Executive Summary: Royal Australian College of General Practitioners

The Australian Medical Council (AMC) document, Procedures for Assessment and Accreditation of Specialist Medical Education Programs and Professional Development Programs by the Australian Medical Council 2013, describes AMC requirements for accrediting specialist programs and their education providers.

The training pathways leading to Fellowship of the Royal Australian College of General Practitioners (RACGP) and the Quality Assurance and Continuing Professional Development Programs were first assessed by the AMC in 2003, which was a time of great change in general practice training in Australia, with the Australian Government Minister for Health implementation of a regionalised contestable model of general practice training managed through General Practice Education and Training. The College was accredited for three years, until July 2006, subject to satisfactory progress reports and a number of conditions being met.

In 2006, the College underwent a follow-up assessment and its accreditation was extended to December 2009. Based on a comprehensive report submitted in 2009, accreditation was extended by four years to December 2013.

In 2013, an AMC team completed the reaccreditation assessment of the Royal Australian College of General Practitioners’ general practice training pathways. The Team reported to the 28 October 2013 meeting of the Specialist Education Accreditation Committee. The Committee considered the draft report and made recommendations on accreditation to AMC Directors in accordance with the options described in the AMC accreditation procedures.

This report presents the Committee’s recommendations, presented to the 21 November 2013 meeting of AMC Directors, and the detailed findings against the accreditation standards.

Following the 21 November 2013 meeting of AMC Directors that approved this report, the AMC edited the description of the pathways to fellowship on pages 43, 45-46 to clarify the place of the training programs of the Hong Kong College of Family Physicians and the Academy of Family Physicians of Malaysia that lead to fellowship of the Royal Australian College of General Practitioners. These changes do not affect the findings recorded.

Decision on accreditation

Under the Health Practitioner Regulation National Law, the AMC may grant accreditation if it is reasonably satisfied that a program of study and the education provider meet an approved accreditation standard. It may also grant accreditation if it is reasonably satisfied that the provider and the program of study substantially meet an approved accreditation standard, and the imposition of conditions will ensure the program meets the standard within a reasonable time. Having made a decision, the AMC reports its accreditation decision to the Medical Board of Australia to enable the Board to make a decision on the approval of the program of study for registration purposes.

The AMC’s finding is that the education and training pathways leading to fellowship of the Royal Australian College of General Practitioners and the Quality Improvement and Continuing Professional Development program substantially meet the accreditation standards.
The College is meeting its overall objective of producing skilled and competent general practitioners. The scope of general practice is clearly defined and articulated in the *RACGP Curriculum for Australian General Practice 2011*. The Team commends the College on a comprehensive curriculum document that reflects an evolving general practice landscape, as well as new training and educational processes.

The Team found that the range of assessment tools used in the fellowship examination is appropriate; however opportunities for workplace-based summative assessment are yet to be fully explored by the College. A priority for the College is the development of a comprehensive blueprint that maps assessment content to the entire curriculum, including the five domains of general practice. This will assist the College to identify content gaps in the fellowship examination, and highlight the potential value of a more formalised program of in-training assessments.

The requirements for the delegation of training and the need to accredit vocational training providers, trainers and training sites, add considerable complexity to this vocational training program. The educational governance structure of the College has the potential to lead to lack of clarity about roles and responsibilities of groups within and outside the College. The College should consider the establishment of committees with specific responsibility for international medical graduates and continuing professional development activities.

The College recognises that setting and maintaining standards in general practice education and training presents challenges. The vocational training provider accreditation process is the means by which the College ensures appropriate policies and processes are used in the delivery of training. In meeting its own quality assurance requirements, it is essential the College increase the monitoring function of vocational training providers in order to ensure standards continue to be met. There is an opportunity for the College to strengthen the processes of quality control for both educational delivery and the trainee experience.

The report recommends that the College develop an overarching framework for monitoring and evaluation to ensure focused and systematic evaluation. In addition, the College should implement formal mechanisms for seeking feedback, analysing it and acting upon the results. Input from key stakeholders including registrars, supervisors, relevant stakeholder groups and the community is required.

The November 2013 meeting of the AMC Directors resolved:

(i) That following programs of the Royal Australian College of General Practitioners be granted accreditation to 31 December 2019, subject to satisfactory progress reports to the AMC: the Vocational Training Pathway, the General Practice Experience (Practice Eligible) Pathway, the Specialist Pathway Program and the Quality Improvement and Continuing Professional Development program.

(ii) That this accreditation is subject to the conditions set out below:

(a) By the 2014 progress report, evidence that the College has addressed the following conditions from the accreditation report:

8 Review the criteria and processes for vocational training providers to sign-off on requirements for progression and completion of training to ensure a high quality consistent training experience for all registrars. (Standard 4.1.1)
11 Develop a comprehensive blueprint that maps assessment content to the entire curriculum, including the five domains of general practice. (Standard 5.1)
13 Having clarified the criteria and processes for vocational training provider sign-off of registrar progress (see condition 8) amend the *Examination Handbook for Candidates* accordingly. (Standard 5.1)
15 Complete and report on the outcomes of the review of the Practice Based Assessment. (Standard 5.3)
17 Develop a systematic process for reviewing examination performance data, with a view to identifying regions, training pathways and vocational training providers that may benefit from additional supports. (Standard 5.3)
19 Clearly state and communicate to vocational training providers the impact of partially meeting or not meeting an accreditation standard. (Standard 6.1.1)
21 Implement an overarching evaluation framework to ensure focused and systematic program monitoring and evaluation. (Standard 6.1)
29 With registrar involvement, review the requirements for targeted communication to registrars. (Standard 7.3)

(b) By the 2015 progress report, evidence that the College has addressed the following conditions from the accreditation report:

1 Review and report on the educational governance structure to demonstrate the hierarchy, relationships, reporting lines, demarcation of responsibilities and operational activities of all committees responsible for education, including international medical graduate assessment and continuing professional development. (Standard 1.1 and 1.2)
2 Review and report on the breadth and depth of the roles and responsibilities of the National Standing Committee – Education. (Standard 1.1 and 1.2)
3 Demonstrate how the College identifies and responds to current and future community needs. (Standard 2.1)
5 Evaluate and monitor the interpretation and application of the recognition of prior learning policy by State Censors to ensure consistency. (Standard 3.4.2)
6 Evaluate and monitor the application of the recognition of prior learning policy by vocational training providers to ensure its consistent application. (Standard 3.4.2)
7 Review the educational opportunities and administrative processes for Australian Defence Force registrars to ensure equivalent training outcomes to those registrars in the Australian General Practice Training (AGPT) program. (Standard 4.1.1)
9 Review the teaching, learning and support available for candidates in the General Practice Experience (Practice Eligible) Pathway in Australia to improve the cohort performance in the RACGP fellowship examination. (Standard 4.1.2)
12 Review and report on the potential role of summative workplace-based assessment, based on the development of a comprehensive assessment blueprint. (Standard 5.1)
16 Respond to and report on the commissioned review of the use of simulated patients in the objective structured clinical examination (OSCE). (Standard 5.3)

26 Monitor and report on the implementation of the revised selection criteria for general practice training. (Standard 7.1.2)

27 Develop formal selection processes for registrar representation on College training-related committees to facilitate and support wider involvement of registrars in the governance of their training. (Standard 7.2)

28 Develop mechanisms to improve registrar engagement with the College. (Standard 7.2)

30 Strengthen the College’s formal involvement in the appeals process to allow registrars to seek impartial review of training-related decisions. (Standard 7.4)

31 Develop, implement and review solutions to address the increasing burden on supervisors, particularly in the context of projected increases in registrar numbers. (Standard 8.1)

33 Progress and report on the findings of the review of the training post accreditation processes. (Standard 8.2.1)

(c) By the 2016 progress report, evidence that the College has addressed the following conditions from the accreditation report:

4 Develop strategies to effectively engage more registrars in research, not just those registrars in Australian General Practice Training (AGPT) academic posts. (Standard 3.3)

10 Review the training undertaken in Hong Kong and Malaysia leading to FRACGP, against the RACGP Vocational Training Standards, including the equivalence of the training and training outcomes to those in Australia. (Standard 4.1.2)

14 Develop and report on strategies to enhance the quality and consistency of remediation processes across the vocational training providers. (Standard 5.2)

18 Review the current process of assessing international medical graduates in order to increase effectiveness including a review of website content and access issues and report on outcomes. (Standard 5.4)

20 Evaluate and report on the implementation of the RACGP Vocational Training Standards. (Standard 6.1.1)

22 Develop, implement and review formal mechanisms for seeking and incorporating supervisor and registrar feedback in relation to all aspects of the training pathways to fellowship of RACGP. (Standard 6.1)

35 Develop an overarching remediation policy for underperforming general practitioners. (Standard 9.3)

(d) By the 2017 progress report, evidence that the College has addressed the following conditions from the accreditation report. The AMC will consider the College’s progress against the accreditation standards including its response to these conditions through discussion between AMC representatives and appropriate College committees, staff and office bearers.
23 Implement processes for the systematic acquisition of feedback from health care administrators, health care professionals and consumers and report on how this feedback is acted upon. (Standard 6.1.1)

24 Develop and implement a process to collect data from newly qualified general practitioners. (Standard 6.2.1)

25 Engage with health care administrators, other health care professionals and consumers in the systematic evaluation of the training pathways leading to fellowship of RACGP. (Standard 6.2.2)

32 Strengthen formal processes for continuous quality improvement of supervisor performance, including via the accreditation of vocational training providers. (Standard 8.1)

34 Enhance the Quality Improvement and Continuing Professional Development (QI&CPD) program to ensure that it aligns with the College’s strategic vision of general practice. (Standard 9.1.1)

The accreditation conditions in order of standard are detailed in the following table:

<table>
<thead>
<tr>
<th>Standard:</th>
<th>Condition:</th>
<th>To be met by:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Standard 1</td>
<td>1 Review and report on the educational governance structure to demonstrate the hierarchy, relationships, reporting lines, demarcation of responsibilities and operational activities of all committees responsible for education, including international medical graduate assessment and continuing professional development. (Standard 1.1 and 1.2)</td>
<td>2015</td>
</tr>
<tr>
<td></td>
<td>2 Review and report on the breadth and depth of the roles and responsibilities of the National Standing Committee – Education. (Standard 1.1 and 1.2)</td>
<td>2015</td>
</tr>
<tr>
<td>Standard 2</td>
<td>3 Demonstrate how the College identifies and responds to current and future community needs. (Standard 2.1)</td>
<td>2015</td>
</tr>
<tr>
<td>Standard 3</td>
<td>4 Develop strategies to effectively engage more registrars in research, not just those registrars in Australian General Practice Training (AGPT) academic posts. (Standard 3.3)</td>
<td>2016</td>
</tr>
<tr>
<td></td>
<td>5 Evaluate and monitor the interpretation and application of the recognition of prior learning policy by State Censors to ensure consistency. (Standard 3.4.2)</td>
<td>2015</td>
</tr>
<tr>
<td></td>
<td>6 Evaluate and monitor the application of the recognition of prior learning policy by vocational training providers to ensure its consistent application. (Standard 3.4.2)</td>
<td>2015</td>
</tr>
<tr>
<td>Standard 4</td>
<td>7 Review the educational opportunities and administrative processes for Australian Defence Force registrars to ensure equivalent training outcomes to those registrars in the Australian General Practice Training (AGPT) program. (Standard 4.1.1)</td>
<td>2015</td>
</tr>
<tr>
<td></td>
<td>Task Description</td>
<td>Year</td>
</tr>
<tr>
<td>---</td>
<td>-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
<td>------</td>
</tr>
<tr>
<td>8</td>
<td>Review the criteria and processes for vocational training providers to sign-off on requirements for progression and completion of training to ensure a high quality consistent training experience for all registrars. (Standard 4.1.1)</td>
<td>2014</td>
</tr>
<tr>
<td>9</td>
<td>Review the teaching, learning and support available for candidates in the General Practice Experience (Practice Eligible) Pathway in Australia to improve the cohort performance in the RACGP fellowship examination. (Standard 4.1.2)</td>
<td>2015</td>
</tr>
<tr>
<td>10</td>
<td>Review the training undertaken in Hong Kong and Malaysia leading to FRACGP, against the RACGP Vocational Training Standards, including the equivalence of the training and training outcomes to those in Australia. (Standard 4.1.2)</td>
<td>2016</td>
</tr>
<tr>
<td>Standard 5</td>
<td>11 Develop a comprehensive blueprint that maps assessment content to the entire curriculum, including the five domains of general practice. (Standard 5.1)</td>
<td>2014</td>
</tr>
<tr>
<td></td>
<td>12 Review and report on the potential role of summative workplace-based assessment, based on the development of a comprehensive assessment blueprint. (Standard 5.1)</td>
<td>2015</td>
</tr>
<tr>
<td></td>
<td>13 Having clarified the criteria and processes for vocational training provider sign-off of registrar progress (see condition 8) amend the Examination Handbook for Candidates accordingly. (Standard 5.1)</td>
<td>2014</td>
</tr>
<tr>
<td></td>
<td>14 Develop and report on strategies to enhance the quality and consistency of remediation processes across the vocational training providers. (Standard 5.2)</td>
<td>2016</td>
</tr>
<tr>
<td></td>
<td>15 Complete and report on the outcomes of the review of the Practice Based Assessment. (Standard 5.3)</td>
<td>2014</td>
</tr>
<tr>
<td></td>
<td>16 Respond to and report on the commissioned review of the use of simulated patients in the objective structured clinical examination (OSCE). (Standard 5.3)</td>
<td>2015</td>
</tr>
<tr>
<td></td>
<td>17 Develop a systematic process for reviewing examination performance data, with a view to identifying regions, training pathways and vocational training providers that may benefit from additional supports. (Standard 5.3)</td>
<td>2014</td>
</tr>
<tr>
<td></td>
<td>18 Review the current process of assessing international medical graduates in order to increase effectiveness including a review of website content and access issues and report on outcomes. (Standard 5.4)</td>
<td>2016</td>
</tr>
<tr>
<td>Standard 6</td>
<td>19 Clearly state and communicate to vocational training providers the impact of partially meeting or not meeting an accreditation standard. (Standard 6.1.1)</td>
<td>2014</td>
</tr>
<tr>
<td></td>
<td>Task Description</td>
<td>Year</td>
</tr>
<tr>
<td>---</td>
<td>-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
<td>------</td>
</tr>
<tr>
<td>20</td>
<td>Evaluate and report on the implementation of the RACGP Vocational Training Standards. (Standard 6.1.1)</td>
<td>2016</td>
</tr>
<tr>
<td>21</td>
<td>Implement an overarching evaluation framework to ensure focused and systematic program monitoring and evaluation. (Standard 6.1)</td>
<td>2014</td>
</tr>
<tr>
<td>22</td>
<td>Develop, implement and review formal mechanisms for seeking and incorporating supervisor and registrar feedback in relation to all aspects of the training pathways to fellowship of RACGP. (Standard 6.1)</td>
<td>2016</td>
</tr>
<tr>
<td>23</td>
<td>Implement processes for the systematic acquisition of feedback from health care administrators, health care professionals and consumers and report on how this feedback is acted upon. (Standard 6.1.1)</td>
<td>2017</td>
</tr>
<tr>
<td>24</td>
<td>Develop and implement a process to collect data from newly qualified general practitioners. (Standard 6.2.1)</td>
<td>2017</td>
</tr>
<tr>
<td>25</td>
<td>Engage with health care administrators, other health care professionals and consumers in the systematic evaluation of the training pathways leading to fellowship of RACGP. (Standard 6.2.2)</td>
<td>2017</td>
</tr>
<tr>
<td></td>
<td><strong>Standard 7</strong></td>
<td></td>
</tr>
<tr>
<td>26</td>
<td>Monitor and report on the implementation of the revised selection criteria for general practice training. (Standard 7.1.2)</td>
<td>2015</td>
</tr>
<tr>
<td>27</td>
<td>Develop formal selection processes for registrar representation on College training-related committees to facilitate and support wider involvement of registrars in the governance of their training. (Standard 7.2)</td>
<td>2015</td>
</tr>
<tr>
<td>28</td>
<td>Develop mechanisms to improve registrar engagement with the College. (Standard 7.2)</td>
<td>2015</td>
</tr>
<tr>
<td>29</td>
<td>With registrar involvement, review the requirements for targeted communication to registrars. (Standard 7.3)</td>
<td>2014</td>
</tr>
<tr>
<td>30</td>
<td>Strengthen the College’s formal involvement in the appeals process to allow registrars to seek impartial review of training-related decisions. (Standard 7.4)</td>
<td>2015</td>
</tr>
<tr>
<td></td>
<td><strong>Standard 8</strong></td>
<td></td>
</tr>
<tr>
<td>31</td>
<td>Develop, implement and review solutions to address the increasing burden on supervisors, particularly in the context of projected increases in registrar numbers. (Standard 8.1)</td>
<td>2015</td>
</tr>
<tr>
<td>32</td>
<td>Strengthen formal processes for continuous quality improvement of supervisor performance, including via the accreditation of vocational training providers. (Standard 8.1)</td>
<td>2017</td>
</tr>
<tr>
<td>33</td>
<td>Progress and report on the findings of the review of the training post accreditation processes. (Standard 8.2.1)</td>
<td>2015</td>
</tr>
<tr>
<td>Standard 9</td>
<td>34 Enhance the Quality Improvement and Continuing Professional Development (QI&amp;CPD) program to ensure that it aligns with the College’s strategic vision of general practice. (Standard 9.1.1)</td>
<td>2017</td>
</tr>
<tr>
<td>------------</td>
<td>------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
<td>------</td>
</tr>
<tr>
<td></td>
<td>35 Develop an overarching remediation policy for underperforming general practitioners. (Standard 9.3)</td>
<td>2016</td>
</tr>
</tbody>
</table>

This accreditation decision relates to the College’s programs of study and continuing professional development program in the recognised medical specialty of general practice.

In 2019, before this period of accreditation ends, the AMC will seek a comprehensive report from the College. The report should address the accreditation standards and outline the College’s development plans for the next four to five years. The AMC will consider this report and, if it decides the College is continuing to satisfy the accreditation standards, the AMC Directors may extend the accreditation by a maximum of four years (to December 2023), taking accreditation to the full period which the AMC may grant between assessments, which is ten years. At the end of this extension, the College and its programs will undergo a reaccreditation assessment by an AMC team.

**Overview of findings**

The findings against the nine accreditation standards are summarised below. Only those substandards which are not met or substantially met are listed under each overall finding.

Conditions imposed by the AMC so the College meets accreditation standards are listed in the accreditation decision (pages 2 to 8). The Team’s commendations in areas of strength and recommendations for improvement are given below for each set of accreditation standards.

| 1. The Context of Education and Training (governance, program management, educational expertise and exchange, interaction with the health sector and continuous renewal) | This set of standards is SUBSTANTIALLY MET |

Standard 1.1 (governance) is substantially met. Standard 1.2 (program management) is substantially met.

**Commendations**

A  The College’s review of its constitution and the manner in which this was conducted, including member engagement.

B  The College’s induction process to prepare members of Council for their governance responsibilities, and the processes for monitoring the performance of Council.

C  The Council’s strong links with the State/Territory-based Faculties supporting the engagement of fellows.

D  The commitment, inclusive approach and breadth of focus of the National Faculty of Specific Interests in fostering additional areas of interest expertise of general practitioners.

E  The enthusiasm and dedication of the College’s education staff.
**Recommendations for improvement**

**AA** Develop and implement strategies to engage wider consumer representation in College decision-making committees and/or consultation processes. (Standard 1.1.2)

**BB** Review and report on the alignment of staff activity and the strategic direction of the College as set by Council. (Standard 1.2)

**CC** Review whether the most appropriate reporting line for committees of fellows is to the CEO and/or Manager of Education. (Standard 1.2)

**DD** Strengthen processes for the development, endorsement and implementation of policy and for the subsequent monitoring and evaluation of such policy. (Standard 1.2)

**EE** Consider enhancing and formalising the relationship with the Royal New Zealand College of General Practitioners to facilitate educational exchange between the two colleges. (Standard 1.3)

**FF** Progress and report on the findings of the review of Joint Consultative Committees. (Standard 1.3)

---

2. The Outcomes of the Training Program  
(purpose of the training organisation and graduate outcomes)

| This set of standards is MET

Standard 2.1 (purpose of the training organisation) is substantially met.

**Commendations**

**F** The RACGP Curriculum for General Practice 2011 identifies educational objectives and outcomes, and the knowledge, skills and professional attitudes to be acquired at all stages of the continuum of medical education.

**Recommendations for improvement**

Nil.

---

3. The Education and Training Program – Curriculum Content  
(framework; structure, composition and duration; research in the training program and continuum of learning)

| This set of standards is MET

Standard 3.3 (research in the training program) is substantially met. Standard 3.4.2 (policies on the recognition of prior learning) is substantially met.

**Commendations**

**G** The RACGP Curriculum for Australian General Practice 2011 is comprehensive, clear and publically available.

**H** The program structure and training requirements offer considerable flexibility to registrars, including options for part-time and interrupted training.
Recommendations for improvement

GG Review the usefulness of the curriculum to vocational training providers, supervisors and registrars including how often it is referred to and the extent to which it guides teaching and learning. (Standard 3.1)

HH Consider opportunities to achieve greater strategic alignment of the education programs with emerging demographic, economic and workforce issues, and changing patterns of community health. (Standard 3.1 and 3.2)

4. The Training Program – Teaching and Learning

<table>
<thead>
<tr>
<th>This set of standards is SUBSTANTIALLY MET</th>
</tr>
</thead>
</table>

Standard 4.1.1 (practice-based teaching and learning) is substantially met. Standard 4.1.2 (practical and theoretical instruction) is substantially met.

Commendations

I The College oversees a strong practice-based vocational training program with registrars being well supervised by College fellows with the appropriate skills.

J The College has established and maintained collegial and strong relationships with the vocational training providers to the benefit of the registrars’ learning and teaching environment.

K The College has excellent online learning resources for fellows and registrars, and has begun the process of mapping these to the curriculum domains and subject areas.

Recommendations for improvement

II Establish a complete list of registrars and their stage of training in order to plan appropriate support, educational resources and examinations. (Standard 4.1.1)

5. The Curriculum – Assessment of Learning

<table>
<thead>
<tr>
<th>This set of standards is SUBSTANTIALLY MET</th>
</tr>
</thead>
</table>

Standard 5.1 (assessment approach) is substantially met. Standard 5.2 (performance feedback) is substantially met. Standard 5.3 (assessment quality) is substantially met. Standard 5.4 (assessment of specialists trained overseas) is substantially met.

Commendations

L The requirement for External Clinical Teacher visits, which are a highly valued means of formative assessment and of providing feedback to registrars on the vocational training pathway.

M The commitment of the College to ensure that examination content reflects presentation and disease patterns seen in Australian general practice.

N Coordination and delivery of an objective structured clinical examination (OSCE) to a large number of candidates across multiple sites, including robust mechanisms to ensure consistency and quality assurance.
O  Clearly articulated processes for standard setting in relation to all fellowship examination components.

P  Introduction of the Specialist Pathway Program, resulting in greater clarity in the criteria and assessment processes for international medical graduates seeking recognition of specialist qualifications obtained overseas.

Q  Establishment of the Specialist Pathway Program Liaison Officer position, which provides advice and support to international medical graduates seeking admission to and progression through the Specialist Pathway Program.

R  The development of online learning modules to assist the orientation of Specialist Pathway Program candidates to the Australian healthcare environment.

S  The inclusion of an international medical graduate on the Appeals Committee when the matter involves an international medical graduate.

Recommendations for improvement

JJ  Review the adequacy of current arrangements for the oversight of the conjoint RACGP-Hong Kong College of Family Physicians (HKCFP) and RACGP-Academy of Family Physicians of Malaysia (AFPM) examinations. (Standard 5.1)

KK  Implement a process to ensure greater consistency between vocational training providers in the provision of formative assessments. (Standard 5.1)

LL  Consider mechanisms to further enhance the sharing of resources between vocational training providers, particularly with respect to formative assessment instruments and tools to track trainee progress. (Standard 5.2)

MM  Implement a process to ensure greater consistency between vocational training providers in the monitoring and early detection of underperforming registrars. (Standard 5.2)

NN  Review the educational and pastoral merits of setting a maximum limit on the number of times a candidate may sit each component of the fellowship examination. (Standard 5.3)

OO  Develop mechanisms to capture feedback from international medical graduates regarding College processes for assessing specialist qualifications obtained overseas and mechanisms of responding to such feedback. (Standard 5.4)

PP  Consider the extent to which greater national consistency can be achieved in the provision of educational supports for international medical graduates on the Specialist Pathway Program. (Standard 5.4)

6. The Curriculum – Monitoring and Evaluation (monitoring, outcome evaluation)  This set of standards is SUBSTANTIALLY MET

Standard 6.1 (ongoing monitoring) is substantially met. Standard 6.2 (outcome evaluation) is substantially met.

Commendations

T  The development of the RACGP Vocational Training Standards, particularly the consultation and mapping processes undertaken.
**Recommendations for improvement**

QQ  Develop mechanisms to further contribute to the annual General Practice Education Training (GPET) survey, and to obtain and act on the results. (Standard 6.1)

RR  Increase monitoring of the quality of provision of the vocational training program between accreditation visits, through incorporation of more rigorous and effectively aligned reporting requirements. (Standard 6.1)

| 7. Implementing the Curriculum - Trainees (admission policy and selection, trainee participation in governance of their training, communication with trainees, resolution of training problems, disputes and appeals) | This set of standards is SUBSTANTIALLY MET |

Standard 7.1.2 (processes for selection into the training program) is substantially met. Standard 7.2 (trainee participation in governance) is substantially met. Standard 7.3 (communication with trainees) is substantially met. Standard 7.4 (resolution of training problems and disputes) is substantially met.

**Commendations**

U    The communication and support provided to registrars and fellows of Aboriginal and Torres Strait Islander background.

**Recommendations for improvement**

SS  Consider the formation of a Trainee Committee within the College to assist with engagement and communication with registrars. (Standard 7.2)

| 8. Implementing the Training Program – Delivery of Educational Resources (supervisors, assessors, trainers and mentors; and clinical and other educational resources) | This set of standards is MET |

Standard 8.1 (supervisors, assessors, trainers and mentors) is substantially met. Standard 8.2.1 (processes to select and recognise sites and posts for training purposes) is substantially met.

**Commendations**

V    The College’s standards specifically related to the quality of supervision.

W    The dedication and enthusiasm of directors of training, supervisors and medical educators who support, mentor and educate RACGP registrars.

X    The strengthening of the working relationship between the RACGP and the Australian College of Rural and Remote Medicine as evidenced by work towards the Bi-College accreditation process.

**Recommendations for improvement**

TT  Explore solutions to address the potential tension between the employment and educational aspects of the trainee-general practice supervisor relationship, particularly with respect to vulnerable registrars. (Standard 8.1.1)
Reconsider the educational rationale for the five-year stand-down until a new fellow can be appointed as a supervisor. (Standard 8.1.2)

Address the technical issues (including browser compatibility) that limit the accessibility of online resources. (Standard 8.2.3)

| 9. Continuing Professional Development (programs, retraining and remediation) | This set of standards is MET |

Standard 9.1.1 (professional development programs responding to scientific developments in medicine as well as changing societal expectations) is substantially met. Standard 9.3 (remediation) is substantially met.

**Commendations**

Y The College’s work in ensuring that Category 1 Quality Improvement and Continuing Professional Development (QI&CPD) activities are educationally robust.

Z The College’s progress in mapping gplearning to the RACGP Curriculum for General Practice 2011 as part of the development of the Quality Improvement and Continuing Professional Development (QI&CPD) program.

**Recommendations for improvement**

WW Continue to improve the education framework of Category 2 Quality Improvement and Continuing Professional Development (QI&CPD) activities. (Standard 9.1)

XX Enhance the College’s Quality Improvement and Continuing Professional Development (QI&CPD) program so participants can identify and address learning needs relevant to their area of practice. (Standard 9.1.1)