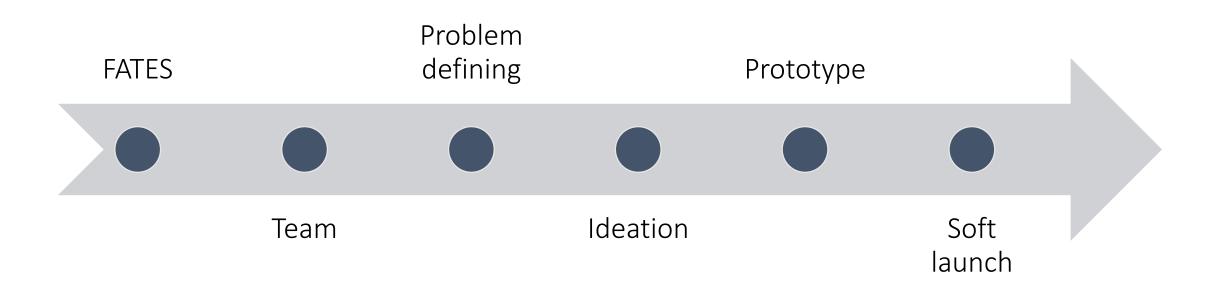


WA Rural Physician Training Pathway: Update 16 November 2024

- Dr Lloyd Nash
- Dr Lee Fairhead
- Jo Scammell

The establishment of the WA Rural Physician Training Pathway is on track, ahead of schedule.



Principles	Priorities
1. Grow your own "connected to" place	1. Prioritise regional rural and remote (RRR) healthcare at RACP
2. Select trainees invested in rural practice	2. Build capacity and capability to provide physician training in RRR areas
3. Ground training in community need	3. Improve attraction and retention of RRR physicians
4. Rural immersion not exposure	4. Collaborate to improve RRR healthcare provision
5. Optimise and invest in general medicine	5. Respect, promote and acknowledge indigenous people
6. Include service and academic learning components	
7. Join up the steps in rural training	
8. Plan sustainable specialist roles	

A review of the evidence has articulated principles and priorities to build a sustainable rural Physician workforce.

The Pathway team has completed extensive stakeholder engagement and crystallised lessons learned.

Meeting trainee expectations

- Support & flexibility in design of the pathway
- High-quality training & education
- A supported and secure transition to Level 3 partner to complete training requirements
- Home-base in rural WA

Meeting RACP requirements

- RACP site and network accreditation
- RACP training requirements including Medical Speciality access
- Support and security from Metropolitan Level 3 training settings (RPH, SCGH, FSH)

Supporting WACHS Trainees and Educators

- Rural Physicians: Mentorship, upskilling, decrease admin burden, coordination
- Training settings: Accreditation, placements, pathway mapping
- Centralised education programs
- Intensive exam preparation (&delivery)

We have used these insights to inform the development of the WA Rural Physician Training Pathway.



Networked Rural Training



Coordinated employment and training



Centralised coordinated support



Integrated training approach

Fully implemented, the Pathway will be able to deliver on the following key objectives.



Key early success in building capability and partnerships have laid the groundwork for launch.







The Pathway goes beyond the current situation in the following important ways:

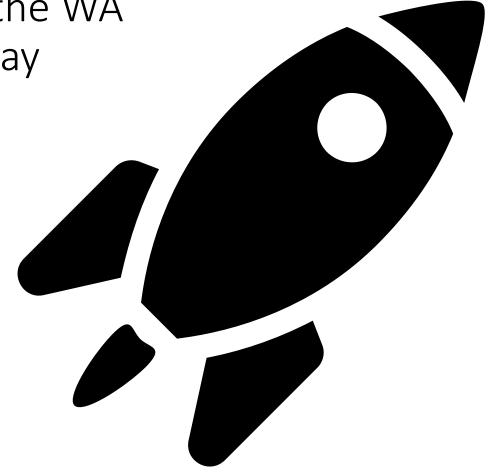
- Selection to training
- Tailored rotations across all Basic Training
- Streamlined access to metropolitan training time
- Connection to study groups and "buddies" in metro and/or other regions
- Physician mentorship
- Intensive exam preparation
- Access to research support
- Preparation for transition to Advanced Training
- Career navigation and planning to transition to specialist practice

RACP Network Accreditation

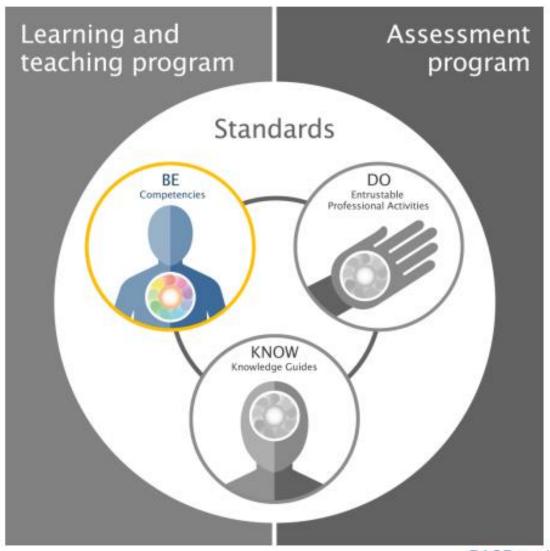
- WACHS is the first HSP to have a network accredited in WA
- Linked with FSH, SCGH and RPH
- Level 1 hospitals: Geraldton, Broome, Bunbury, Albany and Kalgoorlie
 - Looking to add Northam

2025 will see a soft launch of the WA Rural Physician Training Pathway

- 2025 BPT Recruitment finalised
 - 6 WACHS applicants
 - 4 successful into BPT to commence 3 Feb 2025
 - 1 Albany linked with FSH
 - 1 Bunbury linked with FSH
 - 1 Bunbury linked with RPH
 - 1 Geraldton linked with SCGH
- 2025 rotations to be allocated. Require mix of General Medicine and Medical Subspecialities



RACP BT Curriculum Changes 2025



RACP curriculum model

Teaching Program Requirements



Teaching program requirements

What do trainees need to do?



The teaching program guides supervisors, assessors, and accredited training settings to plan and deliver teaching activities.

During their training, trainees are required to have named individuals or entities for the following supervision roles:

- Network Director (where a network exists only)
- Director of Physician Education
- Progress Review Panel
- Education Supervisor
- Rotation Supervisor

People may act in multiple supervision roles.

When do trainees need to do it?

• Each training rotation

Learning Program Requirements

Learning program requirements

What do trainees need to do?



Complete 36-months full-time equivalent (FTE) of clinical experience in a mix of approved training rotations.

See Clinical experience requirements for details

- Australia >>
- Aotearoa New Zealand >>

When do trainees need to do it?



1 learning plan per training rotation

- At the start of each rotation
- Minimum of one per three months

In any sequence over the course of training.



6 learning courses:

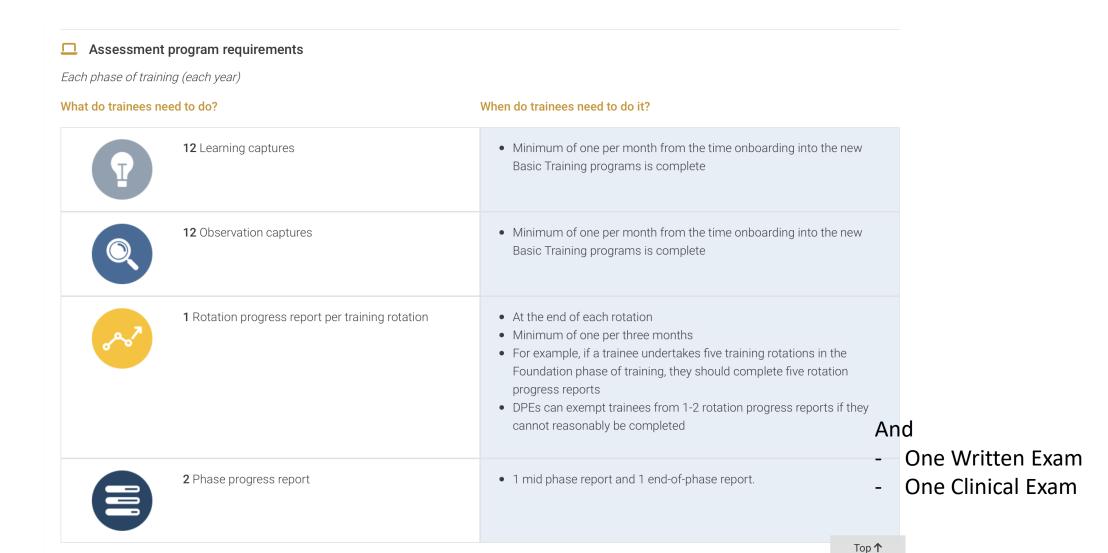
- RACP Basic Training Orientation resource*
- RACP Communication Skills resource
- RACP Australian Aboriginal, Torres Strait Islander and Māori Cultural Competence resource ☐
- RACP Ethics resource
- RACP Introduction to Leadership, Management, and Teamwork resource
- Advanced Life Support course or equivalent

- RACP Basic Training Orientation resource to be completed within first six months of training.
- Other courses to be completed in any sequence over the course of training.
- Recommended completion in the Foundation phase.

*Resource will be available in 2025.

Top ↑

Assessment Requirements



Roles and Responsibilities

Overview of roles and responsibilities in Basic Training

Figure 1		Workplace/training setting					
Provides professional learning and development opportunities							
Basic Trainee	Assessor	Rotation Supervisor	Education Supervisor	Director of Physician / Paediatric Education	Network Director of Physician / Paediatric Education	Progress Review Panel	
A member who is registered with the RACP to undertake the Basic Training program.	A person who provides feedback to trainees via the Observation Capture or Learning Capture tool.	A consultant who provides direct oversight of a Basic Trainee during a training rotation.	A RACP Fellow* who provides longitudinal oversight of a Basic Trainee's progress through training. *Or Fellow of another specialty college (Paediatrics & Child Health Division only)	A RACP Fellow who provides educational leadership across a training setting.	A RACP Fellow who provides educational leadership across a network of training settings.	A group convened to make evidence-based decisions on Basic Trainees' progression through and certification of training.	

We have outstanding problems to solve.

Registrar recruitment

Recruitment to training

Access to training rotations

Secondments for metro inreach

Pathway into Advanced Training

Ongoing funding for Pathway team



Questions and comments?

Contact the Pathway team on: WACHS.BPT@health.wa.gov.au 6391 0647