

A decorative graphic on the left side of the slide consists of three overlapping squares: a blue one at the top, a red one on the left, and a yellow one at the bottom. A black crosshair is centered over these squares, with a vertical line extending upwards and a horizontal line extending to the right, crossing the title text.

Enhanced Rural Training

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Enhanced Rural Training

- It establishes a structure within Australian General Practice Training (AGPT).
- Registrars can choose to work towards a postgraduate award in rural general practice
 - during their vocational training.
 - One or both of:
- Graduate Diploma Rural General Practice, (RACGP)
- Fellowship of the Australian College of Rural and Remote Medicine (ACRRM)
- <http://www.agpt.com.au/praxis.php/category/view/70>
- GPET Policies are available on this site
 - <http://www.agpt.com.au/praxis.php/category/view/115>



Enhanced Rural Training

- Means different things to the 3 key players in training
 - GPET
 - RACGP
 - ACRRM

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GPET

- The purpose of this policy is to outline details and requirements relevant to the optional component of an advanced rural skills post, which is available to registrars within AGPT to **assist them to prepare for particular aspects of rural general practice or to improve their skills and competency in specific areas relevant to the health needs of rural and remote communities.**



Special Skills RACGP

- Doctors must have completed 6 months training in an area of extended skills training
- approved by the RACGP. These skills posts can be undertaken in various settings, eg:
 - further experience in general practice based on an extended skills learning plan
 - general practice in a setting requiring particular skills such as a small rural town
 - Aboriginal health
 - Academic posts in general practice
 - community or general practice based palliative care
 - extended or advanced skills in a hospital
 - obstetrics, acute medicine, emergency medicine,
 - paediatrics, surgery or anaesthetics.

The RACGP logo graphic is located on the left side of the slide. It consists of a vertical black line and a horizontal black line intersecting at the center. To the left of the intersection, there are three overlapping squares: a yellow one at the top, a red one in the middle, and a blue one at the bottom. The text 'RACGP' is written in a large, blue, sans-serif font to the right of the graphic.

RACGP

- Fellowship
 - <http://www.racgp.org.au/folder.asp?id=317>
- Grad dip Rural
 - Nominated educational mentor
 - Established learning needs assessment & development of a learning plan with monitoring & progress
 - Specific curriculum modules directly relevant to rural general practice are to be completed to meet the goals of the learning plan
 - There is a wide choice of educational activities and modules available to candidates
 - Candidates demonstrate their progress by maintaining a Learning and Educational Assessment Portfolio
 - <http://www.racgp.org.au/ruraldocument.asp?id=8679>



ACRRM Training

- 12 months **Core Clinical Training** in an ACRRM accredited metropolitan, provincial or regional/rural Hospital
- 24 months **Primary Rural and Remote Training** in a combination of Rural or Remote ACRRM accredited hospital, Aboriginal Medical Service or community based facility)
- 12 months (min) **Rural Specialized Training** in ACRRM accredited Advanced Rural Skills Posts
- www.acrrm.org.au/main.asp?NodeID=25957



ACRRM ARSP

- 12 months **Rural Specialised Training**
- ACRRM accredited Advanced Rural Skills Posts in at least 1 discipline.
- Accreditable disciplines include:
 - Surgery, Obstetrics, Anaesthetics, Aboriginal Health, Emergency Medicine, Psychiatry, Adult Internal Medicine, Population Health, Paediatrics, Remote Health
- <http://www.acrrm.org.au/main.asp?NodeID=25957>



Why is Enhanced Rural Training important for Registrars

- COAG noted that, in order to attract more general practitioners with procedural skills to rural areas
- Subject to the ACRRM training programme being accredited by the Australian Medical Council
 - The Commonwealth will provide rural medicine with formal recognition under Medicare as a generalist discipline by April 2007.
 - COAG agreed that health ministers should provide, by the end of 2006, options to improve service delivery in rural and remote areas.
 - In addition, the Commonwealth's increase in medical school places will lead to an expansion in the number of medical school places bonded to areas of workforce shortage
 - Guarantee by the state and territory governments that they will provide high-quality clinical placements and intern training for Commonwealth-funded medical students, and that they will continue to invest significantly in on-the-job and post-graduate training for health professionals.



RIPS

- RRAMA 4-7
- Compulsory terms
 - Basic, Advanced & Subsequent terms
 - ARSPs & approved Special Skills
- Not available for the following terms:-
 - Hospital, remediation, overseas,
 - Academic, Optional electives
 - Post fellowship ARSPs