

New curricula

Learning, teaching, and assessment programs

Advanced Training in Palliative Medicine (Adult Medicine and Chapter)



RACP
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About this document

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

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

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Program overview

CURRICULUM STANDARDS

The [curriculum standards](#) are summarised as 20 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 settings 7. Manage acute changes in clinical condition 8. Communication with patients 9. Prescribing 10. Procedures 11. Investigations 12. Clinic and community management 13. End-of-life care
KNOW	14. Pain 15. Managing other symptoms and complications of cancer 16. Cancer and its treatment 17. Non-malignant, progressive life-limiting conditions 18. Acute conditions and palliative care emergencies 19. Managing comorbidities in palliative care 20. Comprehensive end-of-life care

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:

- 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 New Zealand.
- an Advanced Training position in an RACP-accredited training setting or network or an approved non-core training position.

AND

- completed RACP Basic Training, including the Written and Clinical Examinations
- OR
- Fellowship from an eligible medical college

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 FTE [professional experience](#)

- 1 [rotation plan](#) per rotation

[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](#)

[RACP Communication Skills resource](#)

[RACP Ethics resource](#)

[RACP Introduction to Leadership, Management and Teamwork resource](#)

- 1 [communication skills workshop](#) (recommended)

[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

Palliative medicine specialists provide holistic supportive care for people with life-limiting illnesses due to non-malignant disease or cancer. The specialty employs a person- and family-centred model of care to ensure that family and carers also receive practical and emotional support.

Palliative medicine specialists contribute to building capacity in non-specialist health care teams, families, and communities to care for people with life-limiting illnesses, and work to normalise the experience of dying and bereavement as part of life. This high-quality care is enhanced by research, quality improvement, policy development, and advocacy.

Palliative medicine specialists have training, experience, and expertise in:

- understanding acute and chronic disease, including illness trajectories, prognostication, and disease-directed therapies and management
- symptom management, including non-pharmacological and pharmacological treatments
- opioid therapy, safe prescribing, monitoring, and adverse effect management
- communication skills and empathy
- end-of-life care
- leading multidisciplinary teams to provide optimal patient- and family-centred care
- continuous quality improvement, research and policy development, and advocacy to advance palliative care.

Supervising committee

The program is supervised by the Training Program Committee in Palliative Medicine.

Qualification

Trainees who successfully meet the completion standards and criteria of this program will be awarded Fellowship as follows:

- **For trainees who completed RACP Basic Training:** Fellowship of the Royal Australasian College of Physicians (FRACP) and Fellowship of the Australasian Chapter of Palliative Medicine (FACHPM).
- **For post-Fellowship trainees:** Fellowship of the Australasian Chapter of Palliative Medicine (FACHPM).

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 experience, and progression and completion decisions are based on evidence of trainees' competence.

Entry criteria

Entry attributes	<p>Prospective trainees can demonstrate:</p> <ul style="list-style-type: none"> • a commitment and capability to pursue a career as a palliative medicine specialist. • the ability and willingness to achieve the common learning goals for Advanced Training: <ul style="list-style-type: none"> • team leadership • supervision and teaching • the professional behaviours, as outlined in the Competencies
Entry criteria	<p>Prospective trainees must have:</p> <ul style="list-style-type: none"> • 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 New Zealand. • an Advanced Training position in an RACP-accredited training setting or network or an approved non-core training position. <p>AND</p> <ul style="list-style-type: none"> • completed RACP Basic Training, including the Written and Clinical Examinations <p>OR</p> <ul style="list-style-type: none"> • Fellowship from one of the following eligible medical colleges: <ul style="list-style-type: none"> ○ any RACP Fellowship from a Division (AMD and PCHD), Faculty (AFOEM, AFPHM, and AFRM) or Chapter (AChAM and AChSHM) ○ Australasian College for Emergency Medicine ○ Australian and New Zealand College of Anaesthetics ○ Faculty of Pain Medicine, Australian and New Zealand College of Anaesthetics ○ College of Intensive Care Medicine ○ Australian College of Rural and Remote Medicine ○ Royal Australasian College of Surgeons ○ Royal Australian and New Zealand College of Obstetricians and Gynaecologists ○ Royal Australian and New Zealand College of Psychiatrists ○ Royal Australian and New Zealand College of Radiologists ○ Royal Australian College of General Practitioners ○ Royal New Zealand College of General Practitioners

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 **20** 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 which allows 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 ten 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 a ppplication of this knowledge to practice

		Entry criteria	Progression criteria	Completion criteria	
	Learning goals	Entry into training <i>At entry into training, trainees will:</i>	Specialty foundation <i>By the end of this phase, trainees will:</i>	Specialty consolidation <i>By the end of this phase, trainees will:</i>	Transition to fellowship <i>By the end of training, trainees will:</i>
Be	1. Professional behaviours	Level 5 consistently behaves in line with all ten domains of professional practice	Level 5 consistently behaves in line with all ten domains of professional practice	Level 5 consistently behaves in line with all ten domains of professional practice	Level 5 consistently behaves in line with all ten domains of professional practice
Do	2. Team leadership: Provide leadership within teams of health professionals to provide palliative care for patients	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
	3. Supervision and teaching: Supervise and teach professional colleagues	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
	4. Quality improvement: Contribute to continuous quality improvement in health care delivery	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
	5. Clinical assessment and management: Clinically assess and manage the palliative care needs of patients across different stages of life-limiting illnesses	Level 1 be able to be present and observe	Level 2 be able to act with direct supervision	Level 3 be able to act with indirect supervision	Level 5 be able to supervise others
	6. Management of transitions in care settings: Manage the transition of patient care between care settings and contexts, including hospital, home, residential aged care setting, and palliative care units	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
	7. Manage acute changes in clinical condition: Manage the care of acute clinical changes in the palliative care setting, including palliative care emergencies	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
	8. Communication with patients: Communicate with patients across different stages of life-limiting illnesses	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
	9. Prescribing: Prescribe medications tailored to patients' needs, prognosis, and goals of care	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 <i>At entry into training, trainees will:</i>	Specialty foundation <i>By the end of this phase, trainees will:</i>	Specialty consolidation <i>By the end of this phase, trainees will:</i>	Transition to fellowship <i>By the end of training, trainees will:</i>
	10. 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 3 be able to act with indirect supervision	Level 4 be able to act with supervision at a distance
	11. Investigations: Select, organise, and interpret investigations	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
	12. Clinic and community management: Manage the care of community-based patients	Level 1 be able to be present and observe	Level 2 be able to act with direct supervision	Level 3 be able to act with indirect supervision	Level 5 be able to supervise others
	13. End-of-life care: Manage the care of patients in the terminal phase / last days of life	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. Pain	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 4 frequently show they apply this knowledge to practice	Level 5 consistently demonstrate application of this knowledge to practice
	15. Managing other symptoms and complications of cancer	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 4 frequently show they apply this knowledge to practice	Level 5 consistently demonstrate application of this knowledge to practice
	16. Cancer and its treatment	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 4 frequently show they apply this knowledge to practice	Level 5 consistently demonstrate application of this knowledge to practice
	17. Non-malignant, progressive life-limiting conditions	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 4 frequently show they apply this knowledge to practice	Level 5 consistently demonstrate application of this knowledge to practice
	18. Acute conditions and palliative care emergencies	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 <i>At entry into training, trainees will:</i>	Specialty foundation <i>By the end of this phase, trainees will:</i>	Specialty consolidation <i>By the end of this phase, trainees will:</i>	Transition to fellowship <i>By the end of training, trainees will:</i>
	19. Managing comorbidities in palliative care	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 4 frequently show they apply this knowledge to practice	Level 5 consistently demonstrate application of this knowledge to practice
	20. Comprehensive end-of-life care	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

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 full time equivalent (FTE) professional experience	Minimum 12 months FTE during each phase.
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.
RACP Communication Skills resource	Before the end of Advanced Training, if not completed during Basic Training.
RACP Ethics resource	Before the end of Advanced Training, if not completed during Basic Training.
RACP Introduction to Leadership, Management and Teamwork resource	Before the end of Advanced Training, if not completed during Basic Training.
1 communication skills workshop (recommended)	Recommended completion before the end of Advanced Training.
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 the rotation.
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
<p>The training application supports trainees to:</p> <ul style="list-style-type: none"> confirm that they meet the program entry criteria provide essential details for program enrolment, ensuring compliance with RACP standards establishes a formal foundation for their training pathway, enabling access to program resources and support <p>The application form will be reviewed by the RACP staff. Trainees will be able to track the status of your application through the College's new Training Management Platform (TMP).</p> <p>Trainees can submit rotation plans and complete assessments while waiting for their application to be approved.</p>
How to apply
<p>Trainees are to submit a training application for the program using TMP.</p> <p>Due dates</p> <p>28 February if starting at the beginning of the year.</p> <p>31 August if starting mid-year.</p>

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 goals	Learning requirements						
	Professional experience	Learning 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	Palliative Medicine communication skills workshop (recommended)
1. Professional behaviours	Could align	Will align	Will align	Will align	Will align	Will align	Will align
2. Team leadership	Could align	x	x	x	x	x	Could align
3. Supervision and teaching	Could align	x	x	Will align	x	x	Could align
4. Quality improvement	Could align	x	x	x	x	x	x
5. Clinical assessment and management	Could align	x	x	x	x	x	Could align
6. Management of transitions in care settings	Could align	x	x	x	x	x	Could align
7. Manage acute changes in clinical condition	Could align	x	x	x	x	x	Could align
8. Communication with patients	Could align	x	x	x	Will align	x	Will align
9. Prescribing	Could align	x	x	x	x	x	Could align
10. Procedures	Could align						Could align
11. Investigations	Could align	x	x	x	x	x	Could align

12. Clinic and community management	Could align	x	x	x	x	Will align	Could align
13. End-of-life care	Could align	x	x	x	x	x	Will align
14. Pain	Could align	x	x	x	x	x	Could align
15. Managing other symptoms and complications of cancer	Could align	x	x	x	x	x	Could align
16. Cancer and its treatment	Could align	x	x	x	x	x	Could align
17. Non-malignant, progressive life-limiting conditions	Could align	x	x	x	x	x	Could align
18. Acute conditions and palliative care emergencies	Could align	x	x	x	x	x	Could align
19. Managing comorbidities in palliative care	Could align	x	x	x	x	x	Could align
20. Comprehensive end-of-life care	Could align	x	x	x	x	x	Will align

Professional experience

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

Professional experience
<ul style="list-style-type: none">Complete at least 36 months of relevant professional experience in approved rotations.
Location of training
<ul style="list-style-type: none">Complete training in at least 2 different training settings.Complete at least 24 months of training in Australia and/or Aotearoa New Zealand.
Experiential training
<ul style="list-style-type: none">Minimum 18 months full-time equivalent (FTE) in accredited palliative medicine training positions, consisting of:<ul style="list-style-type: none">6 months FTE of inpatient unit/hospice6 months FTE of community setting6 months FTE of teaching hospital/consultation6 months FTE in an accredited cancer care setting6 months FTE of hospital consultation/community/inpatient palliative medicine training or training in a related specialtyMaximum 6 months FTE in a prospectively approved non-core training position, that is palliative medicine related, including research or academic study

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 period.
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
<p>Trainees can submit a rotation plan in TMP under the training plan tab.</p> <p>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.</p> <p>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 these completed</p>

[rotation plans](#) 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.

Courses

RACP Advanced Training Orientation resource

Requirement

1 x 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's a 'one-stop shop' that 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 Development Program

Requirement

1 x 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 supervisor
- Teaching and learning in healthcare
- Work-based learning and assessment.

See [Supervisor Professional Development Program](#) for more information on the program.

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 three 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 x 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 however it's recommended they complete it 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 the Training Management Platform.

RACP Health Policy, Systems and Advocacy resource

Requirement

1 x 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 the Training Management Platform.

RACP Communication Skills resource

Requirement

1 x RACP Communication Skills resource, completed by the end of Advanced Training, if not completed during Basic Training.

Description

The communication skills online resource is a self-directed resource covering communication skills and frameworks to help trainees work through everyday conversations they will have as a physician.

Estimated completion time: 2.5 hours.

How to complete it

Trainees can complete the [RACP Communication Skills 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 the Training Management Platform.

RACP Ethics resource

Requirement

1 x RACP Ethics resource, completed by the end of Advanced Training, if not completed during Basic Training.

Description

In this resource trainees will learn about, discuss and reflect on the main ethical issues facing physicians.

Estimated completion time: 3.5 hours.

How to complete it

Trainees can complete the [RACP Ethics 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 the Training Management Platform.

RACP Introduction to Leadership, Management and Teamwork resource

Requirement

1 x RACP Introduction to Leadership, Management and Teamwork resource, completed by the end of Advanced Training, if not completed during Basic Training.

Description

This resource supports trainee development in leadership, management and teamwork skills and work effectively in multi-disciplinary teams.

Estimated completion time: 1 hour.

How to complete it

Trainees can complete the [RACP Introduction to Leadership, Management and Teamwork 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 the Training Management Platform.

Communication skills workshop (recommended)

Requirement

Recommended: Attend 1 x palliative medicine communication skills workshop by the end of Advanced Training.

Description

Suitable workshops include those run by:

- RACP Australasian Chapter of Palliative Medicine
- Australian and New Zealand Society of Palliative Medicine
- Sydney Institute of Palliative Medicine
- Queensland Palliative Medicine Training Network
- Deakin University

Contact the relevant organisation for more workshop information.

Purpose

To provide trainees with essential communication skills training specific to palliative medicine.

How to complete it

As this is a recommended activity, trainees are not required to provide evidence of attendance. However, they may wish to record their learning experience using the learning capture tool.

[Learning captures](#) will be completed using the College's new Training Management Platform.

Recommended resources

- [RACP Research Projects resource](#)
- [RACP eLearning resources](#)
- [RACP curated collections](#)

Teaching

Supervision

Rotation supervisors

Trainees are to have 2 x supervisors per rotation, including:

- Minimum 1 x supervisor, who is Fellow of the RACP in Palliative Medicine (Adult Medicine) or a Fellow of the AChPM.

Nominating eligible supervisors

Trainees will be asked to nominate rotation supervisors as part of their learning 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 us](#) to confirm supervisor eligibility.

Research project supervisor

Trainees are to nominate 1 x research project supervisor over the course of Advanced Training. Recommended to be nominated 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 settings	Could assess	Could assess	Will assess	x
7. Manage acute changes in clinical condition	Could assess	Could assess	Will assess	x
8. Communication with patients	Could assess	Could assess	Will assess	x
9. Prescribing	Could assess	Could assess	Will assess	x
10. Procedures	Could assess	Could assess	Will assess	
11. Investigations	Could assess	Could assess	Will assess	x

12. Clinic and community management	Could assess	Could assess	Will assess	x
13. End-of-life care	Could assess	Could assess	Will assess	x
14. Pain	Could assess	Could assess	Will assess	Could assess
15. Managing other symptoms and complications of cancer	Could assess	Could assess	Will assess	Could assess
16. Cancer and its treatment	Could assess	Could assess	Will assess	Could assess
17. Non-malignant, progressive life-limiting conditions	Could assess	Could assess	Will assess	Could assess
18. Acute conditions and palliative care emergencies	Could assess	Could assess	Will assess	Could assess
19. Managing comorbidities in palliative care	Could assess	Could assess	Will assess	Could assess
20. Comprehensive end-of-life-care	Could assess	Could assess	Will assess	Could assess

Learning capture

Requirement

12 x learning captures per phase of training, minimum 1 per month.

Refer to [RACP Flexible Training Policy](#) for further 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 x observation captures per phase of training, minimum 1 per month.

Refer to [RACP Flexible Training Policy](#) for further 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 x progress reports per phase of training, minimum 1 every 3 months.

Refer to [RACP Flexible Training Policy](#) for further 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 types of research projects are accepted:

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 the training committee 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 deadlines that must be followed when submitting an Advanced Training Research Project. Trainees can choose to submit their Research Project on any of these 3 dates during the year.

Australia: 31 March, 15 June, or 15 September.

Aotearoa New Zealand: 31 March, 15 June, or 15 December.

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 training settings.
- 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 their learning and progression against the curricula standards
 - adhere to the deadlines for requirements of the training program.
- Actively participate in training setting / network accreditation 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 rotation accreditation 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 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 review 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](#)