practice manager

8.8 Criterion 8: Evaluation of training within the post

The teaching post must conduct a structured process to evaluate the training within the post that demonstrates how information is gathered, analysed and acted upon to improve the quality of training.

| Indicator	Description	Evidence required
8.8.1	The teaching post provides formal feedback on the progress of the registrar to the training provider and ACRRM on request. *The supervisor must meet the formal feedback requirements of the training provider. ACRRM does not require regular supervisor reports, however supervisors must agree to provide reports when requested by the training provider.*	**Application** Recommendation from training provider/colleague **Site visit** Interview with supervisor, training provider Sight evidence such as copy of supervisor report
8.8.2	The teaching post consents to registrars in the ACRRM Vocational Training program providing feedback to the training provider and ACRRM on the training environment provided by the post and the supervisors. *The supervisor and post must agree to and encourage registrars to give feedback on the post. This may take the form of surveys or other feedback processes conducted by the training provider, GPET or ACRRM.*	**Application** Recommendation from training provider/colleague **Site visit** Interview with registrar, supervisor, practice manager and training provider
8.8.3	The teaching post regularly seeks registrar feedback on the quality and suitability of the training environment provided by the post. *The post is required to establish mechanisms for registrars to provide feedback on the quality of training provided and show how this feedback has resulted in changes or improvements.*	**Site visit** Sight evidence such as written registrar feedback Copies of registrar questionnaire, exit interview etc. Interview with registrar, supervisor, practice manager

Appendix: Accrediting Non-FACRRM Supervisors

Non-FACRRM supervisors need to demonstrate that they meet ACRRM supervisor's eligibility criteria and FACRRM equivalent training and expertise.

Assessing Equivalent Training and Expertise

Appropriateness of experience/expertise will be assessed by the Vocational Training team, using a 'point' scale against the following criteria:

1. Fellowship of an AMC accredited Australian or New Zealand Professional College (or recognised equivalent), e.g. FRACGP, FACEM.

   - Maximum of 8 points available in this category
   - Points may be awarded for partial completion

2. Rural Experience - Time spent in rural and/or remote clinical practice in an academic, peer-reviewed or accredited environment.

   - Maximum of 6 points available in this category
   - 2 points can be allocated for every five years spent, up to a maximum of 15 years

3. Active and confirmed participation in a PDP/ QA program over the last 3 years.

   - Maximum of 3 points available in this category

4. Current Clinical Privileges.

   - Maximum of 4 points available in this category
   - 1 point for each of Obstetrics and Gynaecology, Anaesthetics, Surgery, Emergency Medicine

5. Further tertiary level training relevant to Rural and Remote Medicine.

   - Maximum of 4 points available in this category
     - Graduate Certificate = 1 point
     - Graduate/Post Graduate Diploma = 2 points
     - Masters Degree = 3 points
     - Professional Doctorate, MD or PhD = 4 points

6. Completion of accredited courses within the last 5 years.

   - Maximum of 6 points in this category

     - EMST, APLS, ALSO,PHTLS, EM, REST, ELS = 1 point each

     - Other state-based trauma and acute care courses as recognised by ACRRM censor and promoted via ACRRM's PDP. For example, Radiology and Ultrasound skills based training = 1 point each

7. Leadership and Academic Activity.
   - Maximum of 3 points in this category
     - Development of, or leadership in, the relevant specialty or a relevant specialty field of rural and remote medicine at a national or international level = 1 point
     - Ongoing contribution to undergraduate or postgraduate education= 1 point
     - Five publications as primary or secondary author in national or international peer-reviewed scientific journals/books/scientific proceedings = 1 point

An applicant must be able to demonstrate equivalent training and experience to the value of 16 points to be considered eligible. If the assessment leads to a score of 15 or below, the application will be referred to the Vocational Training Committee for consideration.
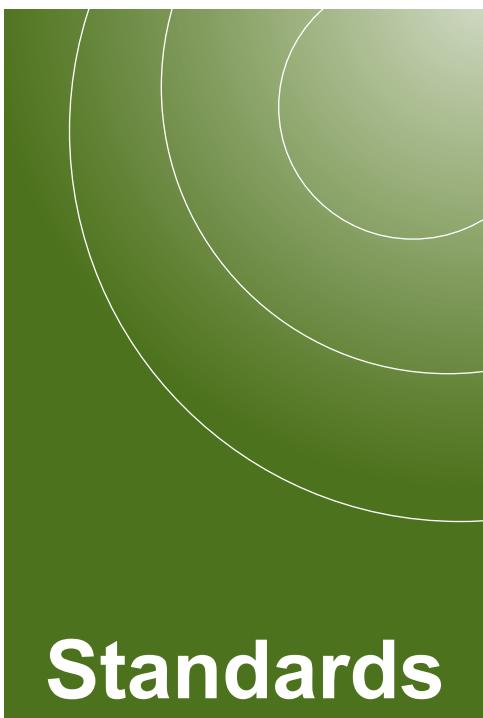
Standards

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