

FREQUENTLY ASKED QUESTIONS

ACRRM TRAINING PROGRAM POLICIES

1. When do the new and updated training program policies become effective?

The policies are published now; they are effective from 1 July 2020. Some current policies will continue unchanged.

2. Do the policies apply to all training pathways?

Yes, the College policies apply to AGPT, RVTS and IP pathways. The new policies aim to provide clarity, transparency and consistency across the pathways.

3. Will the training placement policy affect all registrars?

Training location requirements are now consistent across all training pathways. All registrars will need to train in an MM2-7, unless, by prior approval, they are undertaking special skills training that cannot be obtained in a regional, rural or remote location. Existing IP registrars have until 1 January 2021 to meet the new requirements.

4. A registrar started training in 2020 and has not yet submitted their RPL application. How will the changed recency of experience requirements affect them?

Registrars who commenced training at the beginning of 2020 are still able to submit their RPL application before the new policy becomes effective. Any RPL applications submitted after 1 July will be subject to the new policy.

5. Do registrars still need to undertake the first year of ACRRM training in hospital or can they decide to go straight to general practice?

The Fellowship Training Handbook details the options. Registrars commencing training at PGY2 must undertake the first 12 months (FTE) in a state or territory Postgraduate Medical Council (PMC) accredited post.

Registrars who hold general registration and are PGY3 or above may commence training in a PMC or in an ACRRM accredited training post. This flexibility allows IMGs without Australian hospital experience to complete the training program.

6. What is Core Generalist Training (CGT)?

Core Generalist Training equates to the phase of training formerly covered by the Primary Curriculum. The term 'Core' has replaced 'Primary'.

Core Generalist Training is a merging of the Core Clinical Training (CCT) and Primary Rural and Remote Training (PRRT) phases of training. This allows for flexibility to meet the clinical experience and training requirements in a hospital or in community primary care. No new requirements have been added.

7. Will a registrar's training record need to reflect the merging of Core Clinical Training (CCT) and Primary Rural and Remote Training (PRRT), to Core Generalist Training?

No, you can continue to enter registrar training information under CCT and PRRT or change it to Core Generalist Training.

