Key Stakeholder Consultation Document



Background

To ensure the suitability and continued high quality of doctors entering physician training it is imperative that the Royal Australasian College of Physicians (the College) issues a statement of principles and standards to guide the selection of doctors into its training programs. Regulatory standards also demand that the College implements a robust and defensible selection into training policy.

Developing the policy

Following broad scoping and stakeholder consultation activities, the College convened a Policy Development Working Group comprising College Fellows, trainees and other stakeholders to develop a draft Selection into Training Policy.

The policy defines the principles, selection criteria and standards that underpin entry and selection into College training programs. The College has clarified its role in selection into physician training and that of employers and jurisdictions. It has also described a high level selection into training process which broadly covers all College training programs.

Having consulted with its membership the College is now open to feedback from a wide range of stakeholders as it seeks to finalise this initial step in its approach to implementing a more robust, fair and effective process for selection into physician training.

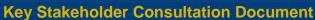
Stakeholders to be consulted include Specialty Societies, universities, prevocational training organisations, medical colleges, health departments and government agencies, local areas health services and district health boards, RACP accredited training settings and other relevant groups.

Working towards improving and standardising process methodology

To support implementation of this policy, the College has recently commenced work on a related project to overhaul and standardise the process methodology for selection into College training programs; this will be a complex and resource intensive task.

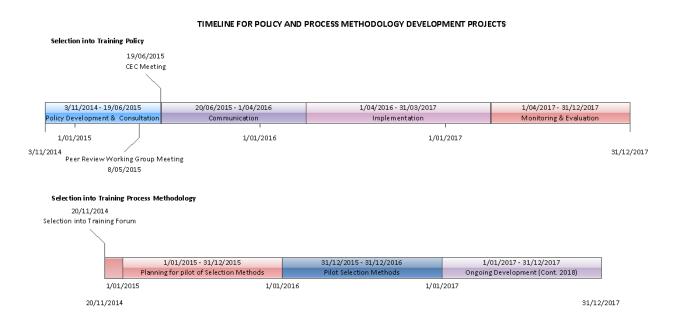
As a starting point the College hosted a forum on Selection into RACP Basic Training in November 2014 drawing on the expertise of experts in the field of selection into postgraduate medical training.

Consideration is currently being given to the application of best practice methods such as situational judgement tests and multiple mini interviews in the RACP context with entry to Basic Training the initial focus. This project is in the early stages and will require the College to collaborate closely with multiple stakeholders including employers and jurisdictions to develop appropriate process methodology to support implementation of this important policy.





TIMELINE FOR POLICY AND PROCESS METHODOLOGY DEVELOPMENT PROJECTS



Objectives of Consultation

- Establish the extent to which current selection practices within the jurisdiction/training settings already align with the proposed principles, standards and selection criteria
- Identify any potential barriers or enablers to implementation of the policy, or particular aspects of it
- Discuss how the College might best collaborate with stakeholders to facilitate implementation of the policy and exploration of an appropriate standardised process methodology

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Section 1: Purpose and Scope

This policy sets out principles for selection into RACP training. It outlines eligibility criteria to apply for RACP training programs, selection criteria for RACP training programs, and standards for the process of selection into training at RACP accredited training settings.

Training takes place in settings which have been accredited by the RACP. RACP trainees are concurrently postgraduate students in specialist training and employees of the health services.

The RACP is responsible for identifying doctors eligible to participate in its training programs. The RACP is not responsible for determining who will be employed in a training position; this is a decision of the employing body.

The processes of recruitment for employment and selection for training can often be interlinked, and the RACP will work closely with stakeholders to implement the standards outlined in this policy. It is important for both the RACP and employers to be involved in selection of trainees.

Section 2: Principles of Selection into RACP Training

Four key principles underpin RACP selection into training:

- **1.1. Selecting for excellence**: to identify candidates with the capabilities and attributes required to successfully complete the training program and progress to competent independent practice.
- **1.2. Rigour and fairness**: to use criteria and a process that is evidence-based, merit-based, transparent, current, sustainable, objective, equitable and procedurally fair.
- **1.3. Embracing diversity**: to support a diverse range of candidates to apply for and progress through training.
- 1.4. Continuity: to better serve the community and maximise efficient use of training resources, trainees who are progressing satisfactorily through a training program will continue to be recognised as a trainee by the RACP. The opportunity for continuity of training should be considered before acceptance of new entrants to the training program.

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Section 3: Roles and Responsibilities in Selection of Trainees

- **1.5. The RACP** is responsible for identifying doctors who are eligible to participate in its training programs by:
 - Defining the principles and standards for selection into training
 - Determining the eligibility criteria and the selection criteria
 - Developing resources to support the process and provide guidance

The RACP has no role in employment or workforce issues.

1.6. The RACP accredited training setting is required to conduct or participate in a selection into training process which complies with RACP principles and standards.

Training Program Directors or their delegates who coordinate a selection into training process:

- Are responsible for selecting candidates most likely to successfully complete the training program and progress to competent independent practice
- This is separate to any responsibility to their employer to select candidates capable of fulfilling service requirements
- 1.7. The health service jurisdictions and employing institutions provide employment and infrastructure for training. They are solely responsible for making employment decisions. Their responsibility is to provide adequate service to meet the needs of the population.

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Section 4: Eligibility to apply for RACP training

All candidates are required to demonstrate to the RACP that they meet the published eligibility criteria for the relevant training program.

Confirmation from the RACP that a candidate meets the eligibility criteria does not guarantee selection into training, nor does it guarantee appointment to a training position and continuing employment. Employment decisions rest solely with the employer.

Section 5: Selection into an RACP training program

In addition to meeting the eligibility criteria, candidates must be selected into the training program.

Selection into training is undertaken at the entry point to the relevant training program (the beginning of Basic Training, the beginning of each Advanced Training program, and the beginning of Faculty and Chapter training programs). Selection into training will occur in accordance with the RACP standards.

The College has identified the following selection criteria.

- **4.1** The candidate demonstrates a commitment to pursuing a career as a physician
- **4.2** The candidate demonstrates the appropriate level of ability, and willingness to progress toward competence, in each of the following domains of the RACP standards framework.

a) Medical expertise

Medical expertise is central to the function of physicians and draws on the competencies across all domains of the RACP Standards Framework.

Physicians possess a defined body of knowledge, clinical skills, procedural skills and professional attitudes, which are directed to patient-centred care. They apply these skills to collect and interpret information, make clinical decisions, and carry out diagnostic and therapeutic interventions. They do so within the boundaries of their discipline, personal expertise, the healthcare setting and patients' preferences and context. Their care is characterised by up-to-date, resource-efficient clinical practice and effective communication.

b) Communication

In order to provide high-quality care for patients, physicians establish and foster relationships with patients and their families, professional colleagues and systems.

Physicians develop and utilise a range of communication-related skills including diplomacy, confidence and assertiveness. This enables them to obtain and synthesise information from, and discuss relevant issues with, patients and their families, professional colleagues, and systems. Communication skills are characterised by trust, respect, empathy and confidentiality. Communication skills facilitate ability to research, evaluate and disseminate information.

c) Quality & safety

Quality and safety guidelines uphold the care of patients. Physicians consider quality and safety in every aspect of their practice, from their interactions with patients, to managing and reporting risks and hazards.

d) Teaching & learning

Physicians engage in continuing personal, professional and educational development. This maintains and extends professional knowledge, clinical skills and



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technical expertise. This is especially important within the context of growth in knowledge and medical advancements.

e) Research

Physicians actively contribute to the further research, development, appraisal, understanding and dissemination of health care knowledge among their professional colleagues, students, patients and the broader community.

f) Cultural competence

Physicians understand the impact of culture on health outcomes. They endeavour to understand cultural perceptions of illness, family, and attitudes toward death held by their patients.

g) Ethics & professionalism

Ethics pervade every aspect of clinical practice, from communication to critical reflection and professional standards. Physicians understand the relationship between health law and practice, and the distinction between law and ethics. Physicians cultivate ethical behaviour and reflection through awareness of ethical principles, health law, and the limits of science on behaviour.

Physicians maintain a professional attitude in their daily practice, striving to meet a high standard of integrity, honesty, positivity, diplomacy, confidence and assertiveness.

h) Judgement & decision-making

Physicians have a distinct body of knowledge, skills, attitudes and behaviours which enable them to provide clinical care to the highest standards of excellence. The physician's role is to apply reasoning to make complex clinical decisions.

i) Leadership, management & teamwork

Physicians manage and make decisions about the allocation of personal, professional and organisational resources. They employ communication and professional skills to work within or lead teams of allied health professionals, junior doctors and other colleagues.

j) Health policy, systems & advocacy

Physicians think beyond the health of the immediate patient. Physicians identify, analyse, respond to, promote, and advocate for, the social, environmental, biological and political factors that determine and impact upon health.

Physicians encourage and educate patients to achieve healthier lifestyles, and prevent injury, ill health and disease. Familiarity with risk factors affecting population subgroups, disease-prevention services and legislation are essential.

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Selection into Training Process

1: Stages of Selection into RACP Training

In order to be eligible to commence in an RACP training program, candidates must progress through all four stages and successfully complete all requirements described below.

Stage one – Eligibility to Apply

The candidate provides basic information to the RACP which is used to assess eligibility to apply to be selected into training. Eligibility status is valid for 24 months, after which the candidate must reapply if unsuccessful at being selected into training.

To be eligible the candidate must:

- Meet the Eligibility Criteria (as published in the relevant training handbook)
- Complete the application form, and attach all required documentation
- Pay the Application fee

Stage Two - Selection into Training

Stage Two is undertaken in accordance with the principles and standards of the Selection into Training Policy, as set out by the RACP. Stage Two is a two-part process. The below activities may take place simultaneously or independent of each other, according to the arrangements of the relevant training setting or program.

Selection into Training

(Accredited training setting or program role)

The candidate addresses the selection criteria and is recommended by the RACP representative as suitable to join the training program. The candidate must have current eligibility status (from Stage One).



Recruitment for Employment (Employer role)

The candidate obtains an employment position suitable to enable training.

Stage Three - Registration with the RACP

The candidate registers as a trainee before the registration deadline (refer to the relevant training handbook).

To register the candidate must:

- Have obtained a suitable training position and have been selected to join the training program
- Have completed any 'pending' requirements of their eligibility status
- Apply for prospective approval of training, with their selection letter of recommendation (from Stage Two)
- Sign the training agreement

Stage Four - Commence Training

The candidate is a trainee of the RACP when they have met the below requirements:

- Have successfully registered as a trainee
- Been granted prospective approval by a College Training Committee
- Paid the annual training fee



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1. Standards for Stage 2 Selection into Training

RACP accredited training settings will conduct selection into training in partnership with recruitment for employment wherever possible. They may participate in a coordinated selection process as part of a training network or specialty group.

The process for selection into training must comply with the College standards set out below.

- Valid: The selection methods used are fit for purpose and effectively predict which candidates will successfully complete the training program and progress to competent independent practice.
- **Reliable**: The selection process is based on rigorous selection methods and is designed to produce consistent outcomes.
- Transparent: The selection process is clear. Eligibility and selection criteria are publicly
 available. There is national awareness of training opportunities through clear advertising
 including the number of training positions available. Information provided to candidates
 is sufficient to allow informed decisions. All candidates are advised of the outcome of
 the selection process and offered feedback.
- **Procedurally fair**: The selection process is fair and impartial with defensible, meritbased outcomes. Selection panels operate without prejudice. Any conflict of interest is declared. Selection panels consider only matters that are pertinent to the selection process, in accordance with anti-discrimination legislation.
- Evidence-based: Selection processes are based on current evidence-based practice aimed to select the highest quality of candidate. The process is the subject of regular review and evaluation for continual quality improvement.
- **Sustainable**: The selection process is sustainable for trainees, the College, and the employing institutions. The requirements are reasonable for candidates.
- **Collaborative**: Selection into training is interlinked with the process of recruitment for employment wherever possible. Selection panels include a Fellow of the relevant training program chosen to represent the interests of the RACP in assessing the candidate's suitability for the training program wherever possible.
- Accountable: The selection process is conducted in accordance with the RACP principles for selection into physician training and there is clear responsibility and rationale for decisions.

The College has developed guidelines and resources to support selection for physician training. Accredited training settings, training networks, specialty groups and other coordinated groups are encouraged to refer to these when conducting a selection process.

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Implementation

The RACP has developed an Implementation and Communication plan for the Selection into Training policy. The implementation plan is designed to support the roll out of the new policy. It is used to determine the level of impact of any change to be introduced, time frames for implementation, strategies of implementation and to identify possible changes and solutions.

Pending consultation feedback and formal approval of the policy, the RACP will be aiming to implement the policy in April 2016 for trainees commencing training in January 2017.

Please turn to page 10 for a summary of the Implementation and Communication plan.



Selection into Training Policy

Implementation & Communication Plan - 'at a glance'

Impact of changes

The introduction of the Selection into Training Policy is classed as a moderate impact change, and will require at least 6 months' notice.

Timing of implementation

It is proposed that a 6 month communication period will follow approval of the Policy. The likely implementation date is 2016 for trainees commencing training in 2017.

Impacted stakeholder groups

The Selection into Training Policy is a College-wide policy. The following groups are classified as high impact groups:

- College members currently involved in selection into training at training settings
- future College trainees
- current trainees wishing to enter a new training program
- Hospitals / jurisdictions/ health departments who employ College trainees
- Specialty societies currently involved in selection processes
- College staff involved in management of training programs

Strategic considerations & Key Messages

- Implementation of the **selection principles**, **standards and criteria** will require clear and effective communication to all parties involved in the selection of RACP trainees.
- The College will work to provide appropriate support for Training Program Directors and their delegates, who are responsible for **coordinating the selection into training process**, to meet the requirements of the new policy.
- The policy will **introduce of a formal step-by-step process** for the entry and Selection of trainees. The College will engage and collaborate with Hospitals, jurisdictions, health departments and those involved in selection to ensure that the timelines for recruitment and selection is aligned with College deadlines for entry and registration for programs.

Support resources

Supporting resources and training for College members involved in selection will be key to ensuring consistency in process in line with the principles, standards and criteria of the policy. The following are planned:

- Training will be conducted for Training Program Directors to ensure understanding of the parameters of the policy and provide guidance on the implementation of the principles and standards in training settings.
- Guidance will be provided to RACP selection panel members, to ensure consistency in process.
- Resources will be developed for accredited training settings to support best practice selection methods for example guidelines and an interview question bank.

Communication strategies

A range of communication activities are planned including; email, print media, website, e-Bulletins, RACP News and engagement at face-to-face events.

Draft RACP Selection into Training Policy Key Stakeholder Consultation Document



Next Steps

The RACP is currently exploring how to best standardise selection into physician training. With the aid of experts in the field of selection into postgraduate training the RACP is currently exploring potential best practice selection methods, such as Multiple Mini Interviews and Situational Judgement Tests.

Close consultation with RACP stakeholders will take place in order to develop the best practice process methodology for selection into RACP training.

