

The Royal Australasian College of Physicians

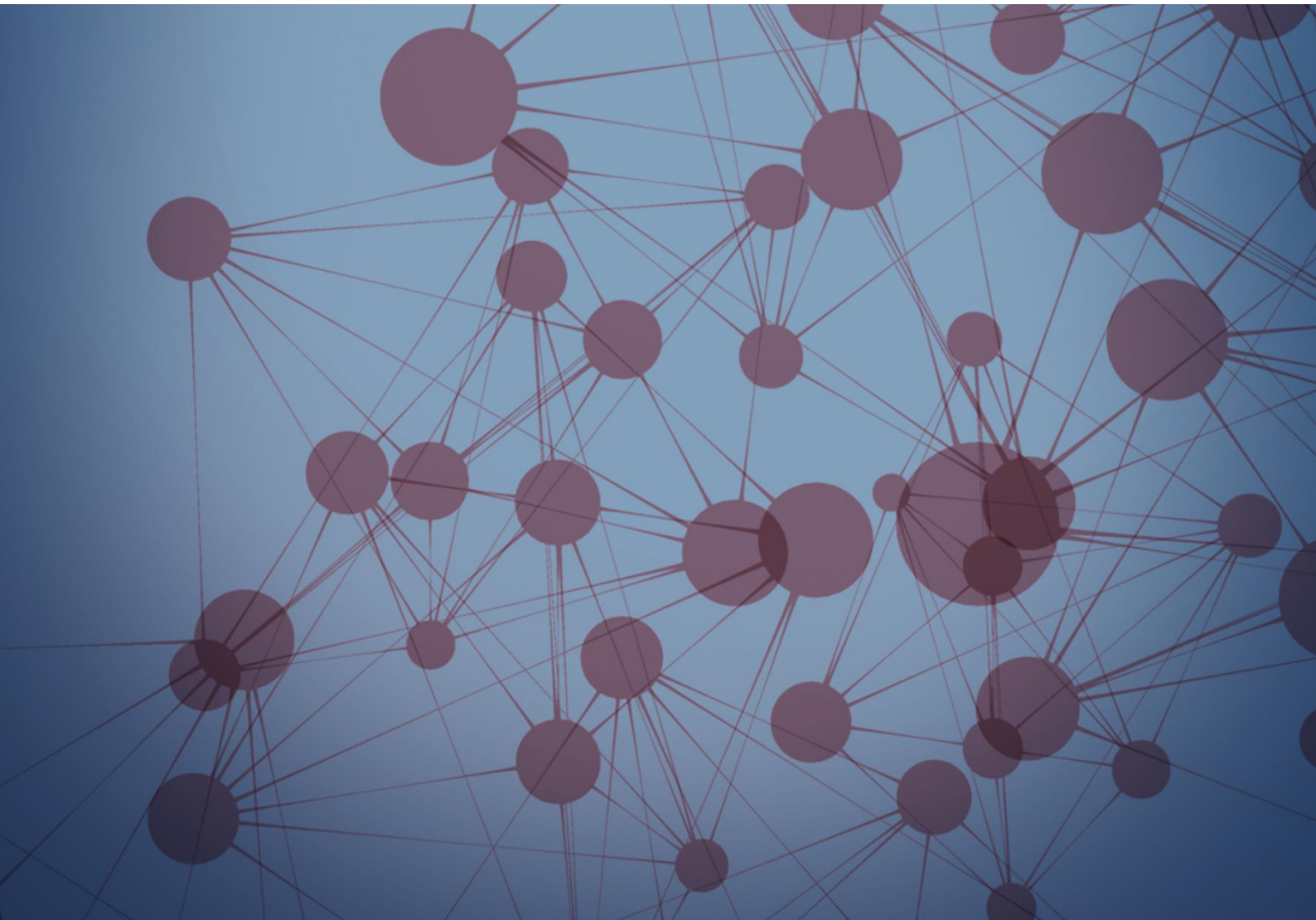
Education renewal

2025 Learning and assessment interim guide

New Basic Training curricula



RACP
Specialists. Together



About this document

This guide is designed to provide information for you, the Basic Trainee and Basic Training supervisor, about the approach to learning and assessment.

Learning outcomes

- use the learning goals and curricula standards to guide learning and professional development
- use the Basic Training assessment tools in the workplace
- complete progress reports for each training rotation and phase of training.

This guide will help you to navigate the assessment tools in the new Basic Training program. Throughout this guide there are links to other resources. We recommend you review these to get a thorough understanding of how you will be assessed.

- Access the full suite of [support available and resources](#)
- make sure you know your [Basic Training curriculum](#).

Basic Trainees who commenced training before 2025 should refer to the [PREP Program Requirements](#).

We want to your feedback on this guide including what information is missing or what you would find helpful. Please email curriculum@racp.edu.au for more information or to provide feedback.

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At a glance

RACP approach to learning and assessment

- The [curricula standards](#) outline the expected standard for behaviours, tasks, and knowledge against which your abilities are measured. These standards take the form of ten key learning goals to be achieved by the end of Basic Training.
- Your progress in the learning goals is continuously assessed through regular captures of work-based learning in a range of assessment tools.
- You will have three main progression checkpoints as you move through the three phases of Basic Training: Foundation, Consolidation, and Completion.

Assessment tools	Frequency
 Basic Training entry application - checks that you meet the entry criteria and enrolls you into training. The form includes a step for your Director of Physician / Paediatric Education to endorse your registration	1 at the start of the Foundation phase
 Learning Plan - helps you plan your learning opportunities for each training rotation.	1 per rotation
 Learning Captures prompt you to enter evidence of work-based learning linked to learning goals.	12 per phase
 The Observation Capture is a supervised observation of your work-based performance linked to learning goals.	12 per phase
Progress Reports	
 Rotation Progress Report - assesses your progress over a training rotation.	1 per rotation
 Mid-phase Progress Report - check-in on your progress mid-way through a phase of training.	1 per phase
 Phase Progress Report - assesses your progress over a phase of training.	1 per phase
Examinations	
Each year the RACP run written and clinical examinations . These exams are typically taken by trainees in the Completion phase of training.	
 Written examination assesses your applied knowledge.	1 each for the Basic Training program
 Clinical examination assesses your ability to perform clinical assessment of patients.	

RACP approach to learning and assessment

The curricula standards outline the educational objectives of the training program and the expected standard for behaviours, tasks, and knowledge against which your abilities are measured.

The new Basic Training curricula standards have been designed in line with international best practice with the aim of improving paediatrician and physician training, and ultimately patient care and patient outcomes.

Curricula standards



BE

Competencies

Be provides guidance into professional behaviours, values and practices expected of you as you adopt the professional identity of a physician.



DO

Entrustable Professional Activities

Do focuses on the essential work tasks you need to gain competence in, perform safely, and be entrusted by your supervisors to do in the workplace.

By the end of Basic Training, you need to be able to perform these tasks with supervision at a distance.



KNOW

Knowledge Guides

Know exemplifies the ability to integrate into practice and to commit to the lifelong learning of a significant body of evolving knowledge.

Learning goals

The curricula standards form these ten learning goals that set the standard for your learning and assessment in the Basic Training program.

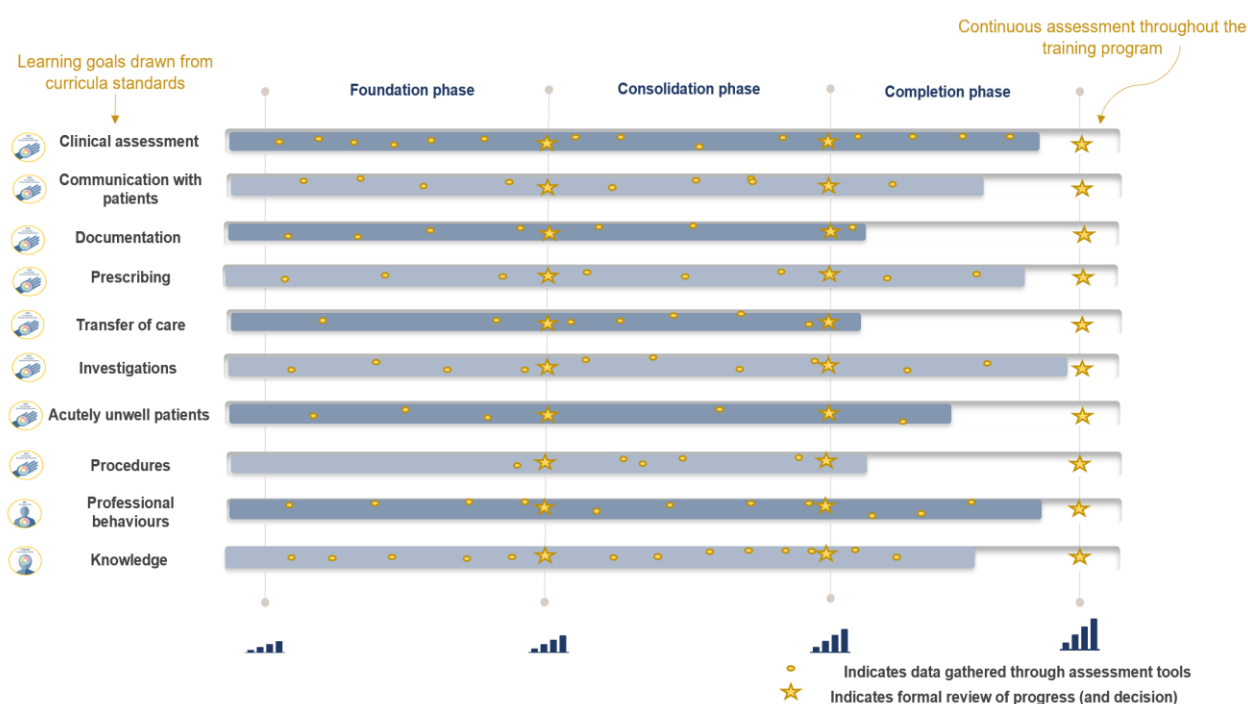
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- | | | |
|----|---|---|
| 1. |  | <u>Clinical assessment</u>
Clinically assess patients, incorporating interview, examination, and formulation of a differential diagnosis and management plan. |
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|----|---|---|
| 2. |  | <u>Communication with patients</u>
Discuss diagnoses and management plans with patients and their families or carers. |
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| 3. |  | <u>Documentation</u>
Document the progress of patients in multiple settings. |
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| 4. |  | <u>Prescribing</u>
Prescribe medications tailored to patients' needs and conditions. |
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| 5. |  | <u>Transfer of care</u>
Transfer care of patients. |
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- | | | |
|----|---|---|
| 6. |  | <u>Investigations</u>
Choose, organise, and interpret investigations. |
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- | | | |
|----|---|---|
| 7. |  | <u>Acutely unwell patients</u>
Assess and manage acutely unwell patients. |
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- | | | |
|----|---|--|
| 8. |  | <u>Procedures</u>
Plan, prepare for, perform, and provide after care for important procedures. |
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|----|---|---|
| 9. |  | <u>Professional behaviours</u>
Behave in accordance with the expected professional behaviours, values, and practices. |
|----|---|---|
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- | | | |
|-----|---|--|
| 10. |  | <u>Knowledge</u>
Acquire the baseline level of knowledge for Basic Training. |
|-----|---|--|
-

Learning and assessment

You will have three phases of training in which to achieve your learning goals.



You will be continuously assessed on the ten learning goals through regular capture of work-based learning in a range of assessment tools.



You will have a variety of assessors contributing feedback on your performance throughout training, all are encouraged to provide narrative feedback to explain the ratings they have selected in the assessment tools.

Your supervisors and local Progress Review Panel* will use the information collected through the assessment tools to form an overall picture of your progress over time and make progression decisions. It's important to keep this in mind when you use the tools to document reflection on learning and self-assess your progress.

*In 2025, until technology is available to support panels, RACP oversight committees will act as panels and continue to be responsible for monitoring and assessing trainees' progression through training.

Assessment tools

With your assessors and supervisors, you will use work-based assessment tools to set goals, capture evidence of learning, and progress through training. It is your role to act as a self-directed learner and actively seek and reflect on feedback from assessors, supervisors, and other colleagues. The work-based assessments will be supplemented by formal examinations in the completion phase of training.



Entry application

Checks that you meet the entry criteria and enrolls you into training.



Learning plan

Helps you plan your learning opportunities for each training rotation.



Learning capture

You enter evidence of work-based learning linked to learning goals.



Observation capture

Supervised observation of your work-based performance linked to learning goals.



Rotation progress report

Assesses your progress over a training rotation.



Mid-phase progress report

Check-in on your progress mid-way through a phase of training.



Phase progress report

Assesses your progress over a phase of training.



Written examination

Assesses your applied knowledge.



Clinical examination

Assesses your ability to perform clinical assessment of patients.

Assessment blueprint

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

Assessment tools

Learning goals	Registration form	Learning Capture	Observation Capture	Rotation Plan and Progress Report	Phase Plan and Progress Report	Written Examination	Clinical Examination
1. Clinical assessment	×	Could assess	Could assess	Will assess	Will assess	×	Will assess
2. Communication with patients	×	Could assess	Could assess	Will assess	Will assess	×	Could assess
3. Documentation	×	Could assess	Could assess	Will assess	Will assess	×	×
4. Prescribing	×	Could assess	Could assess	Will assess	Will assess	Could assess	Could assess
5. Transfer of care	×	Could assess	Could assess	Will assess	Will assess	×	×
6. Investigations	×	Could assess	Could assess	Will assess	Will assess	Could assess	Could assess
7. Acutely unwell patients	×	Could assess	Could assess	Will assess	Will assess	×	×
8. Procedures	×	Could assess	Could assess	Will assess	Will assess	×	×
9. Professional behaviours	×	Could assess	Could assess	Will assess	Will assess	×	Could assess
10. Knowledge	×	Could assess	Could assess	Will assess	Will assess	Will assess	×

Basic Training entry application

Before completing the application for entry into the RACP Basic Training program, it is important to ensure you meet the selection and entry criteria. The entry criteria for the Basic Training program includes:

- A Basic Training position in an RACP-accredited training setting or network.
- 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 MCNZ if applying in Aotearoa New Zealand

Review the full selection and entry criteria in the [learning, teaching, and assessment programs](#).



About the entry application

Purpose

Checks that trainees meet the entry criteria and enrolls them into training.

Description

An online application form to provide enrolment details and evidence that the trainee satisfies the entry criteria. The form includes a step for the trainee's Director of Physician / Paediatric Education to endorse the application.

This form is only used once when applying for the Basic Training program.

How to apply

Trainees are to submit an entry application using the College's new Training Management Platform (TMP).

Further information on how to access the TMP will be available in late 2024.

Once you have been accepted into the Basic Training program you should start to familiarise yourself with the curricula and training requirements.

Resource	Why review?
<u>Basic Training curricula standards</u>	The curricula standards outline what you are expected to be (<u>Competencies</u>), know (<u>Knowledge Guides</u>) and do (<u>Entrustable Professional Activities</u>). These standards are central to the Basic Training learning and assessment program.
<u>Basic Training learning, teaching, and assessment programs</u>	This resource outlines the training program requirements for Basic Trainees in Adult Internal Medicine and Paediatrics & Child Health.
<u>College Learning Series</u>	A growing and interactive online resource specifically targeted to the needs of Basic Trainees and mapped to the Knowledge Guides.
<u>Online learning resources</u>	Resources on a variety of topics including communication skills, professional skills, and supervision.
<u>Education policies</u>	Education policies underpin all College training programs and are revised regularly.

Learning plan



Requirement

1 learning plan per training rotation, minimum one per three months

Description

The learning plan is a work-based learning tool that documents what trainees intend to learn during their rotation.

Purpose

The learning plan assists trainees in planning their learning for each rotation. It helps trainees to:

- explicitly document self-assessment of their learning gaps, goal setting, and strategies to address and achieve goals
 - proactively take control of their learning and career trajectories
 - enhance awareness of their own areas of strengths and gaps
 - make the most of learning opportunities available in their training setting, including conversations with supervisors.
-

How to complete it

Learning plans will be completed using the College's new Training Management Platform. Instructions on how to complete a learning plan will be available in late 2024.

Learning Capture



Requirement

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

Description

The learning capture is a work-based assessment tool that logs evidence of a trainee's learning experiences and includes their reflective commentary. This tool is trainee-led, with optional input from assessors.

Suitable learning experiences include:

- professional experiences
 - courses and workshops
 - personal reflection
 - readings and resources.
-

Purpose

The learning capture helps trainees document and reflect on learning experiences that are relevant to their learning goals. Each learning capture will form one piece of data that will be considered as part of a trainee's overall program of assessment.

Reflection is important for learning and a career in medicine, improving understanding, showing outcomes of learning and promoting lifelong learning. Reflection is also valuable in improving clinical competence and performance and for ensuring continual professional development (Kaufman & Mann 2010*).

How to complete it

Learning captures will be completed using the College's new Training Management Platform. Instructions on how to complete a learning capture will be available in late 2024.

Observation Capture



Requirement

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

Description

The observation capture is a work-based assessment tool that documents a supervised observation of a trainee's performance undertaking a work-task. A range of assessors can observe a trainee completing a work task and provide them with feedback. It is useful to a trainee's development to seek feedback from a variety of colleagues.

Observation captures can be conducted by a variety of assessors, including those who are not directly involved with supervising the trainee. Assessors can include supervisors, allied health team members, patients, or other colleagues.

Purpose

The observation capture helps trainees document a supervised observation of their performance undertaking a work-task relevant to their learning goals. Each observation capture will form one piece of data that will be considered as part of a trainee's overall program of assessment.

Direct observation is a key assessment strategy in medical education. Conducting frequent observations provides information on performance specific to the context and moment in time when an activity was observed. This could include a clinical task such as taking a history from a patient or explaining a management plan to a family. Each observation capture is linked to the trainee's learning goals.

How to complete it

Observation captures will be completed using the College's new Training Management Platform. Instructions on how to complete an observation capture will be available in late 2024.



Additional resources

Listen to podcasts - [What is reflection?](#) and [The Observer Effect in MedEd – The Learner’s View](#)



Example of an Observation Capture in the workplace

The learning goals set out common tasks that you perform in the workplace. These tasks involve a set of integrated skills that enable you to perform the task successfully.

For example, writing a discharge summary will demonstrate to an assessor more than your written communication skills. An integration of clinical, communication and systems skills are required. Proficiency to complete this activity would include an ability to work with colleagues, communication with patients and clinical reasoning skills.

Performing important and everyday work tasks means that skills and knowledge are not demonstrated in isolation.

Example

- **Learning goal 1:** Clinical Assessment - Clinically assess patients, incorporating interview, examination, and formulation of a differential diagnosis and management plan.
- **Trainee task completed:** patient interview and examination.
- **Assessment tool used:** Observation Capture.

During the encounter, a trainee may demonstrate the following skills:

<i>takes patient-centred histories using appropriate lay terms and avoiding medical jargon</i>	<i>demonstrates active listening skills</i>	<i>perform inadequate physical examinations</i>
<i>is respectful of patients’ cultures, and attentive to social determinants of health</i>		<i>performs hand hygiene and takes infection control precautions at appropriate moments</i>
<i>inadequately consult with senior colleagues</i>	<i>maximises patient autonomy and supports patients’ decision making</i>	<i>formulates appropriate differential diagnoses</i>

Assessing this task: ten Cate (2013)¹ explains that in practice, decisions by supervisors watching a trainee perform a task are affected by four groups of variables:

1. attributes of the trainee (tired, confident, level of training)
2. attributes of the supervisors (e.g., lenient or strict)
3. context (e.g., time of the day, facilities available)
4. the nature of the situation (rare, complex versus common, easy).

These variables, along with all the behaviours and competencies displayed will assist the supervisor to assess performance. The assessor in an Observation Capture will select one of the following statuses. *The trainee...*:

- is able to be present and observe
- is able to act with direct supervision
- is able to act with indirect supervision
- is able to act with supervision at a distance
- is able to provide supervision.

¹ ten Cate, O., 2013. Nuts and Bolts of Entrustable Professional Activities. *Journal of Graduate Medical Education*, [online] 5(1), pp.157-158. Available at: <<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3613304/>>.

Progress reports

There are three types of progress reports in the Basic Training program. The reports give you the opportunity to reflect on your progress against what was planned. Your supervisors include their comments and make a recommendation on your progress.

	Number required	Completed with	Purpose
Rotation Progress Report	1 per rotation	Rotation Supervisor	Assesses your progress over a training rotation.
Mid-phase Progress Report	1 per phase	Education Supervisor	Check-in on your progress mid-way through a phase of training.
Phase Progress Report	1 per phase	Education Supervisor	Assesses your progress over a phase of training.

Progress reports have the ten learning goals embedded and are used to assess your progress over a rotation or phase. You and your supervisors will:

- **Reflect on current skill level:** where you sit against each learning goal at your current stage of training.
- **Reflect on progress:** demonstrated throughout the phase or rotation and whether it meets expectations, and what learning has occurred.
- **Assess progress:** supervisors will assess you on the competencies and behaviours demonstrated when you are performing tasks.

Progress reports will be completed using the College's new Training Management Platform from mid-2025. Instructions on how to complete a progress report during the first half of 2025 will be available in late 2024.



Additional resources

- Review [The Supervisor Handbook](#)
- Review this article: van der Leeuw, Renée & Slootweg, Irene. (2013). [Twelve tips for making the best use of feedback](#). Medical teacher. 35. 10.3109/0142159X.2013.769676.

Examinations

Each year the RACP run clinical and written examinations which assess clinical knowledge and skills. These exams are typically taken by trainees in the completion phase of training.



Additional resources

Review these RACP online resources to help you prepare for the exams.

- [Divisional Examination Readiness resource](#)
- [Paediatric written exam preparation](#)
- [Adult medicine written exam preparation](#)
- [Clinical Exam series](#)



Divisional Written Examination

Purpose

The [Divisional Written Examination](#) is a summative assessment made up of two papers to assess understanding of basic science and clinical knowledge. Questions are based on topics and concepts detailed in the [Knowledge Guides](#).

See [Divisional Written Examination](#) for a comprehensive guide on the examination process and key dates.



Divisional Clinical Examination

Purpose

The purpose of the [Divisional Clinical Examination](#) is a summative assessment to assess the clinical skills, clinical acumen and interpersonal skills to inform whether trainees have reached the standard for completion of Basic Training.

See [Divisional Clinical Examination](#) for a comprehensive guide on the examination process and key dates.

Assessment tools in the Foundation phase

Figure 1 provides an example of how the assessment program could be applied in the foundation phase. It is important that you keep track of where you are up to with your assessment tools to ensure you meet the Basic Training requirements for each phase and get the best from your learning opportunities.

	ROTATION 1	ROTATION 2	ROTATION 3	ROTATION 4
 TRAINEES AND ASSESSORS	 Learning capture x 3  Observation capture x 3	 Learning capture x 3  Observation capture x 3	 Learning capture x 3  Observation capture x 3	 Learning capture x 3  Observation capture x 3
 ROTATION SUPERVISOR	 Learning plan x 1  Rotation progress report x 1	 Learning plan x 1  Rotation progress report x 1	 Learning plan x 1  Rotation progress report x 1	 Learning plan x 1  Rotation progress report x 1
 EDUCATION SUPERVISOR		 Check-in (Optional)	 Mid-phase progress report x 1	 Check-in (Optional)  Phase progress report x 1
 DIRECTOR OF PHYSICIAN EDUCATION / PANEL	 Entry application x 1			 Progression decision
 RACP OR EMPLOYERS				

Figure 1

Each assessment tool is described in further detail in this guide. Please refer to the Basic Training [learning, teaching, and assessment programs](#) for more information on training requirements.

Support and resources

You can access further resources to support you in the Basic Training program.

The new Basic Training program

Resource	Description
Basic Training curricula standards	The curricula standards outline what you are expected to be (Competencies), know (Knowledge Guides) and do (Entrustable Professional Activities). These standards are central to the Basic Training learning and assessment program.
Basic Training learning, teaching, and assessment programs	This resource outlines the training program requirements for Basic Trainees in Adult Internal Medicine and Paediatrics & Child Health.
Professional Practice Standards	The Professional Standards are broad statements of expected competencies to be attained by all graduates of RACP training programs and maintained throughout expert professional practice.
At-a-glance guides: RACP curricula design principles	The new curricula embed key features of contemporary medical education. Discover more about our design principles and the supporting evidence base with these at-a-glance guides: • Competency-based medical education at-a-glance (PDF) • Programmatic assessment at-a-glance (PDF) • Self-directed learning at-a-glance (PDF)

RACP training program information

Resource	Description
Education policies	Education policies underpin all College training programs and are developed and revised regularly.
Examinations	Information about the Divisional Written Examination and the Divisional Clinical Examination for trainees.
Trainee support	Resources to provide advice on wellbeing and support for trainees and supervisors through RACP training programs.

Training and further development

Resource	Description
Supervisor resources	A variety of resources including the supervisor handbook, and information on how to attend the RACP supervisor training series, the Supervisor Professional Development Program (SPDP).
Online learning resources @ RACP	There are a variety of resources aimed at RACP members on a variety of topics including supervision skills, wellbeing, and clinical topics.
Pomegranate Health Podcasts	Monthly educational podcast covering a variety of contemporary medical issues, relevant to all learning goals.

Contact

For further information please contact the RACP Curriculum Development team

Email: curriculum@racp.edu.au