

GPEX Performance Review Policy

Note

This policy commences on 1 January 2016 and will apply to all registrars in the GPEX training program under the Australian General Practice Training (AGPT) program.

1. Purpose

To ensure registrars satisfactorily meet the training requirements associated with the GPEX training program and the relevant college examinations.

2. Scope of this policy

This policy applies to registrars enrolled in the GPEX training program.

3. Responsibility for implementation, compliance monitoring, measuring and continual improvement

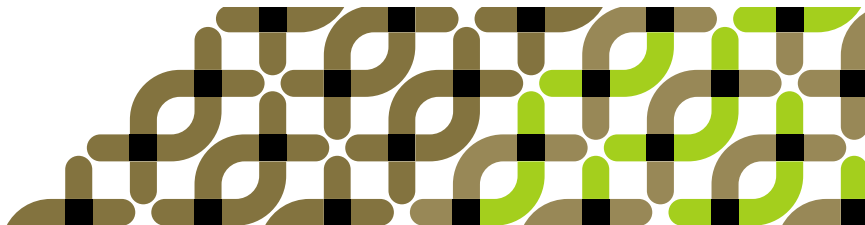
- Director of Medical Education (DOME)
- Chief Executive Officer (CEO)
- Director of Education Operations (DEO)

4. Policy statement - general

This policy outlines the process of registrar performance review and assessment that will determine successful completion of training.

5. Monitoring

- 5.1 Registrar's performance is continuously monitored (by the DOME, Deputy DOME, DEO and Program Training Advisors (PTA) throughout the year by:
- i. Training Advisors Contact meetings;
 - ii. Direct Observation Visits (DOV);
 - iii. Medical Educator (ME) mini-releases;
 - iv. GP supervisor feedback;
 - v. GP supervisor formative assessments;
 - vi. major release workshops;
 - vii. GP365;
 - viii. video consultations;
 - ix. satisfactory completion of paediatric requirements;



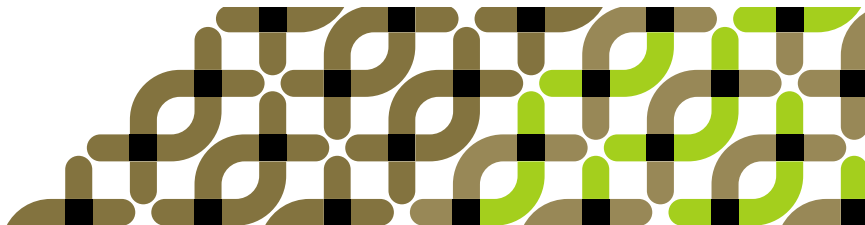
- x. informal contact with the registrar/practice manager/GP supervisor;
- xi. simulation workshops;
- xii. clinical audit;
- xiii. other agreed assessments.

6. Parameters of registrar performance

- 6.1 General Practice terms GPT 1 / PRRT 1, GPT 2 / PRRT 2
- 6.2 Successful completion of GPT 1 / PRRT 1 and GPT 2 / PRRT 2 will be determined on the basis of:
 - i. Supervisor Formative Assessments (SFA);
 - ii. DOV Assessments;
 - iii. Video Review (VR) Assessments;
 - iv. successful completion of GP365 Learning Essentials;
 - v. successful submission of GP365 Critical Case Analysis;
 - vi. successful completion of Pro-Start Emergency Simulation Program;
 - vii. completion of paediatric log book and other mandated paediatric activities;
 - viii. satisfactory participation in the registrar educational release program (major and regional release programs);
 - ix. satisfactory completion of clinical audit
 - x. demonstrated professionalism throughout the program (including, but not limited to, punctuality, appropriate working relationships with colleagues practice staff, GPEx staff and patients, no evidence of plagiarism).
 - xi. Note: non-compliance with the GP365 Learning Essentials and/or GP365 Critical Case Analysis components of the course will result in extension of GPT 1 / PRRT 1 and GPT 2 / PRRT 2 training (as appropriate).
- 6.3 GPT 3/ PRRT 3
- 6.4 Successful completion of GPT 3 / PRRT 3 and extended skills terms will be determined on the basis of:
 - i. DOV Assessments;
 - ii. VR Assessments;
 - iii. SFAs;
 - iv. demonstrated professionalism throughout the program (including, but not limited to, punctuality, appropriate working relationships with colleagues practice staff, GPEx staff and patients, no evidence of plagiarism).

7. Non-compliance

- 7.1 Where there is non-compliance with any components of the GPEx training program, a registrar must complete this component in their own time. This will be monitored by GPEx.
- 7.2 Registrars not meeting training requirements detailed above will be ineligible to receive Fellowship of the nominated college.



8. Extended skills (ES) posts

- 8.1 ES posts may be undertaken in a range of clinical areas. In some instances these posts may occur in the primary care setting, including general practice, whilst others may be hospital based.
- 8.2 Each ES post will have specific learning objectives that define the term and against which the Supervisor will assess the registrar.
- 8.3 In those instances where an ES post occurs in the primary care context, successful completion will be dependent on achieving the specific learning objectives and performing adequately as a general practitioner.

9. Advanced (RURAL) Skills Training (ARST) / Advanced Skills Training (AST)

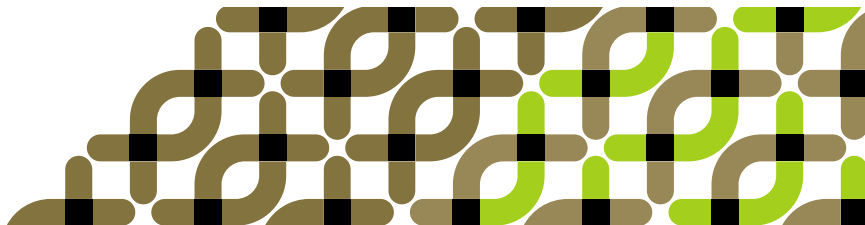
- 9.1 ARST/AST posts may be undertaken in a range of clinical areas. In some instances these posts may occur in the primary care setting, including general practice, whilst others may be hospital based. Accepted ARST/AST posts vary between colleges and registrars should refer to the relevant college websites for current details:
 - <https://www.acrrm.org.au/advanced-specialised-training-curricula>
 - <http://www.racgp.org.au/education/fellowship/ruraladvantage/>
- 9.2 Each ARST/AST post will have specific learning objectives that define the term and against which the supervisor will assess the registrar.
- 9.3 ARST/AST posts in anaesthetics and obstetrics must fulfil the curriculum requirements of the relevant Joint Consultative Committee.
- 9.4 ARST/AST posts are available for registrars in both rural and general streams.
- 9.5 For hospital based registrars, Extended Skill and Advanced Rural Training Post registrars, the hospital will determine successful completion of that training term on the basis of relevant supervisor assessments.
- 9.6 It is GPEx policy that registrars cannot undertake an ES post and an ARST/AST post consecutively.

10. Performance review

- 10.1 Feedback and support is given to registrars to enable development and to improve performance on an ongoing basis.
- 10.2 The following processes shall apply.

11. Performance Review Committee (PRC)

- 11.1 All registrars are reviewed formally by the PRC four times per year.
- 11.2 The PRC consists of the Deputy DOME (Chair), DOME, CEO, DEO, PTAs and MEs.
- 11.3 Meetings will have an agenda and be minuted.
- 11.4 If underperformance is identified by the PRC, the PRC will refer the registrar to the DOME in the first instance.



- 11.5 Where in the opinion of the DOME the registrar's performance is not at the required level, a registrar is not meeting training requirements to an adequate degree, or issues arise concerning the well-being or patient care or safety, the DOME will:
- i. take any immediate action that may be necessary to prevent or rectify any imminent danger or risk to well-being or patient care or safety;
 - ii. investigate the issues raised
 - iii. discuss the findings with the registrar and relevant parties;
 - iv. determine actions to address underperformance
 - v. report to the PRC;
 - vi. advise the registrar in writing of these actions.

12. Performance Management Panel (PMP)

- 12.1 In the case of serious and/or repeated or continuing underperformance or unacceptable conduct the DOME may refer the registrar to the PMP. The PMP will comprise of the CEO (Chair), DOME, Deputy DOME and DEO or delegate and from time to time may include the relevant ME. The PMP will:
- 12.1.1 confirm in writing with the registrar that they are not meeting performance and/or conduct requirements giving reasonable notice of the nature of the underperformance;
 - 12.1.2 determine with the registrar the appropriate steps and timeframes to address the underperformance and/or conduct;
 - 12.1.3 document the above and confirm in writing with the registrar;
 - 12.1.4 provide a report to the PRC.
- 12.2 If a registrar fails to adequately address and comply with the PMP's requirements, the PMP may develop a remediation plan (see Remediation Policy), prior to which the registrar will be informed in writing by the PMP.

13. Support options

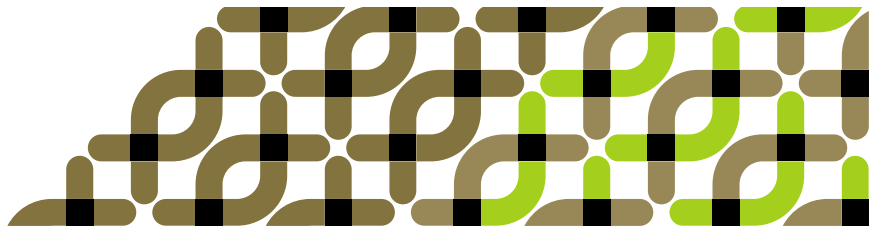
Where appropriate the DOME, the PMP and the PRC will consider available support options that may be appropriate to the circumstances including support mechanisms, personal intervention, remediation and various types of leave in accordance with *GPEX Registrar Leave Policy*, *GPEX Remediation Policy*, *GPEX Wellbeing and At Risk Policy*, *AGPT Leave from Program Policy 2016*, *AGPT Remediation Policy 2016* and *AGPT Transfer Policy 2016*.

14. Related documents

This policy should be read in conjunction with the following GPEX and AGPT policies:

- GPEX Grievance Policy
- GPEX Registrar Leave Policy
- GPEX Remediation Policy

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- GPEX Wellbeing and At Risk Policy
- AGPT Program Leave Policy 2017
- AGPT Remediation Policy 2017
- AGPT Transfer Policy 2017