



RVTS Remediation Policy & Procedure

Introduction

The RVTS provides vocational training towards FRACGP/FARGP and FACRRM for medical practitioners in remote and isolated communities throughout rural and remote Australia.

The RVTS is a four year program designed to deliver structured distance education and supervision to doctors whilst they provide general medical services to a remote and/or isolated community.

A number of support mechanisms are in place to assist registrars with their training including additional resources for registrars identified as being at risk. Details are available in the RVTS Registrar at Risk Policy and Procedure.

Where there are grave concerns about a registrar's progress, the Remediation Policy and Procedure will be invoked.

Purpose

Placing a registrar into remediation is a serious step which will be determined by the CEO based on concerns communicated which include:

- Failure to pass any single component of the FRACGP exam in two attempts
- Failure to pass any single component of the FACRRM assessment in two attempts
- Failure to comply with mandatory requirements of training without reasonable explanation
- Termination of employment
- Failure to notify change of circumstances
- Two unsatisfactory multi source feedback reports
- Two unsatisfactory CTV reports
- Two unsatisfactory supervisor reports
- Other significant documented concern from external organisations eg State or Territory Medical Board, medical defence organisation

The purpose of this document is to outline the procedure for RVTS Registrars identified as requiring remediation.

If grave concerns in relation to patient safety are brought to the attention of the CEO, there may be grounds for immediate notification of the relevant medical board and cancellation of the registrar's placement approval/s.

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Procedures

1. Registrars identified as requiring remediation will be notified of this verbally and in writing by the CEO.
2. The Registrar, their Training Adviser, and the CEO and/or Senior Medical Educator will meet to negotiate a remediation program. The remediation program will detail a learning plan including learning goals, specific interventions, supports and assessment of progress. The remediation program may also include an agreement to receive ongoing medical or psychological assistance. The details of such assistance will remain confidential to the Registrar.
3. Time in remediation for RVTS registrars will not be recognised as training time.
4. Failure to fully participate/complete step 2 will result in termination of enrolment from the RVTS program and Medicare Australia, RACGP and ACRRM will be notified accordingly. The RVTS Board will be notified prior to termination.
5. The decision that a registrar requires remediation is final and is not subject to appeal.

Remediation program

The duration of the remediation program will need to be agreed with each Registrar but is likely to be for a period of at least six months.

1 Initial assessment of needs over a four week period

The Registrar will nominate their intended end point of training, either FACRRM or FRACGP or both. The curriculum for the chosen college/s will be used as the outline for remediation.

A lead medical educator will be appointed to oversee the remediation program. This may be a member of RVTS staff, a supervisor or an external medical educator.

The Registrar will submit a de-identified copy of the medical records for each patient seen for one day per week for 4 weeks to the person nominated as lead educator. The registrar and lead medical educator will meet to discuss these cases on a weekly basis.

The Registrar will submit videos of five consultations to the lead medical educator.

Information from the Registrar's training record, the case notes and videos will be used to assess progress against the domains of practice as determined by either the RACGP or ACRRM.

The Registrar, Supervisor and Training Advisor will also suggest areas of the domains of practice that would benefit from development.

The Registrar will complete a learning styles questionnaire

2 Development of Remediation Program

At the end of the four week assessment period the lead medical educator for remediation and the Registrar will meet to outline a remediation program. The remediation program may include plans for the Registrar to receive medical or psychological assistance and will include a learning plan.

The learning plan will include:

- learning outcomes as defined by the relevant curriculum domains
- results of the registrar's learning style questionnaire
- use of learning methods/resources most suited to the registrar's learning style
- consideration of additional CT visits with appropriate briefing of the visitor.
- agreed level of supervision of the Registrar's clinical practice
- information on assessments to be used at the end of the remediation phase

Where remediation cannot occur on site, the CEO may negotiate an off- site program with a facility in a more supervised setting e.g. the Base Hospital town or major referral centre.

3 Remediation phase

- Registrar works in clinical practice with the agreed level of supervision
- Registrar completes learning sessions as stipulated in the learning plan
- Medical record review for every patient seen one day per month by Registrar sending lead medical educator de-identified consultation notes
- Videotape of consultations for one day per month. Lead medical educator to choose 2 cases for review.
- Completion of Multisource Feedback Tool.

4 Final assessment

Meeting with registrar, training advisor, lead medical educator, supervisor CEO and/or Senior Medical Educator to:

- Review the remediation program.
- Determine if the learning outcomes have been achieved?
- Decide if the registrar is recommended to continue with RVTS training or recommended to continue with GP training but with on-site supervision. In this case the Registrar may need to apply to the Australian General Practice Training Program.

RVTS Registrars with Major Un-remediated Deficiencies

If, at the completion of the above process, the CEO determines that the RVTS registrar has major un-remediated deficiencies and that further remediation is unlikely to be successful the registrar should be counseled and advised that a career path other than remote general practice medicine be pursued and not be re-enrolled in subsequent training years. The RVTS Board will be informed and Medicare Australia, RACGP and ACRRM will be notified accordingly.

Medical Boards

All persons involved in registrar remediation have a duty to inform the relevant Medical Board if they consider the registrar is unfit to practice. The preferred mechanism is for anyone concerned about fitness to practice to discuss this with the CEO and the Registrar prior to referral to the Medical Board.

Responsibility

The RVTS staff, supervisors and contractors are responsible for the implementation of this policy.

Related documents

Privacy Policy
RVTS Registrar at Risk Policy and Procedure

Document control

Warning – Uncontrolled when printed! The current version of this document is kept on the RVTS server.

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