NEW CURRICULA

Learning, teaching and assessment programs

Advanced Training in Endocrinology (Adult Medicine)

RACP
Specialists. Together

About this document

The new Advanced Training in Endocrinology (Adult Medicine) curriculum consists of curriculum standards and learning, teaching and assessment (LTA) programs.

This document outlines the Advanced Training in Endocrinology (Adult Medicine) LTA programs for trainees and supervisors. It should be used in conjunction with the Advanced Training in Endocrinology (Adult Medicine) curriculum standards.

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Program overview

CURRICULUM STANDARDS

The curriculum standards are summarised as **25** learning goals. The learning goals articulate what trainees need to be, do, and know, and are assessed throughout training.

BE	1. Professional behaviours
DO	2. Team leadership 3. Supervision and teaching 4. Quality improvement 5. Clinical assessment and management 6. Management of transitions in care 7. Acute care 8. Longitudinal care 9. Communication with patients 10. Prescribing 11. Procedures 12. Investigations 13. Clinic management
KNOW	14. Scientific foundations of endocrinology 15. Disorders of glucose metabolism 16. Disorders of body weight 17. Lipid disorders 18. Disorders of the pituitary, hypothalamus and of water balance 19. Thyroid disorders 20. Adrenal disorders 21. Parathyroid, calcium and bone disorders 22. Neuroendocrine and inherited tumour syndromes 23. Male reproductive endocrinology 24. Female reproductive endocrinology 25. Variations in sex characteristics and gender identity

LTA STRUCTURE

The learning, teaching and assessment (LTA) structure defines the framework for delivery and trainee achievement of the curriculum standards in the program.

The program is structured in three phases. These phases establish clear checkpoints for trainee progression and completion.



Entry criteria

Prospective trainees must have:

- completed RACP Basic Training, including the Written and Clinical Examinations
- general medical registration with the Medical Board of Australia if applying in Australia, or a medical registration with a general scope of practice with the Medical Council of New Zealand and a practising certificate if applying in Aotearoa
- been appointed to an appropriate Advanced Training position.

LTA PROGRAMS

The LTA programs outline the strategies and methods to learn, teach, and assess the curriculum standards.

Entry

1 training application

Learning

Minimum 36 months full-time equivalent (FTE) professional experience

1 rotation plan per rotation

Endocrinology meeting attendance

Endocrinology learning courses

RACP Supervisor Professional Development Program

RACP Australian Aboriginal, Torres Strait Islander and Māori Cultural Competence and Cultural Safety resource

RACP Health Policy, Systems and Advocacy resource

Recommended resources

Teaching

2 supervisors per rotation

1 research project supervisor

Assessment

12 learning captures per phase

12 observation captures per phase

4 progress reports per phase

1 research project

About the program

Purpose of Advanced Training

The RACP offers Advanced Training in 33 diverse medical specialties as part of Division, Chapter, or Faculty training programs.

The purpose of Advanced Training is to develop a workforce of physicians who:

- have received breadth and depth of focused specialist training, and experience with a wide variety of health problems and contexts
- are prepared for and committed to independent expert practice, lifelong learning, and continuous improvement
- provide safe, quality health care that meets the needs of the communities of Australia and Aotearoa New Zealand.

Overview of specialty

Endocrinology is the study of hormones and hormone-producing tissues. The specialty of clinical endocrinology encompasses the diagnosis and management of disorders of the endocrine system. Hormones from the body's major gland systems (pituitary, thyroid, parathyroid, pancreas, adrenal, and gonads) regulate all body systems and bodily processes, including growth and development, bone, metabolism, electrolytes, blood pressure, reproduction, vascular disease, bowel function, and neurological processes.

Endocrinologists assess, diagnose, and manage endocrine disorders resulting from an excess or deficiency of hormone action, or neoplasms of endocrine organs, perform diagnostic and laboratory analyses, provide treatment, and conduct basic and applied research in a wide range of humoral and metabolic conditions. Communication skills are paramount in the management of people of all ages and in the care of those with chronic disease. Endocrinologists:

- **diagnose and treat disorders of the endocrine system**. The spectrum of endocrine disorders includes diabetes types 1, 2, and others, their complications, and other disorders of glucose metabolism; thyroid, pituitary, and adrenal disease; menopause, gonadal disorders, and infertility; neuroendocrine conditions; benign and malignant glandular tumours; disorders of growth; obesity; genetic and congenital glandular dysfunction; lipid and nutritional abnormalities; and osteoporosis and metabolic bone disease.

- **possess specialist investigation and laboratory skills**. Endocrinologists need to be able to interpret biochemical tests relating to endocrine diagnosis and have a good understanding of the laboratory methods underlying these analyses and their limitations. Consequently, experience in clinical or laboratory research and in diagnostic endocrine laboratory medicine is a strongly recommended component of training.

- **are responsible for long-term patient management.** Endocrine conditions are diverse in their requirement for specialist medical advice, and in most cases their impact is lifelong. Disorders may present across the age spectrum. Many pose a diagnostic challenge, and

in some the application of new or partially effective treatment requires fine judgement. Endocrine disorders affect many body systems and call for expertise in the interpretation of clinical biochemistry and immunochemistry, including dynamic tests, genetic testing and counselling, and a strong therapeutic partnership between the endocrinologist and patient and/or their family, carers, or whānau. Multidisciplinary team care is integral to treatment decisions for diabetes, thyroid cancer, pituitary disease, neuroendocrine tumours, and complex bone disease.

- **provide life-stage endocrine care.** Endocrinologists have expertise in managing people with hormone disorders to progress through puberty, achieve optimal preconception preparation, manage in pregnancy and lactation, menopause, and ageing. They can provide gender-affirming treatment, and assess and reduce cardiovascular risk in people according to age and comorbidities.

- **provide lifestyle management advice** for disorders such as obesity / overweight, polycystic ovarian syndrome, diabetes, osteoporosis prevention, and subfertility.

- **manage medications.** Endocrinologists have expertise in the management of complex medications and specialist knowledge of medication delivery devices / technology.

- **deliver endocrine care.** Endocrinology services are pivotal to a broad spectrum of health care. Endocrinologists provide consultation services to hospital inpatients, as well as dedicated inpatient endocrine care. Most endocrine care is delivered in outpatient settings, hospital clinics, community settings, and private practice. Endocrine care is well suited to the incorporation of telehealth and other digital health technologies.

Endocrinologists are experts in the treatment and management of disorders of the endocrine system with a focus on communication, problem solving, long-term care of chronic conditions, and evidence-based practice and research. Skills include:

- **communication and interpersonal skills.** Endocrinologists have an important role in taking complete medical histories, determining differential diagnoses, explaining investigations and treatment options (which may include advice on lifestyle, nutrition, and medications), and preventative treatments and measures. Endocrinologists work with multidisciplinary teams including, but not limited to, diabetes educators, dietitians, podiatrists, psychologists, social workers, genetic counsellors, and surgeons, as well as other medical specialists in multidisciplinary teams. Communication with referring general practitioners is paramount.

- **attention to detail and problem-solving skills.** Endocrinologists must carefully analyse medical histories, physical examinations, and test results, to make accurate diagnoses.

- **research.** Conducting research and studies on the endocrine system and its diseases, disorders, and conditions to review quality of existing treatment techniques, and to develop new treatment techniques, can be an important component of a career in endocrinology. Developing new models of care for chronic disease and benchmarking care outcomes is important to improve outcomes for people with chronic disease. Remaining up to date on current discoveries, developments, trends, research, and technology is necessary to deliver best endocrine care.

Supervising committee

The program is supervised by the Training Program Committee in Endocrinology and the Aotearoa New Zealand Training Program Subcommittee in Endocrinology.

Qualification

Trainees who successfully meet the completion standards and criteria of this program will be awarded Fellowship of the Royal Australasian College of Physicians (FRACP).

Joint training

A joint training program is a single, combined training pathway that leads to more than one Fellowship. These are usually Divisional Advanced Training programs offered in partnership with other medical colleges.

Trainees may be eligible to undertake joint training in Endocrinology. See a guide to joint training for further information.

Learning goals and progression criteria

Learning, teaching and assessment structure

The learning, teaching and assessment structure defines the framework for delivery and trainee achievement of the curriculum standards in the Advanced Training program.

Advanced Training is structured in three phases. These phases will establish clear checkpoints for trainee progression and completion.

1	**Specialty foundation**	• Orient trainees and confirm their readiness to progress in the Advanced Training program.
2	**Specialty consolidation**	• Continue trainees' professional development in the specialty and support progress towards the learning goals.
3	**Transition to Fellowship**	• Confirm trainees' achievement of the curriculum standards, completion of Advanced Training, and admission to Fellowship. • Support trainees' transition to unsupervised practice.



Figure: Advanced Training learning, teaching and assessment structure

- An **entry decision** is made before entry into the program.
- **Progress decisions**, based on competence, are made at the end of the specialty foundation and specialty consolidation phases of training.
- A **completion decision**, based on competence, is made at the end of the training program, resulting in eligibility for admission to Fellowship.



Advanced Training is a **hybrid time- and competency-based training program**. There is a minimum time requirement of full-time equivalent (FTE) experience, and progression and completion decisions are based on evidence of trainees' competence.

Entry criteria

Entry attributes	Prospective trainees can demonstrate:
	• a commitment and capability to pursue a career as an endocrinologist
	• the ability and willingness to achieve the common learning goals for Advanced Training:
	  ○ team leadership
	  ○ supervision and teaching
	  ○ the professional behaviours, as outlined in the Competencies.

Entry criteria	Prospective trainees must have: • completed RACP Basic Training, including the Written and Clinical Examinations • general medical registration with the Medical Board of Australia if applying in Australia, or a medical registration with a general scope of practice with the Medical Council of New Zealand and a practising certificate if applying in Aotearoa • been appointed to an appropriate Advanced Training position.

Progression criteria

To progress to the next phase or to complete the program, trainees must demonstrate:

- the ability to plan and manage their learning and to complete their learning and assessment requirements in a timely manner
- achievement of the learning goals to the levels outlined in the learning goal progression criteria.

Training committees or delegated progress review panels will consider evidence supporting trainees' achievement of the progression criteria and make progress decisions.

If criteria have not been met, committees or panels may decide to place conditions on trainees' progression to the next phase of training or not to progress trainees until all criteria have been achieved.

Learning goals

The curriculum standards are summarised as **25** learning goals.

The learning goals articulate what trainees need to be, do, and know, and are assessed throughout training on a five-point scale. This scale determines the expected standard for each learning goal at the end of each training phase. Trainees must meet these standards to progress to the next phase or complete the program.

Learning and assessment tools are linked to the learning goals that allow trainees to demonstrate competence across each learning goal.

Levels	1	2	3	4	5
Be: Competencies (professional behaviours)	Needs to work on behaviour in **more than five domains** of professional practice	Needs to work on behaviour in **four or five domains** of professional practice	Needs to work on behaviour in **two or three domains** of professional practice	Needs to work on behaviour in **one domain** of professional practice	**Consistently** behaves in line with all 10 domains of professional practice
Do: Entrustable Professional Activities (EPAs)	Is able to **be present and observe**	Is able to **act with direct supervision**	Is able to **act with indirect supervision** (i.e., ready access to a supervisor)	Is able to **act with supervision at a distance** (i.e., limited access to a supervisor)	Is able to supervise others
Know: Knowledge guides	Has **heard of** some of the topics in this knowledge guide	**Knows the topics and concepts** in this knowledge guide	**Knows how to apply** this knowledge to practice	**Frequently shows they apply** this knowledge to practice	**Consistently** demonstrates application of this knowledge to practice

		Entry criteria	Progression criteria		Completion criteria
	Learning goals	Entry into training *At entry into training, trainees will:*	Specialty foundation *By the end of this phase, trainees will:*	Specialty consolidation *By the end of this phase, trainees will:*	Transition to Fellowship *By the end of training, trainees will:*
Be	**1. Professional behaviours**	**Level 5** consistently behave in line with all ten domains of professional practice	**Level 5** consistently behave in line with all ten domains of professional practice	**Level 5** consistently behave in line with all ten domains of professional practice	**Level 5** consistently behave in line with all ten domains of professional practice
Do	**2. Team leadership:** Lead a team of health professionals	**Level 2** be able to act with direct supervision	**Level 3** be able to act with indirect supervision	**Level 4** be able to act with supervision at a distance	**Level 5** be able to supervise others
	3. Supervision and teaching: Supervise and teach professional colleagues	**Level 3** be able to act with indirect supervision	**Level 3** be able to act with indirect supervision	**Level 4** be able to act with supervision at a distance	**Level 5** be able to supervise others
	4. Quality improvement: Identify and address failures in health care delivery	**Level 1** be able to be present and observe	**Level 3** be able to act with indirect supervision	**Level 4** be able to act with supervision at a distance	**Level 5** be able to supervise others
	5. Clinical assessment and management: Clinically assess and manage the ongoing care of patients	**Level 3** be able to act with indirect supervision	**Level 3** be able to act with indirect supervision	**Level 4** be able to act with supervision at a distance	**Level 5** be able to supervise others
	6. Management of transitions in care: Manage the transition of patient care between health professionals, providers, and contexts	**Level 3** be able to act with indirect supervision	**Level 3** be able to act with indirect supervision	**Level 4** be able to act with supervision at a distance	**Level 5** be able to supervise others
	7. Acute care: Manage the care of acutely unwell patients	**Level 3** be able to act with indirect supervision	**Level 3** be able to act with indirect supervision	**Level 4** be able to act with supervision at a distance	**Level 5** be able to supervise others
	8. Longitudinal care: Manage and coordinate the longitudinal care, and appropriate transitions in care, of patients with chronic illness, disability, and/or long-term health issues	**Level 3** be able to act with indirect supervision	**Level 3** be able to act with indirect supervision	**Level 4** be able to act with supervision at a distance	**Level 5** be able to supervise others
	9. Communication with patients: Discuss diagnoses and management plans with patients and their families, /carers	**Level 3** be able to act with indirect supervision	**Level 3** be able to act with indirect supervision	**Level 4** be able to act with supervision at a distance	**Level 5** be able to supervise others
	10. Prescribing: Prescribe and monitor therapies tailored to patients' needs and conditions	**Level 2** be able to act with direct supervision	**Level 3** be able to act with indirect supervision	**Level 4** be able to act with supervision at a distance	**Level 5** be able to supervise others
	11. Procedures: Plan, prepare for, perform, and provide aftercare for important practical procedures	**Level 1** be able to be present and observe	**Level 2** be able to act with direct supervision	**Level 4** be able to act with supervision at a distance	**Level 5** be able to supervise others

		Entry criteria	Progression criteria		Completion criteria
	Learning goals	Entry into training *At entry into training, trainees will:*	Specialty foundation *By the end of this phase, trainees will:*	Specialty consolidation *By the end of this phase, trainees will:*	Transition to Fellowship *By the end of training, trainees will:*
	12. Investigations: Select, organise, and interpret investigations	**Level 2** be able to act with direct supervision	**Level 3** be able to act with indirect supervision	**Level 4** be able to act with supervision at a distance	**Level 5** be able to supervise others
	13. Clinic management: Manage an outpatient clinic	**Level 2** be able to act with direct supervision	**Level 3** be able to act with indirect supervision	**Level 4** be able to act with supervision at a distance	**Level 5** be able to supervise others
Know	**14. Scientific foundations of endocrinology**	**Level 2** know the topics and concepts in this knowledge guide	**Level 3** know how to apply this knowledge to practice	**Level 4** frequently show they apply this knowledge to practice	**Level 5** consistently demonstrate application of this knowledge to practice
	15. Disorders of glucose metabolism	**Level 3** knows how to apply this knowledge to practice	**Level 4** frequently show they can apply knowledge in this knowledge guide to specialty practice *(shows how)*	**Level 4** frequently show they apply this knowledge to practice	**Level 5** consistently demonstrate application of this knowledge to practice
	16. Disorders of body weight	**Level 2** know the topics and concepts in this knowledge guide	**Level 3** know how to apply this knowledge to practice	**Level 4** frequently show they apply this knowledge to practice	**Level 5** consistently demonstrate application of this knowledge to practice
	17. Lipid disorders	**Level 2** know the topics and concepts in this knowledge guide	**Level 3** know how to apply this knowledge to practice	**Level 4** frequently show they apply this knowledge to practice	**Level 5** consistently demonstrate application of this knowledge to practice
	18. Disorders of the pituitary, hypothalamus, and of water balance	**Level 2** know the topics and concepts in this knowledge guide	**Level 2** know the topics and concepts in this knowledge guide	**Level 4** frequently show they apply this knowledge to practice	**Level 5** consistently demonstrate application of this knowledge to practice
	19. Thyroid disorders	**Level 3** know how to apply this knowledge to practice	**Level 3** know how to apply this knowledge to practice	**Level 4** frequently show they apply this knowledge to practice	**Level 5** consistently demonstrate application of this knowledge to practice
	20. Adrenal disorders	**Level 2** know the topics and concepts in this knowledge guide	**Level 3** know how to apply this knowledge to practice	**Level 4** frequently show they apply this knowledge to practice	**Level 5** consistently demonstrate application of this knowledge to practice
	21. Parathyroid, calcium and bone disorders	**Level 2** know the topics and concepts in this knowledge guide	**Level 3** know how to apply this knowledge to practice	**Level 4** frequently show they apply this knowledge to practice	**Level 5** consistently demonstrate application of this knowledge to practice

		Entry criteria	Progression criteria		Completion criteria
	Learning goals	Entry into training *At entry into training, trainees will:*	Specialty foundation *By the end of this phase, trainees will:*	Specialty consolidation *By the end of this phase, trainees will:*	Transition to Fellowship *By the end of training, trainees will:*
	22. Neuroendocrine and inherited tumour syndromes	**Level 1** have heard of some of the topics in this knowledge guide	**Level 2** know the topics and concepts in this knowledge guide	**Level 3** know how to apply this knowledge to practice	**Level 4** frequently show they apply this knowledge to practice
	23. Male reproductive endocrinology	**Level 1** have heard of some of the topics in this knowledge guide	**Level 2** know the topics and concepts in this knowledge guide	**Level 3** know how to apply this knowledge to practice	**Level 4** frequently show they apply this knowledge to practice
	24. Female reproductive endocrinology	**Level 1** have heard of some of the topics in this knowledge guide	**Level 2** know the topics and concepts in this knowledge guide	**Level 3** know how to apply this knowledge to practice	**Level 4** frequently show they apply this knowledge to practice
	25. Variations in sex characteristics and gender identity	**Level 1** have heard of some of the topics in this knowledge guide	**Level 2** know the topics and concepts in this knowledge guide	**Level 3** know how to apply this knowledge to practice	**Level 4** frequently show they apply this knowledge to practice

Learning, teaching and assessment requirements

Overview

Requirements over the course of training

What do trainees need to do?	When do trainees need to do it?
Entry	
1 training application	At the start of the specialty foundation phase. Due 28 February if starting at the beginning of the year and 31 August if starting mid-year.
Learning	
Minimum 36 months FTE professional experience	Minimum 12 months FTE during each phase.
Endocrinology meeting attendance	Before the end of Advanced Training.
Endocrinology learning courses	Before the end of Advanced Training.
RACP Advanced Training Orientation resource	During the first 6 months of the specialty foundation phase.
RACP Supervisor Professional Development Program	Before the end of Advanced Training.
RACP Australian Aboriginal, Torres Strait Islander and Māori Cultural Competence and Cultural Safety resource	Before the end of Advanced Training, if not completed during Basic Training. Recommended completion before the specialty consolidation phase.
RACP Health Policy, Systems and Advocacy resource	Before the end of Advanced Training. Recommended completion before the transition to Fellowship phase.
Recommended resources	Recommended completion over the course of Advanced Training.
Teaching	
Nominate 1 research project supervisor	Recommended to be nominated before the specialty consolidation phase.
Assessment	
1 research project	Before the end of Advanced Training. Recommended submission before the transition to Fellowship phase.

Requirements per phase

What do trainees need to do?	When do trainees need to do it?
Learning	
1 rotation plan per rotation	At the start of (or prior to starting) the rotation. Due 28 February for rotations in the first half or whole of the year and 31 August for rotations in the second half of the year.
Teaching	
Nominate 2 supervisors per rotation	At the start of each accredited or approved training rotation.
Assessment	
12 learning captures	Minimum 1 per month.
12 observation captures	Minimum 1 per month.
4 progress reports	Minimum 1 every 3 months.

Entry

Training application

Requirement
1 x training application, at the start of the specialty foundation phase.
Purpose
The training application supports trainees to: • confirm that they meet the program entry criteria • provide essential details for program enrolment, ensuring compliance with RACP standards • establish a formal foundation for their training pathway, enabling access to program resources and support. The application form will be reviewed by RACP staff. Trainees will be able to track the status of applications through the College's new Training Management Platform (TMP). Trainees can submit rotation plans and complete assessments while waiting for their application to be approved.
How to apply
Trainees are to submit a training application for the program using TMP. **Due dates** **28 February** if starting at the beginning of the year. **31 August** if starting mid-year.

Learning

Learning blueprint

This high-level learning program blueprint outlines which of the learning goals the learning requirements *could align* and *will align* with.

	Learning requirements					
Learning goals	**Professional experience**	**Rotation plan**	**RACP Advanced Training Orientation resource**	**RACP Supervisor Professional Development Program**	**RACP Australian Aboriginal, Torres Strait Islander and Māori Cultural Competence and Cultural Safety resource**	**RACP Health Policy, Systems and Advocacy resource**
1. Professional behaviours	Could align	Will align	Will align	Will align	Will align	Will align
2. Team leadership	Could align	x	x	x	x	x
3. Supervision and teaching	Could align	x	x	Will align	x	x
4. Quality improvement	Could align	x	x	x	x	x
5. Clinical assessment and management	Could align	x	x	x	x	x
6. Management of transitions in care	Could align	x	x	x	x	x
7. Acute care	Could align	x	x	x	x	x
8. Longitudinal care	Could align	x	x	x	x	x
9. Communication with patients	Could align	x	x	x	Will align	x
10. Prescribing	Could align	x	x	x	x	x
11. Procedures	Could align	x	x	x	x	x

	Learning requirements					
Learning goals	**Professional experience**	**Rotation plan**	**RACP Advanced Training Orientation resource**	**RACP Supervisor Professional Development Program**	**RACP Australian Aboriginal, Torres Strait Islander and Māori Cultural Competence and Cultural Safety resource**	**RACP Health Policy, Systems and Advocacy resource**
12. Investigations	Could align	x	x	x	x	x
13. Clinic management	Could align	x	x	x	x	Will align
14. Scientific foundations of endocrinology	Could align	x	x	x	x	x
15. Disorders of glucose metabolism	Could align	x	x	x	x	x
16. Disorders of body weight	Could align	x	x	x	x	x
17. Lipid disorders	Could align	x	x	x	x	x
18. Disorders of the pituitary, hypothalamus and of water balance	Could align	x	x	x	x	x
19. Thyroid disorders	Could align	x	x	x	x	x
20. Adrenal disorders	Could align	x	x	x	x	x
21. Parathyroid, calcium and bone disorders	Could align	x	x	x	x	x
22. Neuroendocrine and inherited tumour syndromes	Could align	x	x	x	x	x
23. Male reproductive endocrinology	Could align	x	x	x	x	x
24. Female reproductive endocrinology	Could align	x	x	x	x	x
25. Variations in sex characteristics and gender identity	Could align	x	x	x	x	x

Endocrinology meetings and courses blueprint

	Learning requirements											
Learning goals	**ESA Seminar meeting**	**ADS John R Turtle Diabetes Clinical Skills Course**	**ADS John R Turtle Diabetes Practical Skills Course**	**ANZBMS Annual Scientific Meeting**	**ANZBMS Advanced Clinical Postgrad Meeting**	**New Zealand Society for the Study of Diabetes ASM**	**ANZBMS Clinical Bone Densitometry Course**	**A bone meeting (such as Rotorua Bone Meeting or ANZBMS Annual Meeting)**	**All Aotearoa NZ Society of Endocrinology clinical meetings / trainee days**	**New Zealand Society for the Study of Diabetes trainee days**	**American or European endocrine meeting (recommended)**	**Endocrine Society of Australia annual scientific meeting**
1. Professional behaviours	Could align	Could align	Could align	Could align	Could align	Could align	Could align	Could align	Could align	Could align	Could align	Could align
2. Team leadership	x	x	x	x	x	Could align	x	x	Could align	x	Could align	Could align
3. Supervision and teaching	x	x	x	x	x	Could align	x	x	Could align	x	Could align	Could align
4. Quality improvement	Could align	x	x	x	x	Could align	Could align	x	Could align	x	Could align	Could align
5. Clinical assessment and management	Could align	Will align	x	Will align	Will align	Could align	Will align	Will align	Could align	Will align	Could align	Could align
6. Management of transitions in care	x	x	x	x	x	Could align	x	x	Could align	x	Could align	Could align
7. Acute care	Could align	x	x	x	x	Could align	x	x	Could align	x	Could align	Could align
8. Longitudinal care	Could align	Will align	x	x	x	Could align	Could align	x	Could align	Will align	Could align	Could align
9. Communication with patients	x	x	x	x	x	Could align	x	x	Could align	x	Could align	Could align

	Learning requirements											
Learning goals	**ESA Seminar meeting**	**ADS John R Turtle Diabetes Clinical Skills Course**	**ADS John R Turtle Diabetes Practical Skills Course**	**ANZBMS Annual Scientific Meeting**	**ANZBMS Advanced Clinical Postgrad Meeting**	**New Zealand Society for the Study of Diabetes ASM**	**ANZBMS Clinical Bone Densitometry Course**	**A bone meeting (such as Rotorua Bone Meeting or ANZBMS Annual Meeting)**	**All Aotearoa NZ Society of Endocrinology clinical meetings / trainee days**	**New Zealand Society for the Study of Diabetes trainee days**	**American or European endocrine meeting (recommended)**	**Endocrine Society of Australia annual scientific meeting**
10. Prescribing	Could align	x	Will align	Could align	Could align	Could align	Will align	Could align	Could align	x	Could align	Could align
11. Procedures	Could align	Will align	Will align	x	x	Could align	Could align	x	Could align	Will align	Could align	Could align
12. Investigations	Could align	Will align	Will align	Could align	Could align	Could align	Will align	Could align	Could align	Will align	Could align	Could align
13. Clinic management	x	x	x	Could align	Could align	Could align	Will align	Could align	Could align	x	Could align	Could align
14. Scientific foundations of endocrinology	Could align	x	x	Could align	x	Could align	Will align	Could align	Could align	x	Could align	Could align
15. Disorders of glucose metabolism	Could align	Will align	Will align	x	x	Could align	x	x	Could align	Will align	Could align	Could align
16. Disorders of body weight	Could align	x	x	x	x	Could align	x	x	Could align	x	Could align	Could align
17. Lipid disorders	Could align	Will align	x	x	x	Could align	x	x	Could align	Will align	Could align	Could align
18. Disorders of the pituitary, hypothalamus and of water balance	Could align	x	x	x	x	x	x	x	Could align	x	Could align	Could align
19. Thyroid disorders	Could align	x	x	x	x	x	x	x	Could align	x	Could align	Could align

	Learning requirements											
Learning goals	**ESA Seminar meeting**	**ADS John R Turtle Diabetes Clinical Skills Course**	**ADS John R Turtle Diabetes Practical Skills Course**	**ANZBMS Annual Scientific Meeting**	**ANZBMS Advanced Clinical Postgrad Meeting**	**New Zealand Society for the Study of Diabetes ASM**	**ANZBMS Clinical Bone Densitometry Course**	**A bone meeting (such as Rotorua Bone Meeting or ANZBMS Annual Meeting)**	**All Aotearoa NZ Society of Endocrinology clinical meetings / trainee days**	**New Zealand Society for the Study of Diabetes trainee days**	**American or European endocrine meeting (recommended)**	**Endocrine Society of Australia annual scientific meeting**
20. Adrenal disorders	Could align	x	x	x	x	x	x	x	Could align	x	Could align	Could align
21. Parathyroid, calcium and bone disorders	Could align	x	x	Will align	Will align	x	Will align	Will align	Could align	x	Could align	Could align
22. Neuroendocrine and inherited tumour syndromes	Could align	x	x	x	x	x	x	x	Could align	x	Could align	Could align
23. Male reproductive endocrinology	Could align	x	x	x	x	x	x	x	Could align	x	Could align	Could align
24. Female reproductive endocrinology	Could align	x	x	x	x	x	x	x	Could align	x	Could align	Could align
25. Variations in sex characteristics and gender identity	Could align	x	x	x	x	x	x	x	Could align	x	Could align	Could align

Professional experience

These requirements can be completed in any sequence over the course of training.

Professional experience

- Complete at least 36 months of relevant professional experience in approved rotations.

Location of training

- Australian trainees are required to complete training in at least 2 different accredited training settings.
- Aotearoa New Zealand trainees are recommended to complete training in at least 2 different accredited training settings.
- All trainees must complete at least 24 months of training in Australia and/or Aotearoa.

Experiential training

- 12 months in an accredited required clinical year (RCY) training position, attending a minimum of 4 outpatient endocrine clinics per week.
- 12 months minimum in an accredited core clinical training position, attending a minimum of 3 endocrine outpatient clinics or 2 endocrine outpatient clinics per week, and an inpatient load with equivalent workload of one outpatient clinic per week.
- 12 months maximum in an approved non-core training position. Appropriate rotations include, but are not limited to:
  - chemical pathology
  - genetics
  - nephrology
  - transplant/autoimmune pathology
  - nuclear medicine
  - obstetric medicine
  - general medicine
  - research or academic study via (MD, PhD or Master's degree) that is specific or relevant to endocrinology.

Further advice - non-core training

- The rotation plan should outline how at least 4 knowledge learning goals (14-25) are addressed during non-core training. To further support your rotation plan it is recommended that you indicate the opportunities available during your rotation that will assist you in addressing these knowledge learning goals.
- If non-core training rotations are completed after core training, the rotation plan should outline how the remaining endocrine learning goals will be met during the non-core training.
- It is recommended that trainees complete their core training first, to ensure sufficient knowledge and skill acquisition, before pursuing complementary learning experiences during non-core training.
- Non-core training is prospectively approved by the TPC. It is important that trainees plan to meet endocrinology learning goals in non-core training rotations.
- Trainees are required to meet the progression criteria to progress to the next phase of training. Trainees who do not meet the progression criteria for a phase of training may have conditions placed on their training to help focus their training on areas for improvement.

Rotation plan

Requirement
1 x rotation plan per rotation.
Description
The rotation plan is a work-based tool to document details of a training rotation and how a trainee intends to cover their program learning goals over the rotation.
Purpose
The rotation plan helps trainees evaluate their learning gaps, curriculum needs, and local opportunities to meet expected standards. It is validated by College staff to ensure it aligns with the professional experience requirements for the program.
How to complete it
Trainees can submit a rotation plan in TMP under the training plan tab. Trainees undertaking their first rotation of their training program must select the following checkbox, 'The rotation start date is also the start date of my Training Program' to record the start date for their training program. If a trainee is expecting a learning goal to be covered during a rotation, select 'yes' for 'coverage offered' and outline the learning opportunities available. See this completed rotation plan for examples of the learning opportunities that may be available for each learning goal. This information will be used by supervisors and overseeing RACP training committee to determine the relevance of the rotation to the program's professional experience requirements. Trainees should upload a copy of the position description and any other supporting information that outlines the training position being undertaken. This should include regular/weekly activities that the trainee will be undertaking during the rotation (e.g. timetable). Trainees can also set custom goals to define personal objectives that they want to achieve during the rotation. These goals should be measurable and align with the trainee's professional objectives, skill gaps, or personal interests. Trainees need to nominate their rotation supervisors in the plan, and they will need to approve the plan in TMP via 'my assigned actions'. For more information on how to complete a rotation plan review the training resources. **Due dates** **28 February** for rotations in the first half or whole of the year. **31 August** for rotations in the second half of the year.

Endocrinology meeting attendance

Requirement

Australia

Trainees must attend either an Endocrine Society of Australia (ESA) Seminar meeting OR an New Zealand Society of Endocrinology (NZSE) Clinical meeting, once over the course of training.

It is also strongly recommended that trainees attend the following once over the course of training:

- an American or European endocrine meeting
- Australia & New Zealand Bone & Mineral Society (ANZBMS) annual scientific meeting.

Aotearoa New Zealand

Trainees must attend the following meetings:

- New Zealand Society of Endocrinology (NZSE) Clinical meeting OR Endocrine Society of Australia (ESA) Seminar meeting, once over the course of Advanced Training
- New Zealand Society for the Study of Diabetes (NZSSD) annual scientific meeting, once over the course of Advanced Training
- Australia & New Zealand Bone & Mineral Society (ANZBMS) annual scientific meeting, once over the course of Advanced Training
- all NZSSD and NZSE trainee days.

It is also strongly recommended that trainees in Aotearoa New Zealand attend an American or European endocrine meeting, once over the course of training.

Purpose

Attendance at professional gatherings of endocrinologists allows the opportunity for many learning opportunities, including:

- providing trainees with a variety of experiences relevant to education and training, and prepares them for ongoing professional development
- learning about updates in evidence-based clinical practice and new research frontiers
- learning about state-of-the art advances in the fields of endocrinology and bone and mineral research, including awards sessions, oral presentations, and poster abstracts
- networking and sharing expertise with industry professionals
- in-depth teaching, from sources independent of training sites, across all training years to cover the learning goals
- presenting research the trainee may have been involved with.

How to complete it

More information regarding each meeting can be found at:

- ESA Seminar meeting
- NZSE Clinical meeting
- NZSSD Annual Scientific Meeting
- ANZBMS Annual Scientific Meeting
- NZSSD Trainee days
- NZSE Trainee days.

Trainees will need to provide evidence of attendance to TMP under the assessment requirements tab.

Courses

Endocrinology learning courses

Requirement
Australia Trainees must attend 2 learning courses over the course of Advanced Training. The following courses are suitable: • Australian Diabetes Society (ADS) John R Turtle Diabetes Clinical Skills Course OR ADS Practical Skills Course (recommended completion during the specialty foundation phase) • ANZBMS Clinical Bone Densitometry Course OR ANZBMS Advanced Clinical Postgraduate Course • New Zealand Society for the Study of Diabetes (NZSSD) Clinician's Weekend. **Aotearoa New Zealand** Trainees must attend 2 learning courses over the course of Advanced Training: • NZSSD Clinician's Weekend Plus, either 1 of: • Australian Diabetes Society (ADS) John R Turtle Diabetes Clinical Skills Course OR ADS Practical Skills Course (Recommended completion during the specialty foundation phase) • ANZBMS Clinical Bone Densitometry Course OR ANZBMS Advanced Clinical Postgraduate Course.
Description
These learning courses allow for teaching from senior endocrinologists and peer interaction while upskilling trainees in endocrinology learning goals, such as complex diabetes management, including diabetes and pregnancy and advanced diabetes complications.
Purpose
Learning courses have several purposes, such as: • improving confidence and competence in the early period of training to manage diabetes on a day-to-day basis • providing opportunity for networking with new trainees in each state • upskilling trainees in the practical aspects of diabetes care as they move from basic physician training to advanced training • networking with other endocrinologists, and learning in a more informal way from conversations with them • providing high quality learning of issues that trainees may have limited access to in their normal training.
How to complete it
More information regarding each course can be found at: • ADS John R Turtle Diabetes Clinical Skills Course • ADS Practical Skills Course • ANZBMS Clinical Bone Densitometry • ANZBMS Advanced Clinical Graduate Course • NZSSD Clinician's Weekend.

Trainees must submit evidence of attendance in TMP under the respective Learning Course requirements for Endocrinology Learning Course 1 and Endocrinology Learning Course 2.

RACP Advanced Training Orientation resource

Requirement
1 RACP Advanced Training Orientation resource, completed during the first 6 months of the specialty foundation phase.
Description
This resource is designed to orient trainees to Advanced Training. It covers areas such as transition to Advanced Training, training and assessment, and trainee support. It is a 'one-stop shop' trainees can return to if they ever want to find a useful resource, or need a refresher on the supporting resources, policies, and systems available to them. Estimated completion time: 1–1.5 hours.
Purpose
The resource is intended to support trainees to successfully navigate their transition to Advanced Training and prepare for unsupervised practice as a specialist physician.
How to complete it
Trainees can complete the Advanced Training Orientation resource on RACP Online Learning. Trainees will receive a certificate of completion on RACP Online Learning when they complete the resource. Completion of this requirement will automatically update in TMP.

RACP Supervisor Professional Develop Program

Requirement
1 RACP Supervisor Professional Development Program (SPDP), consisting of 3 workshops, completed by the end of Advanced Training.
Description
The SPDP consists of 3 workshops: • Practical skills for supervisors • Teaching and learning in healthcare settings • Work-based learning and assessment. See Supervisor Professional Development Program for more information.
Purpose
This requirement aims to prepare trainees for a supervisory / educator role in the workplace and supports trainees' learning aligned with the 'team leadership' and 'supervision and teaching' learning goals.
How to complete it

Register for a supervisor workshop.

Trainees can complete the SPDP in 3 ways:

- virtual workshops
- face-to-face workshops
- online courses.

Workshops are free and presented by volunteer Fellows trained in SPDP facilitation.

RACP Australian Aboriginal, Torres Strait Islander and Māori Cultural Competence and Cultural Safety resource

Requirement

1 Australian Aboriginal, Torres Strait Islander and Māori Cultural Competence and Cultural Safety resource, if not completed during Basic Training.

Trainees must complete the resource by the end of their Advanced Training. Completion is recommended before the specialty consolidation phase.

Description

The Australian Aboriginal, Torres Strait Islander and Māori Cultural Competence and Cultural Safety resource teaches best practice medicine for Aboriginal, Torres Strait Islander, and Māori patients through reflection on the trainee's own cultural values and recognition of their influence on professional practice.

Estimated completion time: 2 hours.

Purpose

This resource supports trainees' learning aligned with the 'professional behaviours' learning goal. Specialist training requires trainees to:

- examine their own implicit biases
- be mindful of power differentials
- develop reflective practice
- undertake transformative unlearning
- contribute to a decolonisation of health services for Indigenous peoples.

How to complete it

Trainees can complete the Australian Aboriginal, Torres Strait Islander and Māori Cultural Competence and Cultural Safety resource on RACP Online Learning.

Trainees will receive a certificate of completion on RACP Online Learning when they complete the resource. Completion of this requirement will automatically update in TMP.

RACP Health Policy, Systems and Advocacy

Requirement
1 RACP Health Policy, Systems and Advocacy resource, completed by the end of Advanced Training.
Description
This resource has been designed for Advanced Trainees as an introduction to health policy, systems, and advocacy. Estimated completion time: 5 hours.
Purpose
The resource aims to support Advanced Trainees in meeting the health policy, systems, and advocacy professional standard and underpinning competencies outlined in their specialty curriculum, and to enable connections between Advanced Trainees' own practice and the nature and attributes of local, national, and global health systems.
How to complete it
Trainees can complete the RACP Health Policy, Systems and Advocacy resource on RACP Online Learning. Trainees will receive a certificate of completion on RACP Online Learning when they complete the resource. Completion of this requirement will automatically update in TMP.

Recommended resources

- RACP Communication Skills resource
- RACP Ethics resource
- RACP Introduction to Leadership, Management and Teamwork resource
- RACP Research Projects resource
- RACP eLearning resources
- RACP curated collections

Teaching

Supervision

Rotation supervisors

Trainees are to have 2 supervisors per rotation:

- minimum 1 supervisor, who is a Fellow of the RACP in endocrinology.

It is recommended that trainees should maintain the same supervisor throughout a phase of training. If a trainee spends 2 phases of training at the same setting, it is recommended that a different supervisor(s) should be named to oversee each phase.

Nominating eligible supervisors

Trainees will be asked to nominate rotation supervisors as part of their rotation plan. Trainees are required to nominate eligible supervisors who meet the above requirements.

A list of eligible supervisors can be found on MyRACP. The list is not available for post-Fellowship trainees. Post-Fellowship trainees can contact the College to confirm supervisor eligibility.

Research project supervisor

Trainees are to nominate 1 research project supervisor over the course of Advanced Training. Nominations are recommended before the specialty consolidation phase.

The research project supervisor guides trainees with their project choice, method, data analysis and interpretation, and quality of written and oral presentation.

More information about this role can be found in the Advanced Training research project guidelines.

Assessment

Assessment blueprint

This high-level assessment program blueprint outlines which of the learning goals *could be* and *will be* assessed by the assessment tools.

	Assessment tools			
Learning goals	**Learning capture**	**Observation capture**	**Progress report**	**Research project**
1. Professional behaviours	Could assess	Could assess	Will assess	Will assess
2. Team leadership	Could assess	Could assess	Will assess	x
3. Supervision and teaching	Could assess	Could assess	Will assess	x
4. Quality improvement	Could assess	Could assess	Will assess	Could assess
5. Clinical assessment and management	Could assess	Could assess	Will assess	x
6. Management of transitions in care	Could assess	Could assess	Will assess	x
7. Acute care	Could assess	Could assess	Will assess	x
8. Longitudinal care	Could assess	Could assess	Will assess	x
9. Communication with patients	Could assess	Could assess	Will assess	x
10. Prescribing	Could assess	Could assess	Will assess	x
11. Procedures	Could assess	Could assess	Will assess	x
12. Investigations	Could assess	Could assess	Will assess	x
13. Clinic management	Could assess	Could assess	Will assess	Could assess

	Assessment tools			
Learning goals	**Learning capture**	**Observation capture**	**Progress report**	**Research project**
14. Scientific foundations of endocrinology	Could assess	Could assess	Will assess	Could assess
15. Disorders of glucose metabolism	Could assess	Could assess	Will assess	Could assess
16. Disorders of body weight	Could assess	Could assess	Will assess	Could assess
17. Lipid disorders	Could assess	Could assess	Will assess	Could assess
18. Disorders of the pituitary, hypothalamus and of water balance	Could assess	Could assess	Will assess	Could assess
19. Thyroid disorders	Could assess	Could assess	Will assess	Could assess
20. Adrenal disorders	Could assess	Could assess	Will assess	Could assess
21. Parathyroid, calcium and bone disorders	Could assess	Could assess	Will assess	Could assess
22. Neuroendocrine and inherited tumour syndromes	Could assess	Could assess	Will assess	Could assess
23. Male reproductive endocrinology	Could assess	Could assess	Will assess	Could assess
24. Female reproductive endocrinology	Could assess	Could assess	Will assess	Could assess
25. Variations in sex characteristics and gender identity	Could assess	Could assess	Will assess	Could assess

Learning capture

Requirement
12 learning captures per phase of training, minimum 1 per month. *Refer to RACP Flexible Training Policy for information on part-time training (item 4.2).*
Description
The learning capture is a work-based assessment that involves a trainee capturing, and reflecting on, professional development activities, including evidence of work-based learning linked to specific learning goals.
Purpose
The learning capture assists trainees to reflect on experiences, promotes critical thinking, and connects these to a trainee's learning goals and professional development. It is also a valuable mechanism for trainees to enhance their understanding of complex topics and less common experiences that may be difficult to encounter in traditional training.
How to complete it
The learning capture is completed via TMP under the 'assessment requirements' tab. For more information on how to complete a learning capture review the training resources.

Observation capture

Requirement
12 observation captures per phase of training, minimum 1 per month. *Refer to RACP Flexible Training Policy for information on part-time training (item 4.2).*
Description
An observation capture is a work-based assessment which provides a structured process for trainees to demonstrate their knowledge and skills in real-time workplace situations, while assessors observe and evaluate performance.
Purpose
The purpose of the observation capture is to assess skill development, track progress, and provide targeted feedback for improvement for trainees against specific learning goals.
How to complete it
Observation captures are completed via TMP under the 'assessment requirements' tab. For more information on how to complete an observation capture review the training resources.

Progress report

Requirement
4 progress reports per phase of training, minimum 1 every 3 months. *Refer to RACP Flexible Training Policy for information on part-time training (item 4.2).*
Description
A progress report is an assessment that documents trainees' and supervisors' assessment of trainee progress against the training program learning goals over a period of training.
Purpose
Progress reports assess knowledge and skill development, track progress against the phase criteria, and provide targeted feedback for improvement.
How to complete it
Progress reports are completed via TMP under the assessment requirements tab. Trainees must: • self-assess against the program's learning goals • record any leave taken during the covered training period • provide summary comments about the rotation For more information on how to complete a progress report review the training resources

Research project

Requirement
1 x research project over the course of Advanced Training.
Description

The research project should be one with which the trainee has had significant involvement in designing, conducting the research and analysing data. Trainees may work as part of a larger research project but must have significant input into a particular aspect of the study.
 	
Research projects are not required to be specialty-specific but are required to be broadly relevant to trainees' area of specialty. Broadly relevant can be defined as topics that can enhance, complement and inform trainees' practice in the chosen specialty.
 	
Three research project types are accepted:
• research in:
  ○ human subjects, populations and communities and laboratory research
  ○ epidemiology
  ○ education
  ○ leadership
  ○ medical humanities
  ○ areas of study which can be applied to care of patients or populations
• audit
• systematic review

The trainee must have a research project supervisor who may or may not be one of their rotation supervisors.

The research project is marked by project reviewers as pass, fail or resubmit and trainees receive qualitative feedback about their project. The research project should be submitted for marking by the end of the specialty consolidation phase to allow time for resubmission in the transition to Fellowship phase if the project is unsatisfactory.

Purpose

The research project enabled trainees to gain experience in research methods; in interpretation of research literature; in participation in research at some stage of their career; and to develop quality improvement skills. Submission of a research project provides evidence of the skills of considering and defining research problems; the systematic acquisition, analysis, synthesis and interpretation of data; and effective written communication.

How to complete it

Detailed information on how to complete the research project can be found in the Advanced Training research project guidelines and can be submitted via TMP under the assessment requirements tab.

There are 3 submission deadlines each year for Advanced Training Research Projects. Trainees may submit their research project at any time; however, submissions received between deadlines will be distributed for review after the next published deadline.

Deadlines: 30 March, 30 May, or 1-15 September (submission window).

Roles and responsibilities

Advanced Trainee

Role
A member who is registered with the RACP to undertake one or more Advanced Training programs.
Responsibilities

• Maintain employment in accredited and/or approved training settings in accordance with training program requirements.
• Act as a self-directed learner:
  ○ be aware of the educational requirements outlined in the relevant curricula and education policies
  ○ actively seek and reflect on feedback from assessors, supervisors, and other colleagues
  ○ plan, reflect on, and manage learning and progression against the curricula standards
  ○ adhere to the deadlines for requirements of the training program.
• Actively participate in accreditation activities undertaken by the RACP.
• Complete the annual Physician Training Survey to assist the RACP and training settings with ongoing quality improvement of the program.

Rotation supervisor

Role
A consultant who provides direct oversight of an Advanced Trainee during a training rotation.
Responsibilities

• Be aware of the educational requirements outlined in the relevant curricula and education policies.
• Oversee and support the progression of Advanced Trainees within the setting:
  ○ assist trainees to plan their learning during the rotation
  ○ support colleagues to complete observation captures with trainees
  ○ provide feedback to trainees through progress reports.
• Actively participate in accreditation activities undertaken by the RACP.
• Complete the annual Physician Training Survey to assist the RACP and training settings with ongoing quality improvement of the program.

Assessor

Role

A person who provides feedback to trainees via the observation capture or learning capture tool. This may include consultants and other medical professionals, allied health professionals, nursing staff, patients and their families, administrative staff, and consumer representatives.

Responsibilities

- Be aware of the learning goals of the training program.
- Provide feedback to support the progression of Advanced Trainees within the setting:
  - complete observation captures
  - provide feedback on learning captures as required.

Progress Review Panel

Role

A Progress Review Panel is a group convened to meet and make evidence-based decisions on trainees' progression through training.

Progress Review Panels ensure the integrity and transparency of progression and completion decisions related to Basic and Advanced Trainees.

Panels are considered experts in the training program, including the curriculum standards, requirements, and administration of the program.

Responsibilities

1. **Make decisions on progression** for all trainees in a training program. The panel will assess if trainees have met or are on track to meet the expected standard for their phase of training, including the completion of learning, teaching and assessment requirements.

2. **Manage trainee conditions to enable trainees to progress** by reviewing trainee performance. Where required, panels will set conditions for trainees to meet, with the goal of helping trainees achieve the program learning goals and progression or completion criteria.

Types of Progress Review Panels

There are two types of RACP Progress Review Panels:

- Primary panel: A primary Progress Review Panel is an RACP committee supported by an RACP staff member. Primary panels are existing Training Program Committees/Subcommittees and will have Progress Review Panel functions included as part of their operations and delegations.
- Secondary panel: These are local panels typically set up within a specific training setting, network, or geographic area. These panels will make progression decisions on behalf of the Training Program Committee and manage conditions placed on trainees.

Trainees will be able to review the panels they are assigned to in the TMP.

Trainee progress decisions, conditions and feedback

- Panels will monitor and review trainee progress and make a phase progression decision.

- Panels may add training conditions that trainees need to meet to progress in training or during their next phase of training.
- Trainees will be able to view progression decisions, conditions and panel feedback on the trainee progress tab in TMP.

RACP oversight committees

Role
RACP-administered committees with oversight of the Advanced Training Program in Australia and Aotearoa New Zealand. This includes the relevant training committee and/or Aotearoa New Zealand training subcommittee.

Responsibilities

- Oversee implementation of the Advanced Training program in Australia and Aotearoa New Zealand:
    - Manage and contribute to the review of program requirements, accreditation requirements, and supervision requirements.
    - Monitor implementation of training program requirements.
    - Implement RACP education policy.
    - Oversee trainees' progression through the training program.
    - Monitor the accreditation of training settings.
    - Case manage trainees on the Training Support pathway.
    - Review progression and certification decisions on application in accordance with the RACP Reconsideration, Review, and Appeals By-Law.
- Work collaboratively with secondary Progress Review Panels, where applicable to ensure the delivery of quality training.
- Provide feedback, guidance, recommendations, and reasoning for decision making to trainees and supervisors.
- Declare conflicts of interest and excuse themselves from decision making discussions when conflicts arise.
- Report to the overseeing RACP committee as required.

Resources

For trainees

- Education policies
- Trainee support
- Trainee responsibilities
- Accredited settings
- Training fees

For supervisors

- Supervisor Professional Development Program
- RACP Research Supervision resource
- RACP Training Support resource
- RACP Creating a Safe Workplace resource