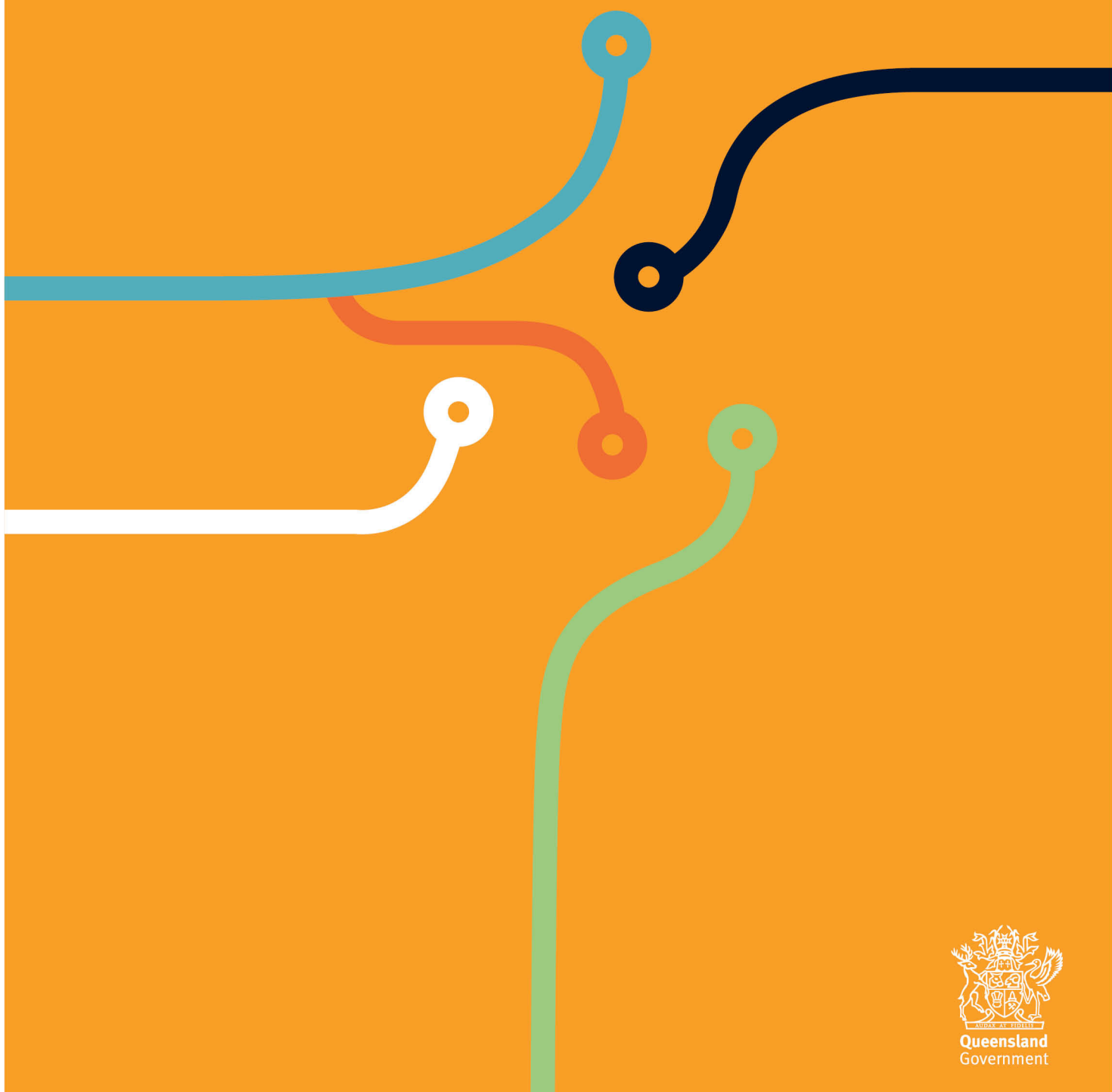


**Queensland Rural
Generalist Pathway**

find your calling 

Community integrated advanced skills training guide



Name of publication Community integrated advanced skills training guide
Version 3.00
Approved December 2024
First published July 2023

Published by **Queensland Rural Generalist Pathway**
PO Box 405, Toowoomba Queensland 4350 Australia
T +61 7 4699 8021
E rural_generalist@health.qld.gov.au

This document is licensed under a Creative Commons Attribution Non-Commercial No Derivatives 4.0 International license.



To view a copy of this license visit <https://creativecommons.org/licenses/by-nc-nd/4.0/>
© Darling Downs Hospital and Health Service, State of Queensland 2023

This work is copyright. In essence you are free to copy and communicate the work in its current form for non-commercial purposes, in accordance with the *Copyright Act 1968*, as long as you attribute the Darling Downs Hospital and Health Service, State of Queensland and abide by the license terms. You may not alter or adapt the work in any way.

For permissions beyond the scope of this license, copyright inquiries should be addressed to:

Principal Project Officer
Intellectual Property
Office of Health and Medical Research GPO Box 48
Brisbane Queensland 4001
T +617 3234 1479
E IP_Officer@health.qld.gov.au

Disclaimer

Queensland Health has made every effort to ensure that the information in this resource, at the time of publication is correct. The information in this resource will be kept under review and future publications will incorporate any necessary amendments. The information in this resource does not constitute clinical advice and should not be relied upon as such in a clinical situation. The information is provided solely on the basis that readers will be responsible for making their own assessment of the matters presented herein and readers are advised to verify all relevant representations, statements and information. Specialist advice in relation to the application of the information presented in this publication must be sought as necessary to ensure the application is clinically appropriate.

In no event, shall Queensland Health be liable (including negligence) for any claim, action, proceeding, demand, liability, costs, damages, expenses or loss (including without limitation, direct, indirect, punitive, special or consequential) whatsoever brought against it or made upon it or incurred by Queensland Health arising out of or in connection with a person's use of information in this publication.

TABLE OF CONTENTS

BACKGROUND AND PURPOSE	4
CONSULTATION	5
KEY FACTORS TO CONSIDER WHEN SETTING UP A COMMUNITY INTEGRATED AST POSITION ...	6
KEY REQUIREMENTS AND APPROVAL PROCESSES	7
STEPS AFTER ACHIEVING COLLEGE ACCREDITATION	8
3-6 MONTHS PRIOR TO COMMENCEMENT	8
FROM COMMENCEMENT UNTIL COMPLETION	8
AFTER COMPLETION OF YOUR AST	8
WHAT DOES THAT LOOK LIKE FOR YOU?	9
SUGGESTED TIMELINE OF SUPERVISOR ACTIVITIES	10
AS SOON AS THE CONCEPT OF COMMUNITY INTEGRATED AST IS FLOATED.....	10
6 - 12 MONTHS PRIOR TO COMMENCEMENT OF THE PROPOSED BLENDED AST PLACE COMMENCING.....	10
DURING THE AST YEAR	10
WHAT DOES THIS LOOK LIKE FOR YOUR SUPERVISOR?	11
CRITICAL SUCCESS FACTORS OF A COMMUNITY INTEGRATED AST POST	12
BENEFITS AND CHALLENGES OF COMMUNITY INTEGRATED ASTS	12
LOCATIONS WHERE TRAINING HAS OCCURRED	12
COMMUNITY INTEGRATED AST TRAINEE CHECKLIST	13
COMMUNITY INTEGRATED AST SUPERVISOR CHECKLIST	15

Background and purpose

With the implementation of a National Rural Generalist Pathway there has been a growing recognition of the importance of in-community training and enduring relationships. There has been increasing interest in encouraging and supporting community integrated advanced skills training (AST). This allows those completing advanced skills in internal medicine, paediatrics, mental health and palliative care to undertake their training primarily based in the rural community of their choice with a mix of remote and onsite supervision by both discipline specialist and community-based supervisor, linking into AST relevant educational opportunities in combination with visits to the tertiary centre or other alternative AST experiences throughout the training period.

This guide provides an overview of the key steps involved in setting up a community integrated AST year in your chosen discipline. It outlines important factors for consideration, the information and documents required and who should be responsible for completing and approving them. A suggested timeline of preparatory activities and key supervisor actions and meeting points has been proposed to guide this process.

We also highlight some of the critical success factors and pitfalls to avoid based on the experiences of those who have completed a community integrated AST along with examples of communities, contexts, and contacts where the AST has been successfully undertaken.

Consultation

The following people were consulted in compiling this document:

1. Dr Erica West - Rural Generalist SMO Mt Isa, GP Liaison Officer, Paeds AST
2. Dr Natalia Anderson - Rural Generalist Trainee, Palliative Care AST candidate, Rockhampton Hospital
3. Dr Ben McIntosh - Rural Generalist Trainee Thursday Island, MH AST candidate
4. Dr Marlow Coates Rural Generalist DMS and Dr Ineke Wever (SMO/GP) - Thursday Island
5. Dr Tiffany Cover - Rural Generalist Longreach, IM AST
6. Dr Bailey Hill - Rural Generalist Stanthorpe, IM AST
7. Dr Marika Goodman - Rural Generalist Atherton, Paeds and Anaesthetics AST
8. Dr Nichole Harch - Rural Generalist Emerald, MH AST
9. Dr John Douyere, Dr Mike Hurley and Deanne Bond - QRGP.

The contents were also informed by a 2023 internal review the QRGP conducted on an adult internal medicine community integrated AST experience.

Key Factors to consider when setting up a community integrated AST position

- College (ACRRM/RACGP) AST requirements (located in the relevant college handbooks).
 - Curriculum requirements
 - Training position requirements
 - Supervision requirements
- Capacity of your chosen training facility in your community to meet the college requirements for the AST in your chosen discipline.
 - Ability to meet the curriculum requirements in terms of case load and case mix
 - Access to education (generally 4 hours each week) and release for completion of other AST requirements
 - Including linking in with the registrars for training
 - Face to face intensives
 - Required courses/training as part of the AST
 - Outreach visits
 - Clinics to ensure exposure to the relevant clinical caseload
 - What additional learning are you going to do
 - Ability to complete assessments
 - Supervision - remote and on site, specialist and RG/GP
 - How will this happen e.g. mode, duration, frequency, how will it be documented, supervision during on call/after hours?
 - How will your position be funded and if there are any human resource issues that need to be addressed in setting up the training position and role if applicable?
- Which tertiary hospital in/outreach experience or mix of experiences (e.g. face to face intensives) would be necessary to meet the AST curriculum requirements?
 - Existing and robust relationships between the community facility and the visiting specialists/tertiary facility where AST will be undertaken.
 - Who will be your specialist supervisor? This should be for the whole AST year rather than just the time you will be in the tertiary facility.
 - Consideration of funding arrangements for this supervision may be required depending on the context.
- Will this model of AST suit your circumstances, interests and needs?

There is no right way to arrange the training in a community integrated AST - it depends on your context, your learning needs, your community, and the opportunities available to you. You might:

- do an intensive month in the tertiary facility, then one week a month with the visiting specialty team, then remote supervision the rest of the time
- spend 6 months in your community in a blended role with onsite and/or remote supervision and 6 months in different tertiary facility
- have scheduled 1-2-week visits to various subspecialties for face-to-face intensives throughout the year, participate in outreach visits when the specialty comes to town and remote supervision the rest of the time.

Key requirements and approval processes

Approaching the relevant people to express your interest is generally the first step.

- Usually this is your Director of Medical Services (Med Super/Line manager/GP Supervisor).
- This will also be the director of your AST discipline in the local tertiary facility i.e. Director of Paediatrics, Director of Internal Medicine, Director of Psychiatry.
- Ideally the supervisors/key stakeholders should meet and work together on the set up of the training position and application for accreditation.
- Other supports/people to speak to include your Rural Generalist Training Advisor and your college who you/your supervisors will need to submit applications to for accreditation of the AST position.
- Start these conversations early - generally 1-2 years before you are hoping to complete your AST.

Your selected supervisors need to complete an application for accreditation of the AST position.

- Accreditation application
 - [RACGP](#) - Special training environments accreditation application form and guide
 - [ACRRM](#) - Training post accreditation application form
- It may also be helpful to complete the following documents to inform the accreditation application which outlines how the curriculum requirements will be met:
 - Training Post/Clinical Supervision Plan proforma
 - Training Post Teaching Plan Proforma
 - Training post Orientation Plan Proforma
 - ACRRM
 - RACGP

Once completed, the accreditation and supporting documentation will need to be submitted to your college for approval.

- Your supervisors are responsible for completing this paperwork and it should be submitted as early as possible as the training cannot be commenced without prior approval.
- This process is often easier if the location already has accredited training positions for the specialty you are wanting to undertake (e.g. Advanced Paeds Trainees already rotate to Mt Isa) or has hosted a community integrated AST position before.
- There will often be adjustments required and several meetings with the supervisors throughout the college accreditation review process - it takes time.
- It is recommended that applications for accreditation be lodged as soon as possible but no later than 6 months before planned commencement of the AST.

Steps after achieving college accreditation

3-6 months prior to commencement

- Ensure all supervisors, the trainee and facilities understand the following:
 - AST curriculum and learning outcomes for your context and what your future role will be in the community as a rural generalist with the advanced skill
 - their role in remote and FTF supervision throughout the AST year and key milestones for assessment and feedback to the college
 - your assessment requirements
 - tour education requirements and need to be released for agreed training activities
 - the employment model and funding arrangements (for trainee and supervisors) across the training period.
- It can be helpful to set up a timetable that incorporates all the above elements to enable tracking of them throughout the year.
- Reach out to your supervisors for guidance as to suggested resources and pre-reading you might be able to do to prepare you for the AST year ahead.
- Ensure you let the QRGF team know of your upcoming AST position so we can include you in the AST Introductory workshop held at the beginning of each year.

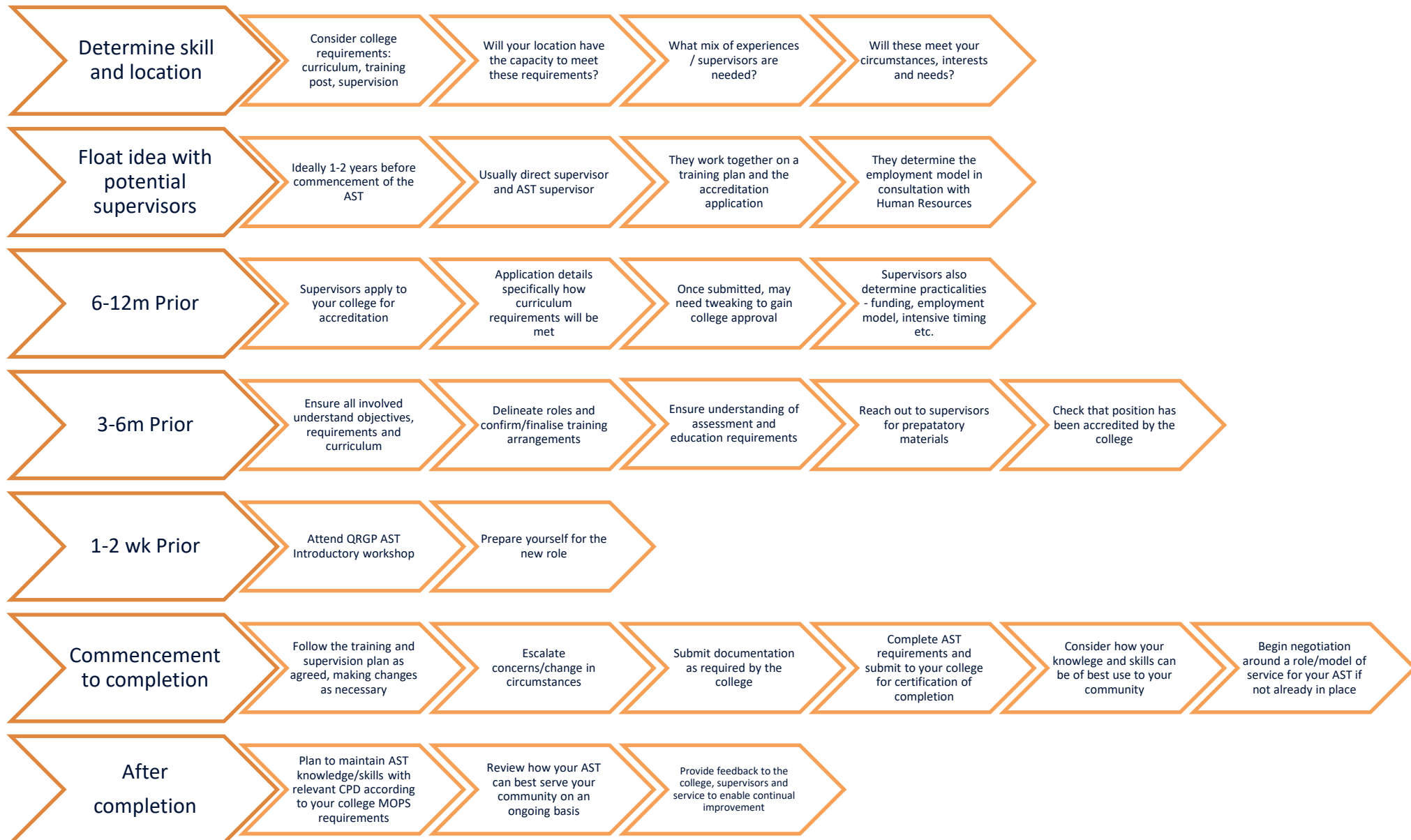
From commencement until completion

- Follow the training and supervision and education plan as agreed by you, the facilities, and supervisors.
- Escalate to the appropriate organisation if there is a change in your training circumstances/supervision etc. or you have concerns:
 - RACGP/ACRRM
 - Queensland Rural Generalist Pathway
 - supervisors.
- Submit assessment and other documents as required to your college as specified in your college AST curriculum documents.
- At the completion of your AST time and successful completion of the necessary requirements submit the completion paperwork to your college for approval and final certification of completion of your AST.
- Consider how the skills and knowledge you are gaining throughout your AST can best be of use to your community and the various roles that you may be able to fill or create depending on your skills and community needs.
 - View our AST models of service delivery for inspiration (available on the QRGF website).

After completion of your AST

- Consider what you will do in terms of continuing professional development (CPD) for maintenance of your professional skills relevant to your AST and ensure they are lodged with your CPD home.
- Review how your advanced skill can best meet the needs of your community.
- Provide feedback to your supervisors/college/training locations so that the position and training experience can be continually improved.

What does that look like for you?



Suggested timeline of supervisor activities

As soon as the concept of community integrated AST is floated

- Contact the second supervisor and trainee to discuss whether the proposed training post meets the curriculum, teaching, supervision etc. requirements according to the college.
- Examine the AST curriculum and formulate a plan around how the requirements will be met ideally in consultation with the relevant stakeholders.
- Consider what employment model and entitlements will suit the position in consultation with Human Resources etc.

6 - 12 months prior to commencement of the proposed blended AST place commencing

- Compile and lodge the AST accreditation application with the relevant college which details the supervision plan that has been constructed. This would include:
 - nominated community supervisor and regional AST supervisor
 - GP mentor details
 - meeting times throughout the AST post
 - feedback - formal and informal
 - education expectations in both locations.
- Attend relevant meetings and make the necessary adjustments required for the accreditation application to proceed
- Develop a timeline of training including accounting for educational release, FTF intensives, courses and supervision by the 2 supervisors etc. that will be required throughout the year.
- Ensure that employment model, entitlements and funding arrangements for the various positions - both trainee and supervisors are established and agreed.
- Provide preparatory documentation and information to the prospective AST trainee.
- Have a clear idea of the relevant college assessment requirements.

During the AST year

- Both supervisors should be involved in the trainee's progress for the full 12-month AST period.
- Both supervisors and trainees should meet formally in the beginning, middle and end of the year to assess progress and competencies and identify any gaps or additional learning needs and complete the assessment documents.
- It is suggested that both supervisors could additionally meet quarterly without the trainee to discuss progress of the trainee.
- Remote or FTF supervision with the trainee fortnightly (or agreed interval) respectively.
- Ad hoc/after hours supervision as agreed.
- Remediation actioned as necessary in accordance with college and workplace guidelines.
- Complete the appropriate paperwork for evidence of supervision/training and support trainee in lodging these with the college at the specified time intervals.
- Provide feedback to the college and service as appropriate to improve the training post and overall experience both from the trainee's and supervisor's point of view.

What does this look like for your supervisor?



Critical success factors of a community integrated AST post

- Start planning early, lodge accreditation applications as soon as possible in the process.
- Relationships between facilities and supervisors and trainees are key.
- Willingness/understanding/support for Rural Generalists AST models of service delivery by specialist supervisors and various AST curriculum requirements.
- Interest/motivation/ability of community supervisors/facilities to create and fund the relevant positions to support a blended AST position to meet college requirements.
- Well established mutual clear expectations around role and end point for both the registrar and supervisors.
- Seek out others who are doing the same, so you have some support throughout the training year.
- Being proactive in seeking out experiences and advocating for placements.
- Make use of your Rural Generalist Training Advisor support as needed.

Benefits and challenges of community integrated ASTs

- Rural Generalists who wish to undertake additional AST can undertake partial training without having to move for a full 12 months.
- Enables exposure to a broader clinical experience and the opportunity to work with different multi-disciplinary teams.
- Allows you to build relationships with your community and tertiary referral centre.
- Personal benefits of not having to relocate/spend longer in a tertiary centre for completion of AST.
- Particularly suits ASTs that evolve to meet community needs.
- Helps you apply what you are learning to the specific context of the community you are working in.
- There are often less trainees in your training location so you may benefit from greater exposure throughout the training period.
- Specialty supervisors are not necessarily aware of the training and exam requirements, and this can cause some confusion - NB. It is very different to the specialty colleges requirements.
- Doesn't suit everyone - relies on trainees and supervisors being proactive and motivated.
- Arrangements might change throughout the year - you may need to be flexible.
- Having 2 nominated supervisors for a 12-month period may be problematic; however, with planning and regular meetings this can be mitigated.

Locations where training has occurred

- Paediatrics - Mt Isa and Sunshine Coast - Developmental Paediatrics
- Mental health - Thursday Island and Cairns
- Palliative care - Rockhampton and Emerald with SPARTA
- Internal medicine - Kingaroy and Toowoomba

Community integrated AST trainee checklist

1. Determine advanced skill and location

- Consider college requirements: curriculum, training post, supervision
- Will your location have the capacity to meet these requirements?
- What mix of experiences/supervisors are needed?
- Will these meet your circumstances, interests and needs?

2. Float idea with potential supervisors

- Ideally 1-2 years before commencement of the AST
- Usually direct supervisor and AST supervisor
- Supervisors work together on a training plan and the accreditation application
- Supervisors determine the employment model in consultation with Human Resources

3. 6-12 months prior

- Supervisors apply to your college for accreditation
- Application details specifically how curriculum requirements will be met
- Once submitted, may need tweaking to gain college approval
- Supervisors also determine practicalities - funding, employment model, intensive timing etc.

4. 3-6 months prior

- Ensure all involved understand objectives, requirements and curriculum
- Delineate roles and confirm/finalise training arrangements
- Ensure understanding of assessment and education requirements
- Reach out to supervisors for preparatory materials
- Check that position has been accredited by the college
- Ensure the QRGP team is aware of your position

5. 1-2 weeks prior

- Attend QRGP AST introductory workshop
- Prepare yourself for the new role

6. Commencement to completion

- Follow the training and supervision plan as agreed, making changes as necessary
- Escalate concerns/change in circumstances
- Submit documentation as required by the college
- Complete AST requirements and submit to your college for certification of completion
- Consider how your knowledge and skills can be of best use to your community
- Begin negotiation around a role/model of service for your AST if not already in place

7. After completion

- Plan to maintain AST knowledge/skills with relevant CPD according to your college MOPS requirements

- Review how your advanced skill can best serve your community on an ongoing basis
- Provide feedback to the college, supervisors and service to enable continual improvement

Community integrated AST supervisor checklist

1. Placement proposed

- Contact second supervisor and relevant stakeholders
- Establish whether proposed post meets college requirements for AST and how curriculum will be met

2. 6-12m prior to commencement

Determine:

- nominated community supervisor + regional AST supervisor
- GP mentor details
- meeting times throughout the AST post
- feedback - formal and informal
- education expectations in both locations
- supervisors lodge AST post accreditation application - adjust as needed
- engage in necessary preparation - e.g. HR requirements

3. Commencement

- Orientation
- Supervisors and trainee meet
- Supervision by both supervisors commences
- Training and assessment timelines discussed, and placement experience arrangements finalised

4. 3 months

- Supervisors meet to discuss trainee progress (without trainee)
- Supervision continues

5. 6 months

- Supervisors and trainee meet for formal progress review
- Relevant assessment is lodged with college
- Supervision continues

6. 9 months

- Supervisors meet to discuss progress (without trainee)
- Supervision continues

7. Completion

- Supervisors and trainee meet to review progress throughout the year and finalise assessment
- Opportunity for review and improvement