



AUSTRALIAN GENERAL PRACTICE TRAINING (AGPT) PROGRAM POLICIES 2019

Date first approved:	16 December 2015
Date of effect:	1 January 2019
Date last amended: (refer Version Control Table)	28 August 2019
Approved by:	Assistant Secretary, Health Training Branch
Custodian title and e-mail address:	Director, GP Training Policy and Education Section AGPTManagement@health.gov.au
Responsible Section:	GP Training Policy and Education Section, Health Training Branch
Audience:	Registrars enrolled on the AGPT Program Applicants seeking selection onto the AGPT Program Regional Training Organisations GP Colleges Stakeholders

Contents

1	Overarching Principles of the 2019 AGPT Program Policies	2
2	Objectives for the AGPT Program Policies	2
3	2019 AGPT Program Policies	3
4	Key Changes in the 2019 AGPT Program Policies	3
5	Amendments to the AGPT Program Policies	5
6	Options for Registrar Support.....	5
7	Flexibility in the AGPT Program Policies.....	6
8	Accepted Supporting Documentation and Evidence	6
9	Medicare Provider Numbers.....	7
10	Compliance and Monitoring.....	8
11	Common AGPT Program Roles and Responsibilities	8
12	Version Control and Change History	9

1 Overarching Principles of the 2019 AGPT Program Policies

- 1.1 The Australian General Practice Training (AGPT) Program Policies have been informed by ongoing consultation with stakeholders. The revised policies aim to support Regional Training Organisations (RTOs) and registrars training on the AGPT Program.
- 1.2 The 2019 AGPT Program Policies apply to all registrars enrolled on the AGPT Program.
- 1.3 As of 1 January 2019 the AGPT Program will utilise the Modified Monash Model (MMM) to define training boundaries in place of the Australian Standard Geographical Classification – Remoteness Areas.
 - 1.3.1 Registrars training on the general pathway of the AGPT Program will be required to train in a Modified Monash (MM) 1-7 location and registrars training on the rural pathway of the AGPT Program will be required to train in a MM 2-7 location.
- 1.4 Allowances approved under the previous AGPT Program policies (including leave or extensions of training time) will be honoured under the 2019 AGPT Program policies. A record with the date of approval will need to be retained on file by the RTO.
- 1.5 The AGPT Program policies should be considered as an entire suite of policies, with no one policy superseding or negating the requirements of any other.
- 1.6 All Training Regions of the AGPT Program will be considered to be separate regions, regardless of the RTO responsible for the management of registrar training across the Training Regions.
- 1.7 It is expected that registrars will remain in the Training Region in which they accepted a training place for the duration of their training (transfers are permitted in certain circumstances as specified in the *AGPT Transfer Policy 2019*).
- 1.8 For registrars commencing training following selection onto the AGPT Program, they are required to hold general medical registration without conditions or undertakings in Australia by the commencement of the 2019 training year.
 - 1.8.1 It should be noted that training on the AGPT Program begins in January or February each year with the specific start dates determined by the individual RTOs in each Training Region.
- 1.9 The policies seek to ensure that a minimum of 50% of registrar training occurs in a Modified Monash (MM) 2-7 location, in line with the Government's commitment to ensure that communities across all areas of Australia, including rural and regional locations, are receiving services from registrar training.
- 1.10 RTOs must develop and publish local policies that complement all of the AGPT Program policies. These local policies must be made accessible to all registrars within the RTO's Training Region.
- 1.11 RTOs must manage individual registrar's training and progress through training as per the 2019 AGPT Program Policies.
- 1.12 It is expected that in instances where the Department of Health requests an RTO to take over the management of a registrar's training from another RTO, that all efforts will be made to comply with the Department of Health's request.

2 Objectives for the AGPT Program Policies

- 2.1 Contribute to the provision of high quality GP training across Australia.
- 2.2 GP registrars are well-distributed, with a minimum of 50% of training occurring in MM 2-7 locations.
- 2.3 GP training is delivered efficiently, with registrars progressing through the training program within the set timeframes ensuring continuity of training and recency of practice.
- 2.4 Doctors entering the Program are selected through a merit-based, transparent and equitable selection process.

- 2.5 Provide registrars with complaints and appeals processes.
- 2.6 Registrars are treated equitably during their general practice training.
- 2.7 Support registrars to undertake training in Aboriginal and Torres Strait Islander health settings, within the parameters set by the Department of Health.

3 2019 AGPT Program Policies

- 3.1 *AGPT Academic Post Policy 2019*
- 3.2 *AGPT Appeal Policy 2019*
- 3.3 *AGPT Australian Defence Force Registrars Policy 2019*
- 3.4 *AGPT Complaints Policy 2019*
- 3.5 *AGPT Extension of Training Time Policy 2019*
- 3.6 *AGPT Program Leave Policy 2019*
- 3.7 *AGPT Rural Generalist Policy 2019*
- 3.8 *AGPT Training Accessibility Policy 2019*
- 3.9 *AGPT Training Obligations Policy 2019*
- 3.10 *AGPT Training Region Policy 2019*
- 3.11 *AGPT Transfer Policy 2019*
- 3.12 *AGPT Withdrawal Policy 2019*

4 Key Changes in the 2019 AGPT Program Policies

- 4.1 A Selection Policy has not been included in of the 2019 AGPT Program Policies. The RACGP and ACRRM are responsible for the recruitment processes to select new doctors for the AGPT Program. Prospective applicants and RTOs should check the AGPT website and the Relevant College website(s) for further information.

4.2 AGPT Academic Post Policy 2019

- 4.2.1 This policy clarifies the eligibility requirements for RACGP and ACRRM registrars seeking to undertake an Academic Post through the AGPT Program.
- 4.2.2 This policy clarifies that registrars undertaking an approved Academic Post need to remain enrolled in the AGPT Program for the duration of their Academic Post training.

4.3 AGPT Appeals Policy 2019

- 4.3.1 The definition of a Clinical Decision was amended for clarity.
- 4.3.2 This policy no longer applies to remediation decisions made by RTOs and has been amended to reflect this.
- 4.3.3 This policy specifies that registrars generally cannot appeal the decision of an another RTO to not accept a transfer from the registrar's current RTO or Training Region if this decision was based on funding or RTO capacity issues.

4.4 AGPT Australian Defence Force Registrars Policy 2019

- 4.4.1 This is a new addition to the 2019 AGPT Program Policies.
- 4.4.2 This policy allows RTOs, rather than the Department of Health, to approve applications for leave, deferrals of the Commencement of Training and transfer by ADF registrars to meet ADF service requirements if their application(s) align with ADF posting orders.
- 4.4.3 This policy clarifies that ADF reservists who are on deployment are able to access the leave and transfer provisions in this policy.

4.5 AGPT Complaints Policy 2019

4.5.1 There are no major amendments to this policy.

4.6 AGPT Extension of Training Time Policy 2019

4.6.1 This policy has been amended to specify that ADF registrars who complete their requirements for fellowship while on deployment can apply to their RTO for an Extension Awaiting Fellowship from the date of their return from that deployment.

4.6.2 This policy has been amended so that registrars who are on an Extension Awaiting Fellowship and wish to work below the College's minimum Full Time Equivalent (FTE) requirement are now able to do so as long as they negotiate and agree their preferred working hours with their training facility.

4.6.3 This policy has been amended to clarify that registrars can apply to their RTO for an Extension for Assessment Purposes if further time is required to complete their skills training term (for example if a registrar has not seen the breadth of patient representation needed to satisfy the College Censor).

4.6.4 Under clause 5.5 of this policy, details regarding Academic Posts have been removed and this policy now refers to the *AGPT Academic Post Policy 2019* to ensure consistency in the information provided.

4.6.5 A new category of extension has been included under clause 5.6, Extension to Transition. This extension allows up to a maximum of 12 calendar weeks for registrars to transition from the AGPT Program to the RACGP's Practice Experience Program or ACRRM's Independent Pathway provided this has been approved by the Relevant College as per clause 6 of the *AGPT Training Obligations Policy 2019*.

4.7 AGPT Program Leave Policy 2019

4.7.1 This policy has been amended to clarify that in certain instances registrars can undertake paid employment while on Category 1 Leave, which should be discussed with and approved by their RTO.

4.7.2 This policy has been amended to ease the restrictions on Category 2 Leave.

4.7.2.1 Category 2 Leave can now be taken outside of Core Vocational Training; and

4.7.2.2 Registrars are now able to take leave immediately following a period of a different category of leave, for example Category 1 Leave immediately followed by Category 2 Leave.

4.7.3 This policy states that, where possible, applications for leave should be negotiated and approved by the RTO in advance. It also clarifies that registrars need to provide all relevant supporting documentation and evidence to support their applications.

4.7.4 This policy allows registrars to sit College exams/assessments while on a period of leave, provided they have the approval of their RTO.

4.7.5 This policy has been amended so that RTOs are able to consider and approve all applications for registrars to defer the Commencement of Training.

4.7.6 This policy clarifies how deferrals should be entered into RIDE.

4.7.7 This policy clarifies when leave does or does not contribute towards a registrar's training time cap.

4.8 AGPT Rural Generalist Policy 2019

4.8.1 This is a new addition to the 2019 AGPT Program Policies.

4.9 AGPT Training Accessibility Policy 2019

4.9.1 There are no major amendments to this policy.

4.10 AGPT Training Region Policy 2019

4.10.1 Further information has been added regarding international training placements.

4.11 AGPT Training Obligations Policy 2019

- 4.11.1 This policy clarifies how dual fellowship registrars should undertake their training if they are granted RPL from one College but not the other.
- 4.11.2 This policy specifies that dual fellowship registrars can apply for and obtain fellowship of one College before they have completed the training requirements for obtaining fellowship of the other College, but that they must not apply to Medicare for certification of their Vocational Registration until they have obtained fellowship of both Colleges.
- 4.11.3 Further details have been included regarding fatigue management and registrars travelling considerable distances to Training Facilities.
- 4.11.4 Clauses relating to ADF registrars have been removed and can now be found in the new *AGPT Australian Defence Force Registrars Policy 2019*.
- 4.11.5 Further information has been added regarding international training placements.
- 4.11.6 A new approach to provide additional support to registrars who have exhausted their available training time (including approved extensions of training time) without attaining fellowship has been included in this policy under clause 6.

4.12 AGPT Transfer Policy 2019

- 4.12.1 This policy specifies that registrars are expected to work with their RTO to secure a training placement within their RTO's Training Region.
- 4.12.2 This policy has been amended to strengthen the restriction on transfers prior to the Commencement of Training or during the first six months of training.
- 4.12.3 This policy requires that when an RTO declines a transfer request from a registrar currently training in a different RTO and/or Training Region, the requested RTO must provide the registrar a letter detailing the reasons why the requested transfer was declined.

4.13 AGPT Withdrawal Policy 2019

- 4.13.1 This policy provides registrars the option of waiving the 20 business day cooling off period if they voluntarily withdraw from the AGPT Program and are seeking to reapply through the AGPT selection process.
- 4.13.2 This policy states that registrars who were offered a place on the AGPT Program through the selection process and who then withdraw under Category 1b while the selection process is still running will not attract the 20 business day cooling off period to enable the place to be offered to another applicant.
- 4.13.3 This policy states that registrars may be withdrawn if they fail to maintain their membership with the Relevant College.
- 4.13.4 This policy provides more details regarding when notifications of registrar withdrawals need to be made.

5 Amendments to the AGPT Program Policies

- 5.1 The Department of Health is committed to ensuring that the AGPT Program policies are updated as required to ensure they continue to support RTOs to manage registrar training and assist registrars in progressing through the AGPT Program.
- 5.2 Should there be any changes to the AGPT Program or other programs and policies that impact the AGPT Program, the Department will make the necessary changes to the AGPT Program policies and communicate them to stakeholders.

6 Options for Registrar Support

- 6.1 There are a number of organisations and options that can provide support to registrars throughout their training on the AGPT Program. These supports include, but are not limited to:
 - 6.1.1 General Practice Registrars Australia (GRPA);

- 6.1.2 RTOs via Registrar Liaison Officers (RLOs), Directors of Training, Medical Educators and other RTO Staff;
- 6.1.3 Australian Medical Association (AMA); and
- 6.1.4 The Relevant College.

7 Flexibility in the AGPT Program Policies

- 7.1 The AGPT Program Policies aim to ensure that registrars progress through their training on the AGPT Program within set timeframes, with continuity of training and recency of practice so that registrars attaining fellowship through the Program are ready to practice as independent specialist GPs.
- 7.2 While registrars are required to adhere to the requirements specified within the policies, there may be circumstances where registrars will require additional flexibility to manage their training, and/or other circumstances occurring in their lives.
- 7.3 The policies are cognisant of this, with additional flexibilities for registrars to complete their training set out in a number of the policies. These include the Extension of Training Time Policy, Program Leave and Training Obligations Policy. In addition, the Transfer Policy enables registrars to transfer to a different training region or pathway on either a permanent or temporary basis in some circumstances to undertake their training.

8 Accepted Supporting Documentation and Evidence

- 8.1 Submissions, applications, complaints or requests made to the Department of Health and/or the RTO, usually require supporting evidence and documentation.
- 8.2 The following are the types of the supporting documentation and evidence that will be accepted:
 - 8.2.1 A valid medical certificate or letter of support from a relevant medical practitioner confirming the registrar, or an immediate family member has an illness or injury and the impact upon the registrar;
 - 8.2.2 A letter of support from a counsellor, psychologist or psychiatrist confirming the registrar is suffering from a mental illness and the impact of this illness upon the registrar;
 - 8.2.3 In the case of illness of an immediate family member, the supporting documentation should detail the personal support required of the registrar, why no other support is available and the impact upon the registrar;
 - 8.2.4 A death certificate or letter of support from a relevant medical practitioner;
 - 8.2.5 A birth certificate or letter of support from a relevant medical practitioner;
 - 8.2.6 Foster and/or adoption papers or permanent care orders;
 - 8.2.7 In the case of acute personal/emotional trauma, a signed statement from a professional counsellor, psychologist, psychiatrist or relevant medical practitioner verifying how the registrar has been impacted; and
 - 8.2.8 A statutory declaration confirming the registrar, or an immediate family member, has an illness or injury.
- 8.3 Any supporting documentation or evidence provided from a medical practitioner must not be written by anyone with a potential or perceived conflict of interest. This includes:
 - 8.3.1 The registrar's family;
 - 8.3.2 The registrar's friends;
 - 8.3.3 Staff from the registrar's RTO; or
 - 8.3.4 Staff/medical practitioners from the practice where they are or have been training.
- 8.4 The registrar's treating medical practitioner must have expertise and qualifications to be eligible to provide the documentary medical evidence. The medical practitioner must declare they have

no known or perceived conflict of interest in supplying the supporting documentation or evidence and advise how long they have been treating the registrar or family member.

9 Medicare Provider Numbers

- 9.1 A Medicare Provider Number uniquely identifies a medical practitioner and the location from which they have provided a service. Payment of Medicare Benefits Schedule rebate claims for services provided by a registrar may be delayed or disallowed if the Department of Human Services cannot identify the registrar as having been assessed as eligible to claim Medicare benefits at their place of practice.
- 9.2 A registrar can use the Medicare Provider Number granted for their AGPT Program training placement (AGPT Medicare Provider Number) while undertaking training on the AGPT Program in order to:
 - 9.2.1 Complete valid accounts and receipts for their services, so that claims for Medicare rebates for their services can be made;
 - 9.2.2 Refer their patients to other specialist through the Medicare system; and
 - 9.2.3 Request services on behalf of their patients.
- 9.3 There are legislative prohibitions on granting doctors retrospective access to the Medicare Benefits Schedule at their place of practice (commonly referred to as backdating rebate claims). These prohibitions apply to all registrars.
- 9.4 Registrars should not assume their services will attract Medicare rebates until their access to the Medicare Benefits Schedule is confirmed in writing by the Department of Human Services.
- 9.5 Registrars are only eligible for an AGPT Medicare Provider Number that will enable them to provide Medicare rebateable services due to their enrolment on the AGPT Program and inclusion on the Register of Approved Placements.
 - 9.5.1 AGPT Medicare Provider Numbers are location specific (linked to the street address of the Training Facility) and only apply to the training term and Training Facility for which they were applied for.
 - 9.5.2 AGPT Medicare Provider Numbers cannot be transferred to a different location. Registrars will require an AGPT Medicare Provider Number for every Training Facility in which they will be undertaking training.
- 9.6 Registrars withdrawn from the AGPT Program will be removed from the Register of Approved Placements. Once a registrar is removed from the Register of Approved Placements they are unable to use their Medicare Provider Number. The Department of Human Services will send a letter to the registrar confirming the date they will be removed from the Register of Approved Placements.
- 9.7 If a registrar appeals to the Department of Health regarding a decision made by the RTO or the Department of Health:
 - 9.7.1 The registrar can continue claiming Medicare Benefits while their AGPT Medicare Provider Number remains valid and they remain on the Register of Approved Placements;
 - 9.7.2 Extensions to a registrar's AGPT Medicare Provider Number will not be granted while the registrar is appealing the denial of an extension of training time and their current AGPT Medicare Provider Number has ceased; and
 - 9.7.3 Further AGPT Medicare Provider Numbers will not be granted if the registrar is appealing their withdrawal from their RTO's training program and their current AGPT Medicare Provider Number has ceased.
- 9.8 The *AGPT Training Obligations Policy 2019* sets out the training time cap for registrars which must be complied with.
 - 9.8.1 RTOs must not support and apply for an AGPT Medicare Provider Number that extends beyond the training time cap allowed to the registrar under the *AGPT*

Training Obligations Policy 2019 unless one of the circumstances specified in clause 9.8.1.1 below applies.

9.8.1.1 If the registrar has an approved extension of training time (including a Further Extension of Training Time or an Extension to Transition) under the *AGPT Extension of Training Time Policy 2019*, approved Category 2 Leave under the *AGPT Program Leave Policy 2019* which extends their training time beyond the cap or an approved exception to the *AGPT Program Leave Policy 2019*, they may apply for an AGPT Medicare Provider Number to cover the extension to their training time.

9.8.1.2 AGPT Medicare Provider Numbers must not be approved beyond a registrar's available training time (including approved extensions of training time).

10 Compliance and Monitoring

- 10.1 The Department of Health reserves the right to monitor RTO compliance with the AGPT Program Policies as required.
- 10.2 The Department of Health will send a written request for response to RTOs if data discrepancies are found during monitoring activities. RTOs will be expected to reply to the Department of Health's request within 20 business days with reasons for the discrepancies and the actions that will be taken to prevent them from recurring.

11 Common AGPT Program Roles and Responsibilities

- 11.1 These are the roles and responsibilities that are common to registrars, RTOs and the Department of Health across all AGPT Program Policies.
- 11.2 Registrars are responsible for:
 - 11.2.1 Monitoring their own health and well-being;
 - 11.2.2 Actively identifying and managing their well-being and fatigue;
 - 11.2.3 Behaving professionally, ethically and responsibly within their training;
 - 11.2.4 Practising safely;
 - 11.2.5 Monitoring their own progress through training;
 - 11.2.6 Meeting their Education and Training Requirements;
 - 11.2.7 Responding to requests for information from the Department of Health and/or their RTO;
 - 11.2.8 Being familiar and complying with the AGPT Program Policies, as well as relevant RTO, College and ADF requirements (where applicable);
 - 11.2.9 Maintaining general medical registration while training on the AGPT Program;
 - 11.2.10 Advising their RTO of any conditions and/or undertakings imposed on their medical registration;
 - 11.2.11 Ensuring that they hold current and correct Medicare Provider Number(s) for the appropriate Training Facilities before they commence training; and
 - 11.2.12 Obtaining and providing evidence to their RTO that they have obtained permanent residency or citizenship of Australia or New Zealand if they commence the AGPT Program as a FGAMS 457 visa holder.
- 11.3 RTOs are responsible for:
 - 11.3.1 Monitoring the health and well-being of registrars enrolled in the AGPT Program;
 - 11.3.2 Ensuring processes to manage registrar fatigue and assessing registrar workloads are in place;
 - 11.3.3 Monitoring registrars' progress through training;

- 11.3.4 Managing registrar training as required by the AGPT Program and the Relevant College;
 - 11.3.5 Managing a registrar's Training Time;
 - 11.3.6 Ensuring registrars are supported in their training to enable them to practise safely;
 - 11.3.7 Being familiar and complying with the AGPT Program Policies, as well as relevant RTO, College and ADF requirements (where applicable);
 - 11.3.8 Ensuring that registrars who commence the AGPT Program as FGAMS 457 visa holders have obtained their permanent residency or citizenship of Australia or New Zealand prior to issuing their Completion of Training Certificate;
 - 11.3.9 Responding to requests for information from the Department of Health;
 - 11.3.10 Notifying the Department of Health of registrars with conditions and/or undertakings imposed on their medical registration;
 - 11.3.11 Ensuring that registrars training have current general medical registration;
 - 11.3.12 Ensuring that all registrars enrolled in their training program hold current and correct Medicare Provider Number(s) for the appropriate Training Facilities before they commence training;
 - 11.3.13 Ensuring that any Medicare Provider Number applications submitted on behalf of registrars do not future date an AGPT Medicare Provider Number beyond the registrars training time cap;
 - 11.3.14 Ensuring that the Registrar Information Data Exchange (RIDE) is updated regularly to ensure registrar records are up to date, complete and accurate;
 - 11.3.15 Participating in compliance and monitoring activities;
 - 11.3.16 Developing and managing local policies and procedures that complement the entire suite of AGPT Program policies; and
 - 11.3.17 Ensuring the RTO local policies and procedures for registrars on the AGPT Program are made publically accessible and communicated to registrars.
- 11.4 The Department of Health is responsible for:
- 11.4.1 Monitoring the implementation and application of the AGPT Program policies;
 - 11.4.2 Monitoring registrar and RTO compliance with the AGPT Program policies;
 - 11.4.3 Following up with RTOs on discrepancies found during monitoring activities;
 - 11.4.4 Making amendments to the policies as required; and
 - 11.4.5 Making the policies available on the AGPT website.

12 Version Control and Change History

Version Control:	5
Date Effective:	1 October 2019
Contact Person:	Director, GP Training Policy and Education Section
Amendment:	Fifth Version