

FELLOWSHIP



# SUPERVISOR AND TRAINING POST ACCREDITATION GUIDE



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*ACRRM acknowledges Australian Aboriginal People and Torres Strait Islander People as the first inhabitants of the nation. We respect the traditional owners of lands across Australia in which our members and staff work and live and pay respect to their elders past present and future.*

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## Introduction

The Australian College of Rural and Remote Medicine (ACRRM) is a professional College accredited by the Australian Medical Council to define standards and deliver training in the medical speciality of general practice. Fellows of ACRRM receive specialist registration as a General Practitioner with the Medical Board of Australia and can practise in any location throughout Australia.

ACRRM's curriculum and training program also prepares doctors to be Rural Generalist medical practitioners.

## Rural Generalist medical practitioner

A Rural Generalist medical practitioner is a General Practitioner who has specific expertise in providing medical care for rural and remote or isolated communities. A Rural Generalist medical practitioner understands and responds to the diverse needs of rural communities: this includes applying a population approach, providing safe primary, secondary and emergency care, culturally engaged Aboriginal and Torres Strait Islander peoples' health care as required, and providing specialised medical care in at least one additional discipline.

## Standards for Supervisors and Training Posts

The [Standards for Supervisors and Training Posts](#) (Standards) apply to all supervisors and training posts training registrars on the [ACRRM Fellowship Training Program](#).

The Standards apply to Core Generalist Training (CGT) and Advanced Specialised Training (AST) in all disciplines. They are outcome standards and do not prescribe inputs, such as number of hours, percentages, etc. The description of evidence provides guidance around the College expectations for the ACRRM Fellowship Training Program.

The competencies, knowledge, skills and attributes to be gained through training in these posts are described in the [Rural Generalist Curriculum](#).

## Accreditation

All training must take place in accredited training posts. Accreditation is based on the Standards. Registrars must have a nominated accredited supervisor throughout training. Training placements must provide the opportunity to gain the required scope, type, and volume of clinical experience, at an appropriate level of responsibility.

ACRRM accredits training posts for CGT in rural, remote, and regional areas of Australia. Accredited posts include general practices, Aboriginal and Torres Strait Islander medical services, hospitals, emergency departments and retrieval services with primary care clinics. ACRRM recognises training posts accredited by state or territory Postgraduate Medical Councils (PMC) for doctors undertaking junior doctor terms during CGT. ACRRM also recognises training posts accredited by other specialist colleges as suitable for short term placements up to three months to fulfil mandatory training requirements. Posts accredited by other specialist colleges may also be suitable for long term placements such as for an AST in one of the disciplines recognised by the College for an AST and ACRRM accreditation is required.

Supervisors and training posts are accredited individually. The accreditation process for supervisors and training posts may occur concurrently or separately.

# Supervisor Accreditation

## Clinical competence

Supervisors must have a high level of clinical competence. In most situations, supervisors will:

- hold current medical registration with no conditions or limitations
- be compliant with their College Professional Development Program
- have rural experience
- hold specialist qualifications relevant to the training post
  - Core Generalist Training:
    - primary care posts will be a Fellow of ACRRM or RACGP
    - secondary care posts will be a Fellow of ACRRM or RACGP or RACP
    - emergency posts will be a Fellow of ACRRM or RACGP or ACEM
  - Advanced Specialised Training supervisors
    - will be a Fellow of ACRRM or RACGP with expertise in the AST, or
    - a Fellow of a Specialist College relevant to the AST

Doctors not meeting all these criteria may be eligible to be a supervisor and are considered case by case.

## Supervisor competence

Accredited principal supervisors must develop and maintain:

- skills as a supervisor through completion of College provided or approved supervisor training.
- knowledge of the Fellowship Training Program and supervisor responsibilities through completion of the College online orientation course or through attendance at College activities providing this information.

Activity in these categories must be completed to gain accreditation and then currency within three years demonstrated to maintain accreditation.

Cultural competence through completion of cultural awareness or safety training must be demonstrated to gain accreditation.

Accredited additional supervisors are encouraged to meet the same requirements as a principal supervisor, at a minimum basic supervisor training must be completed.

## Supervisor training

The College provides supervisor training activities, these are aligned to the tasks of a supervisor.

The College may also recognise supervisor training provided by other organisations for example:

- ACRRM accredited Training Organisation
- RACGP and other Specialist Medical Colleges
- Universities
- Medical School
- Post Graduate Medical Council
- General Practice Supervisor Association
- Mod Med
- Australasian Institute of Clinical Governance
- Other programs/or organisations as approved by the College

These courses are approved case by case on receipt of program information detailing the content and length of training.

## **Accreditation process**

The applicant supervisor completes the application form and provides evidence of clinical and supervisor competence as requested.

College approves accreditation for three years. During these years the College monitors performance of the supervisor through compliance with reporting requirements and feedback from registrars and medical educators. Supervisors are advised if concerns are raised.

Colleges checks every three years for evidence of ongoing clinical competence and supervisor competence, including supervisor training and current knowledge of the Fellowship Training Program and responsibilities of a supervisor.

## **Training post accreditation**

Health services are required to demonstrate suitability to train registrars on the ACRRM Fellowship Training Program under three broad areas:

- providing relevant clinical experience
- providing a safe and high-quality health service
- being ready to train

## **Relevant clinical experience**

Relevant clinical experience for Core Generalist Training may be provided by general practices, generalist hospitals and Aboriginal Medical Services in a regional, rural, or remote location (MM2-7) and retrieval services providing primary care clinics in remote locations.

Relevant clinical experience for Advanced Specialised Training programs is dependent on the discipline. See the [AST Handbooks](#) for further information.

In all health services, a training position needs to be at an appropriate level of responsibility and provide an appropriate range of experience.

## **Safe and high-quality health service**

Health services must be safe and provide high quality care to become a training post. This may be evidenced by holding relevant health service accreditation. Health services not holding this type of accreditation may still be suitable but will need to provide further information and evidence.

## **Readiness to train**

Health services must demonstrate that they are ready to train by providing information on the following:

- Teaching Plan, showing how the registrar will be taught and supported
- Orientation Plan, showing how the registrar will be orientated to the health service
- Supervision Plan, demonstrating sufficient coverage for the hours a registrar is working

## Accreditation process

There are two stages of accreditation for training posts:

- Provisional accreditation for new training posts. Posts remain on provisional accreditation until they have trained a registrar.
- Full accreditation applies to accredited posts that have trained a registrar and demonstrated satisfactory performance.

The accreditation cycle is three years. All posts must be reaccredited each three years. This includes provisionally accredited posts that have not trained a registrar.

### Provisional accreditation

Health services complete application form to provide

- information on the health service and its relevance to CGT or AST training program requirements
- information and evidence of accreditation as a health service\*
- evidence of a teaching, orientation, and supervision plan
- information on accredited supervisor/s or doctors seeking accreditation as a supervisor

\* Health services without accreditation as a health service may be accredited to train, at the discretion of the College. The College will contact the health service to seek additional information and if required a site visit.

Successful health services are awarded provisional training post accreditation and are eligible to train a registrar.

Once the first registrar starts in the posts the training post performance is reviewed by the College over 6-12 months

- if the training post performs satisfactorily, it is awarded full accreditation
- if the training post does not perform satisfactorily, provisional accreditation is extended for up to one year, while the College works with the post to improve performance
- if no registrars train at the post, the post maintains provisional accreditation and is reviewed after three years

### Full accreditation

The training post's performance continues to be monitored

- if no concerns arise, full accreditation is maintained
- if concerns arise, the training post may be moved to Provisional Accreditation
- if concerns persist, the training post accreditation may be removed.

If concerns are raised in between reviews that suggest a risk to the registrar, training post and/or the College, an accreditation review may be triggered.

Reaccreditation is required every three years, measured from the start of Provisional Accreditation.

Training post:

- completes a reaccreditation form, updating any details and current evidence
- hosts a site visit by a reviewer and provides evidence of compliance with standards

College:

- collates all performance information from the past three years
- arranges a review visit by a reviewer
- issues the accreditation report and certificate.

### **Performance information**

Performance information is collated from the following reports and sources:

- Training practice reports
- Supervisor reports
- Registrar placement reports
- Medical Educators
- Rural Support Officers
- Training Officers
- Registrar Liaison Officers
- Supervisor Liaison Officers

## **Feedback, complaints and appeals**

The College welcomes feedback on the accreditation process that may be provided at any time by contacting the College Accreditation Team.

The Complaints policy outlines the College's principles and processes for handling complaints.

The Reconsideration, Review and Appeals policy provides formal processes for requesting further consideration of College decisions.