

## Transition to College-Led Training Advisory Committee

## Communique - 4 May 2021

The sixth meeting of the Australian Government Department of Health Transition to College-Led Training Advisory Committee (TCLTAC) was held on 4 May 2021.

A definition of College-led training definition has been developed in consultation with GP training stakeholders over recent months. TCLTAC Members discussed and recommended the definition outlined below.

College-led training refers to the model of vocational training for General Practice where the Australian College of Rural and Remote Medicine and the Royal Australian College of General Practitioners are directly responsible for the governance, management, and delivery of all aspects of their respective specialist training programs.

The model recognises the central role of the professional colleges in ensuring a robust and integrated system of specialist medical education that supports GP workforce outcomes and the health and wellbeing of Australian communities.

GP Colleges are accountable to deliver high quality training, education and assessment for registrars from recruitment and placement through to Fellowship (the vocational stage) and play a central role spanning the full continuum of general practice education and training from undergraduate, vocational and post-Fellowship systems; with the collaboration with Supervisors, Training Sites and other providers and partners as appropriate.

The Royal Australian College of General Practitioners (RACGP) presented their model for College-led training which is outlined in their publicly available position paper. The RACGP outlined the key features of the model, include:

- using qualitative and quantitative information to understand community needs;
- integrating Aboriginal and Torres Strait Islander education and support;
- providing personalised case management with an emphasis on areas of need;
- progressive assessment and flexible entry to provide a more cost effective and attractive training pathway;
- tailored support and incentives;
- piloting an 'RACGP Service' to draw upon the capabilities of RACGP fellows to increase supervision in the most challenging areas; and
- distributed delivery that leverages local relationships.

Members thanked the RACGP for their presentation and committed to working with the College on the further development of the model, noting that a lot of detail is still to be worked through. It is anticipated the Australian College of Rural and Remote Medicine will present their model at a future meeting of the TCLTAC.

At this time, neither model has been endorsed by the Commonwealth Government.

TCLTAC will next meet on 18 May 2021. Further information on the Advisory Committee can be found at <a href="https://www.health.gov.au">www.health.gov.au</a>.