



## Training Placements Policy

### 1. Purpose

This Policy:

- 1.1 Describes how the College will make placement decisions.
- 1.2 Reflects the bi-college placement principles developed with RACGP.
- 1.3 Sets the requirements that need to be met to have a placement count towards training time.

### 2. Application and scope

- 2.1. The policy applies to:
  - 2.1.1 All training placements including international placements (see [Overseas Training Policy](#)).
  - 2.1.2 Registrars training on the Fellowship training program.
  - 2.1.3 All ACRRM accredited Training Posts including Advanced Specialist Skills placements.
  - 2.1.4 RVTS registrars are not included in this policy and will be placed through the RVTS recruitment and placement mechanism.

### 3. Policy

- 3.1 This policy has been developed in order that ACRRM can satisfy all requirements relating to registrar placements.
- 3.2 The policy will ensure:
  - 3.2.1 that registrars fulfil ACRRM training requirements.
  - 3.2.2 that the placement process is based on a sensible risk-based approach allowing a lighter touch on placements with relatively low risks and a more rigorous control where the risks are higher.
  - 3.2.3 a balance between registrar choice within the scope of the training program and training post continuity.
- 3.3 ACRRM will ensure that registrars on training placements are provided with a safe work environment. in accordance with the requirements of the Work Health and Safety regulations under the relevant State Act.
- 3.4 The following principles will apply to placement decisions:
  - 3.4.1 All placements will occur in ACRRM accredited training posts.
  - 3.4.2 Training placements must be in locations classified MM 2-7, except for
    - An initial year of hospital terms which may be completed in MM 1 locations.
    - Specific skills training, which may be completed in MM 1 locations subject to ACRRM approval.
  - 3.4.3 Training posts preferences are considered throughout the placement process.

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- 3.4.3 Registrar preferences are considered throughout the placement process, within the scope of the training program and pathway requirements.
  - 3.4.4 Placements must meet registrar training requirements as directed by: RGTS, AGPT program, ACRRM and/or policies.
  - 3.4.5 The ACRRM placement process aims to encourage registrars to consider training in areas of workforce shortage, rural and remote practices within Australia.
  - 3.4.6 In general, placements will be prioritised in Aboriginal Community Controlled Health Services in MMM2-7 and locations classified as MMM6-7.
  - 3.4.7 Placements should reflect the registrar training need and training plans.
  - 3.4.8 Placements approvals will reflect a need to ensure quality training outcomes.
- 3.5 Placements must meet the training requirements for the programme the ACRRM Registrar is completing, as outlined in the Training Program Requirements Policy.

## 4. Placement Eligibility

Placement eligibility and approvals are dependent on training posts being accredited and approved under the ACRRM Accreditation standards.

- 4.1 Training placement approvals will be informed by the registrars training time and requirements alongside accreditation.
- 4.2 Training time must meet the requirements of the [ACRRM Training time Policy](#).
- 4.3 Placements without ACRRM accreditation (either standard/ provisional accreditation or an Individual Training Placement) will not count toward fellowship requirements.
  - 4.3.1 Duration of a placement must be no less than a 3-month period (excludes core hospital rotations).
  - 4.3.2 Duration of a placement is no less than 16 hours over 2 days per week.
- 4.4 Post Graduate Year (PGY) 2 Registrars must commence with CGT and undertake first 12 months full time equivalent in a Postgraduate Medical Council (PMC) accredited post.

## 5. Placement Process

- 5.1 Practices must ensure they have registered for PRODA in advance of submitting their training capacity to the College.
- 5.2 ACRRM will provide placement dates to all stakeholders in advance.
- 5.3 Registrars and training posts will be notified when placement systems open.
- 5.4 Practices will be required to submit their training capacity through the ACRRM systems by a fixed date every year.
- 5.5 ACRRM will use the data provided by Registrars and Training Posts to formulate workforce distribution and capacity allocation.
- 5.6 Registrars will be required to submit their training preferences during the placement process.
- 5.7 Training Post will receive registrars who preferenced their facility for placement interview.
- 5.8 Training posts will have an opportunity to interview registrars of their choice.

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- 5.9 Training posts and registrar placements will be guided by the DoHAC allocation and distribution KPIs.

## 6. Responsibilities

- 6.1 Registrars are responsible for:
- 6.1.1 Ensuring that they work in accredited placements that meet the requirements for their training.
  - 6.1.2 Seeking timely advice from ACRRM before accepting a training position:
  - 6.1.3 Ensuring they have discussed training needs with their Medical Educator before applying for a placement.
  - 6.1.4 Providing the required personal information to the college for the placement process to occur.
  - 6.1.5 Notifying the college immediately if there is a request to withdraw from an approved placement.
  - 6.1.6 Providing necessary information to the College to inform special considerations as required.
- 6.2 ACRRM is responsible for:
- 6.2.1 Assisting Registrars with accredited Placements.
  - 6.2.2 Facilitating the accreditation of Training Posts.
  - 6.2.3 Facilitating the accreditation of Supervisors.
  - 6.2.4 Provision of a placement system that can be utilised and accessed by both registrars and training posts.
  - 6.2.5 Providing a confirmation of placement to both registrar and training posts.
  - 6.2.6 Ensuring a training practice agreement is provided on confirmation of placement.
  - 6.2.7 Submission of the Medicare Provider Number (MPN) application for the placement.
- 6.3 Training posts are responsible for:
- 6.3.1 Ensuring that they maintain accreditation to offer placements that meet the requirements for training.
  - 6.3.2 Seeking timely advice from ACRRM before accepting a registrar:
  - 6.3.3 Ensuring they have provided capacity to ACRRM to inform placement matching
  - 6.3.4 Providing the required practice information to the college for the placement matching process to occur.
  - 6.3.5 Notifying the college immediately if there is a request to withdraw a registrar from an approved placement.
  - 6.3.6 Providing necessary information to the College to inform special considerations as required.

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- 6.3.7 Maintaining PRODA registration for placement payments mechanism.
- 6.4 Department of Health is responsible for:
  - 6.4.1 Ensuring compliance of placement process and policy against the AGPT policy Guidelines.
  - 6.4.2 Providing direction on overall workforce allocations per state.
  - 6.4.3 Providing guidance and allowance on an additional 10 % overfill on state-based capacity.
  - 6.4.5 Providing high level oversight to the bi-college placement.
  - 6.4.6 Providing necessary information to the College to inform special considerations and priority placements as required.

## 7. Placement approvals process

The following process will apply to placement approvals:

- 7.1 Placement approvals will occur throughout the year, but there will be two main placement rounds annually aligned to training term start dates.
- 7.2 Registrars and training posts will be notified when preferencing opens and provided key dates for input, they will be notified again in writing once approvals are made.
- 7.3 All registrars will be required to complete the registrar training survey to inform placement preferences.
- 7.4 Where registrars wish to remain in their current placement- this will be supported providing the placement continues to meet the registrars training and progression requirements.
- 7.5 Registrar preferences and practice preferences will be reviewed by ACRRM regional teams including the regional practice support teams, medical educators, and Regional Director of Training (RDoT) to ensure placements are fit for purpose and include regional information.
- 7.6 Regional approvals will be provided to the National placements team for final approval.
- 7.7 The national placements team will then approve placements within the placement system and notifications will be provided to registrars and practices.
- 7.8 ACRRM and RACGP have aligned the placement timing and preferencing windows to ensure registrars and training posts receive equitable access to training opportunities
- 7.9 Where registrars do not receive an offer of employment, they will be required to review remaining available training capacity within their subregion and resubmit their preference. If a placement is still not confirmed, the registrar will be notified as soon as the placement period closes and assisted to be placed in an alternate site.
- 7.10 ACRRM will provide a placement confirmation for all approved placements.

## 8. Placement Quality assurance

- 8.1 All training placements are assessed against the ACRRM Fellowship standard.

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- 8.2 All placements must be accredited and meet the Accreditation and supervisor standard.
- 8.3 Placement reporting is provided to the Accreditation Sub-committee and in turn to the Education and Training Committee to evaluate where placement numbers are below expected delivery levels and/or where placements demand has been in excess of the available capacity.
- 8.4 All registrars will be provided the opportunity to provide feedback at the end of each placement.
- 8.5 Medical educators will hold a role in ensuring placement outcomes continue to meet the registrars training requirements.
- 8.6 ACRRM will facilitate additional support and feedback through Registrar and Supervisor liaison roles to ensure quality outcomes are being met.

## 9. Related Documentation

- 9.1 ACRRM Fellowship Training Program Handbook.
- 9.2 ACRRM Training Program Requirements Policy.
- 9.3 ACRRM Training Placements Policy.
- 9.4 ACRRM Eligibility for Training Policy.
- 9.5 ACRRM Access to Training Policy.

## 10. Definitions

Word/Term	Definition
<b>MMM</b>	The Modified Monash Model is a geographic classification system that categorises metropolitan, regional, rural, and remote areas.
<b>Placement</b>	Placements that count towards and may meet Training Program Requirements.
<b>Training</b>	Working in an accredited training post under supervision.
<b>Training Pathway / Training Program Requirements</b>	Pathways accredited to deliver the Fellowship Training Program: Australian General Practice Training (AGPT), Remote Vocational Training Scheme (RVTS), and Independent Pathway (IP) including the Rural Generalist Training Scheme (RGTS) places.
<b>Training Post</b>	Refers to an ACRRM training post in primary, secondary, emergency or retrieval services, within an accredited health service or several health services in which the registrar trains, under supervision, to meet the ACRRM training program requirements.

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## 11. Document Control Information

### 11.1 Policy Information

<b>Policy Contact and Author</b>	Kate Brosnan	<b>Approving Body:</b>	Board
<b>Status:</b>	Approved	<b>Review period:</b>	2 Years
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<b>Responsible Officer:</b>	Kyra Moss	<b>Policy System Manager:</b>	Mary Jane Streeton

### 11.2 Document History

Version	Date Approved	Author	Description of revision	Internal Distribution	
				Date	Recipient/s
V1.0	Apr 2023	K Brosnan	New policy	Apr 23	OCEO, OS, ES
V1.1	May 2023	Kyra Moss	Minor amendments following feedback from Registrar and Education and Training Committees	May 23	OCEO, GM Education Services
V1.2	July 2023	Gail Jamieson	1. Policy name amended to "Training Placements Policy". 2. Clauses 1.3 and 3.4.2 transferred from previous T15 Training Placements Policy, which has been retired. 3. This Policy replaces and supersedes the previous T15 Training Placements Policy.	July 23	OCEO, GM Education Services

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