BALLARAT PHYSICIAN EDUCATION PROGRAM



Zoe Swain

Grampians Health – Ballarat Physician Education

Our goal is to build on existing regional training networks and assist in creating best opportunities for our trainees.

Basic Physician Training Selection Process

Initial screening

Evidence	Selection criteria assessed	Results
 Applications form AHPRA register check Other evidence 	Eligible for general registration with AHPRA	Eligible for BPT or Not eligible for BPT

Selection criteria

Essential

- 1. Capability and commitment to pursue career as a physician
- 2. Ability to plan and manage learning
- 3. Ability and willingness to achieve basic training competencies
 - Medical expertise
 - Communication
 - Quality and safety
 - Teaching and learning
 - Cultural competence
 - Ethics and professional behaviour
 - Judgement and decision making

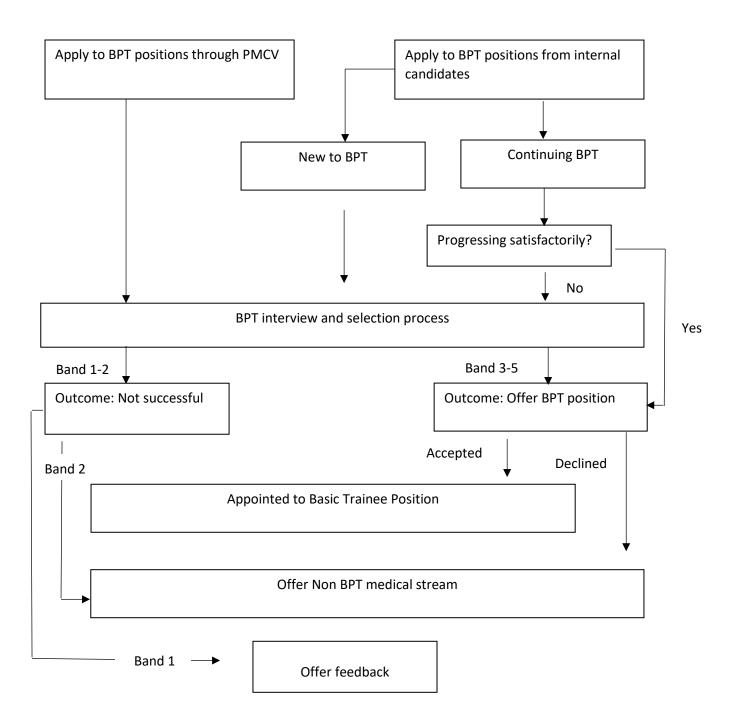
Desirable

- 1. Rural and regional origin trainees
- 2. Experience in conducting or active involvement in audits or research activities

Evidence

- Curriculum vitae and cover letter
- End of term assessments (1&2) or reference check for external candidates
- Professional development/education and training attendance
- Interview
- Rural and regional training and experience
- Research and quality improvement

Flowchart for BPT recruitment



The main goals of BPT1 are

- To learn and practice clinical medicine
- Develop relationships with senior peers
- Enhance your CV and assist with career development

The advantages of training in Ballarat are

- Our engaged team of educators
- Regional clinical exposure and experience
- Flexible training program

Engagement of Ballarat Physicians:

Whilst the BPT program is co-ordinated by paid staff, the majority of clinical teaching by Consultants, Fellows and Advanced Trainees is done voluntarily. At Ballarat, our trainees are not in competition with each other. We see that there is great strength in mutual support, co-operation and unity.

BPT1 is the beginning of your career as a physician and building a good reputation is important. Always deal with others respectfully and professionally in your day to day actions, particularly in times of conflict.

Exposure to regional experiences:

Grampians Health – Ballarat has a catchment of over 250,000 people. BPT training is offered at 2 accredited sites, the acute site or Base Hospital campus and sub-acute site, the Queen Elizabeth Centre.

We have recently merged with a number of rural healthcare facilities. This includes Edenhope and District memorial Hospital, Stawell Regional Health and Wimmera Healthcare Group to form Grampians Health.

Benefits of training at a rural, regional and remote setting are increasingly recognised at college and federal levels.

Currently BPT1 undertake 4 rotations across 2 sites. We will work with you to ensure the rotations not only meet the RACP requirements, but also your training preferences and goals.

Grampians Health – Ballarat is a level 2 training hospital. Trainees can complete up to 2 years here. We ensure 4 sub-speciality rotations over the 2 years.

We are part of the Greater Western Consortium which includes Royal Melbourne Hospital, Western Health, and Albury Wodonga Health. We share training opportunities between Consortium members.

Trainee Resources

To ensure all trainees feel supported we have the following

- Dedicated BPT hub where the Education team is based with an open-door policy
- Medical Education Officer (Zoe) who is available to respond quickly to any issues raised
- Dedicated Medical Workforce Officers
- Regular education sessions
- Rostering sensitive to individual trainee needs
- Videoconferencing and recording of prime educational opportunities
- Mentors and supervisors

BPT Training Program at Grampians Health – Ballarat

- Bi-weekly education session Tuesday and Thursday afternoon
- Rostered protected education time
- Dedicated Clinical Exam Preparation sessions
- Smaller pool of trainees allowing for more individualised programs
- Near Peer Mentors

Trainee Support

Director of Physician Education (DPE) – Dr Soe Ko

If you are experiencing difficulty during your training, particularly with study or clinical issues please organise an appointment with Soe Ko. His office is in IMS area at the acute site. Appointment can be made via IMS administration. All issues are easier to manage if they are raised early, so don't hesitate to get in touch.

Your Educational Supervisors, Ward Consultants and Advanced Trainees are all available to provide support as your progress through the year. Don't hesitate to reach out if you have any issues.

Medical Education Officer (MEO) – Zoe Swain

Zoe is a valuable resource and support, she works part time, and can be found in the IMS office area. Zoe coordinates BPT education, journal clubs, written and clinical exam sessions.

Medical Workforce Officers – Jane Bell and Angela McMaster

Jane and Angela both work part time and both work closely with the DPE and Head of General Medicine for rostering and rotation allocation. If you have any issues, particularly with rotations and leave just get in touch.

Supervision

Clinical Rotations Supervisor (RS)

Your clinical rotation supervisor (Ward Consultant) provides general supervision related to your clinical work on that rotation. It is likely that during your rotation, you work with more than one Ward Consultant. You are encouraged to seek feedback from all you Ward Consultants, both formally and informally throughout the rotation. You will also need to ask one of them to provide a rotation supervisors report; do this early so you don't have to chase them later. If you have built a relationship with a certain consultant, you may also wish to ask them to be a formal referee for future job applications. You should also be on the lookout for potential mentors for both personal and professional development.

Educational Supervisor (ES)

As per RACP requirements, we will assign you a formal Educational Supervisor (ES). You are required to meet with your supervisor at least twice per year. We strongly advise that you arrange to meet more often than this, ideally meeting every 2 - 3 months to ensure you are getting the most out of your training and time at Ballarat.

Organising timely meetings with your ES, being up to date with all assessments and receiving and responding to their feedback are all key elements of progressing through to BPT 2. This is about professionalism, responsibility and organisation which are expectations of the Ballarat Physicians Education program.

Your ES will review your rotations and address any concerns you may have had with these. They will oversee your work based assessments and other written RACP requirements. They will ensure you are on track with your exam preparation and CV development and can provide career advice and other mentoring roles.

The end of year RACP BPT1 assessment is due at the end of January every year. You will need to have completed all your assigned tasks including end of year meeting with your supervisor to enable the year to be accredited. Any incomplete tasks will jeopardise your accreditation and may prevent you from progressing to BPT2.

With new BPT training program, progress review panel will make evidence-based decisions about trainees' progress through and completion of the program.

*Caution - many supervisors take leave in January so be organised early.

NOTE: The first meeting must have occurred before July and the second meeting before end of January.

Professional development advisor (PDA)

PDA can be your advanced trainee or consultant. PDA facilitates your personal and professional development and motivates you to reflect on non-clinical professional skills as identified in Professional Qualities Curriculum. You are required to meet with your PDA at least twice a year to get feedback on your reflections as documented in online Professional Qualities Reflection (PQR) tool.

Assessments

Grampians Health – Ballarat:

As a BPT1 you are required to submit an End of Term Assessment/ Ward Consultant Reports to the MEO at the completion of each rotation you undertake. It is a requirement of employment that every staff member engages in performance assessment. You can download a copy of the Ward Consultant report from the RACP website.

College Requirements: (subject to change with new training program)

Assessments

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- Learning Needs Analysis (LNA)
 - Minimum of 2 per year
 - Ideally 1 should be completed for each substantive rotation of 10 weeks or more (both core and non-core)
 - Mini Clinical Evaluation Exercises (mini CEX)
 - Minimum of 4 per year
- Professional Qualities Reflection (PQR)
 - Minimum of 2 per year
 - \circ 1 should be completed for each 6-month period
- Progress Report
 - o 2 per year completed at midyear and end of year
- Ward Consultant Reports
 - 1 per rotation does not need to be submitted to the RACP, but you need to send a copy to the MEO and should keep a copy for your own records.

BPT 1 Responsibilities

RACP Registrations:

All BPTs are required to register with the college by 28th February. If you are unregistered you risk your rotations not being accredited which will impact on your ability to participate in the exam process.

RACP portal:

You will receive your own portal with all your tasks and reports online. It is your responsibility to upload and keep track of any tasks completed.

College Requirements:

It is the responsibility of the BPT to understand and track their individual RACP requirements. Soe Ko can help you as it can get quite confusing. There are not many issues in BPT1, but you will need to understand these requirements as you move into BPT2 where your preferences can impact your RACP training totals.

Rotation Changes:

Any requests for rotation changes would need to be discussed with Soe Ko and approved by Soe Ko – no exceptions. This is to ensure that your RACP training totals are not negatively affected by the change.

Workplace expectations:

Trainees are expected to perform their clinical duty to the expected standard and complete their work place assessment at the end of each rotation.

It is important for trainees to seek regular feedback from their ward supervisor or consultant to enhance their performance. Trainees are expected to produce copies of the assessment when they have their supervisor meetings.

It is important for you to adhere to your roster and job expectation. Any form of roster change or leave must be applied for through the appropriate channels.

We work closely with Junior Medical Workforce to provide a balanced roster to allow an optimal clinical work environment with access to training opportunities.

Focus of the BPT 1 year

During your first year of training there are no exams and no formal study plan. This year you will be learning to be a solid, clinically sound resident in preparation for your transition to being a registrar in BPT2; studying clinically relevant material; developing a network of contacts; finding you direction; engaging in research; and or sitting on committees of influence. In essence you will develop yourself as an up and coming physician and develop your CV.

Learning to be a Registrar

You will draw from all the positive and negative role models to develop yourself as a registrar. At Ballarat, you will have opportunities to work as a registrar in sub-specialty team as BPT2.

Studying what is clinically relevant

You will be placed in many different clinical rotations as possible to broaden your experience. We strongly recommend studying around your experience to develop depth of knowledge which is clinically relevant and current.

Developing a network of contacts

As a result of working in many areas across the network, you will develop many contacts. It is up to you to assure that these are positive, professional relationships and that any potential conflict is dealt with respectfully and professionally. During this time, we hope that you will develop the confidence to approach Consultants and Head of Units for clinical advice and career guidance. You will make friendships amongst your cohort that will support you in difficult times and perhaps form the basis of a study group.

Finding direction

By working through contacts, experiencing different specialties and listening to your peer's experiences and considering lifestyle, you will hone your future direction. Sometimes it is less clear. If you are not sure, please reach out to any member of the Education team for support.

Developing a strong CV

• Research/Audits

Now is the time to start working on research/audits. If you have nothing in progress, ask your unit of interest if you can assist with any research in progress.

• Doctors in Training (DiT) Advisory Committees

It is regarded favourably if you volunteer your time for the benefit of others on a committee. It will also assist to broaden your network. It is something worth listing in your CV. Opportunity to join the Grampians Health – Ballarat DiT Advisory Committee are advertised via an Expression of Interest in February/March each year. We will also make you aware of any other opportunities that may arise.

• Examination Assistants (Bulldogs)

Where possible, BPT1 and BPT2 are expected to act as Exam Assistants ('Bulldogs') for both the mock and RACP clinical exams. It is a great opportunity for BPTs to see how the exam is structured and know the standard expected of them by BPT3.

Education

Dedicated BPT Educations Session – Tuesdays & Thursday 1300 – 1700hrs

Tuesdays and Thursday afternoon are dedicated to BPT education. Case presentations, guest clinical presenters, self-directed learning etc. You will be kept up to date with what is happening, when you will be expected to present. Department Unit Heads have given their support for you to attend these education sessions, particularly if you are based at the acute site. These sessions are delivered in a blended format and trainees can join live online. Please let us know if you are finding it difficult to attend.

Preparing to apply for Advanced Training

Grampians Health – Ballarat is part of the Western Victoria Regional Training Hub. Advanced Training in General and Acute Care Medicine is available within the "Hub" with rotations at Ballarat, Geelong and Warrnambool.

For Advanced Training in other specialties it is possible to complete some of your training in Ballarat: Cardiology (6 months), Geriatrics (12 months), and Oncology (12 months). In the future, we will have more sub-specialty rotations accredited.

We advise that you consider your advanced training pathway early in your BPT years and speak to your educational supervisor and specialists in your chosen field to help you progress towards application. Applications are generally open in the middle of your BPT3 year – right when you're preparing for your clinical exam – so it's worth preparing early!

Research

You will have little time to start research as exams approach. It is never too late to develop these skills and attributes. As you are now in BPT you need to consolidate your career plan and look at how you can position yourself in such a way to achieve and maximise your employment prospects.

Research is always something that can be both enjoyable and of real benefit to both yourself (as something to differentiate yourself when applying for jobs) and the wider health community. Grampians Health - Ballarat strongly supports research and most departments will have research you can be involved with.

Finding an area of interest and publishing in your field will be highly viewed in the selection process.

A full research project is not always possible and is not for everyone. Clinical audits and review of practice are always an alternative option. Unit heads will also often be able to direct you in this regard.

Conference/Study Leave

To ensure as many JMS as possible are able to have conference/study leave approved you need to submit your application for review. If you are being supported by a Head of Unit to present at a conference make sure you include this in the application.

We will facilitate all BPT2s to be able to attend written exam preparation courses in fair and transparent manner.

Curriculum Vitae What should your CV include?

• Experience and achievements

Medical experience and work are obviously the most relevant to your CV. Try and focus on how relevant the information you are putting on your CV is to the job you are applying for. When you refine your CV each year, put yourself in the place of the person responsible for selecting applicants, look at each part of your CV. Rationalise the importance of each entry, and evolve your CV appropriately.

Remember that everyone will have obtained similar experiences in terms of medical rotations, so think about anything that may differentiate you from others in this regard. If you have done something like this, position it on your CV to catch attention.

• Further Study

Further qualifications beyond your basic medical degree (and preceding your medical degree if you have done medicine as a postgraduate study) should always be included, in particular if this has relevance to your work as a doctor.

• Exams

If you have passed, post graduate medical exams make sure you include this on your CV, in particular if you have passed the RACP written and clinical examinations and are applying for advanced training.

• Courses/Conferences/career development

If you have gone out of your way to attend a local or international conference (i.e. American Thoracic Society meeting) as a BPT, please include this on your CV, it shows an interest in learning and progressing your career. Also, of interest are things such as Professional Development or Management courses. Don't forget to include these.

Research and Publications

Medical research and publication of research shows a strong interest in progressing medical knowledge and should definitely be included in your CV.

Referees

Clinical referees are very important; however, many people will have similar referee reports as these reports are often of a standardised format with tick boxes for unsatisfactory/at appropriate level/good/excellent and then an extra comments section. Try to think who you have worked well with, and who knows you and holds you in high regard, as they are more likely to provide extra insight in the extra comments section. The referee should ideally have worked with you in the last year.

• How long should your CV be?

There is no predefined CV length, however roughly a 2-page CV is usually adequate, (unless you have 23 publications to your name in which case this may take up 2 pages on its own!). Your CV should detail, in roughly this order:

- Personal contact details
- Brief summary of you as a medical practitioner (achievements/skills/strengths)
- Professional Experience
- Qualifications
- Post graduate examinations
- Courses/Conferences/Career Development
- Research and Publications
- Interests/Extra-curricular
- Referees

In essence, your CV should concisely and efficiently summarise your work as a doctor and include other relevant experience (without including irrelevant areas), which helps differentiate you from the crowd of other applicants.

Finally make sure you check your CV for errors before submitting it.

Your Wellbeing

Your wellbeing and your self-care are very important. The Physician training team together with the Medical Education and Wellbeing team are here to provide support as needed.

If you feel you need support you will have various options:

- Make an appointment with Soe Ko
- Catch up with Zoe by dropping into the office or by phone
- Contact the Medical Education and Wellbeing team 5320 6742 / 0346 470 053
- See the DiT Welfare Flow Chart

Other supports available are:

- Employee Assistance Program Benestar Visit <u>www.benestar.com</u> and go to the **BeneHub**
- VDHP Ph.(03) 9495 6011
- PANDA (for postnatal depression) Ph. 1300 726 306
- AMA Victoria Peer Support Service Ph. 1300 853 338
- Beyond Blue www.beyondblue.org.au
- This way up <u>www.thiswayup.org.au</u>

Find more information on support services available to health professionals on the RACP website at

RACP Support Program

Or call RACP Confidential Support Program on: 1300 687 327

Doctor in Training experiencing difficulty

Your Registrar

Most Registrars have experience and deal with stress and stressful situations. You may feel comfortable discussing issues with them.

Term Supervisor / Unit Consultant

You may discuss issues with your term supervisor or unit consultant, if you feel it appropriate. Particularly if it pertains to a workrelated issue that they may be able to address.

Unit Head

If you are not comfortable or able to discuss issues with your team for any reason, you can meet with the head of unit. These meetings can allow for discussion of time off, if needed, review of your training needs, or advice/assistance of any interpersonal issues that are affecting your wellbeing.

Clinical Director

Some issues may need to be escalated to the Clinical Director, specifically if they are work based or if leave is required. Clinical Directors will work towards measures required to support DIT safety, health and wellbeing.

Director of Clinical Training & Supervisor of Intern training

The DCT and SIT can assist with Clinical and Non-clinical issues across all areas and liaise with other stakeholders as appropriate.

Medical Workforce Unit

Ph: 53206858

Rostering issues and leave cover

Medical Services / Chief Medical Officer

Concerns can be raised to the CMO upon discretion of the DIT or if a significant safety issue is identified

Medical Education Coordinator/Medi cal Education Officer

Ph 0436 470 053

Both the MEC and the MEO are here to support any DiT through any difficulty and can offer confidential care and advice. Both are accredited Mental Health first aiders. As well as being a person to talk to they can be a support person in meetings or can represent on your behalf. The Medical Education team provide opportunities for feedback via faceto-face or online methods.

Mentor

If you signed up to the mentor program, don't forget your mentor can be an invaluable person to offer support. Other

Benestar1300 360 364(www.benesta r.com)

VDHP (03) 9280 8712

AMA peer support 1300 583 338

Personal GP

Psychologist

People and Culture

You or your supervisor can liaise with one of the people and culture consultants at any stage for issue resolution, changes to working capacity, return to work, and leave entitlement options.

If there are urgent concerns about a doctor in training's well-being, particularly after hours or on weekends when the above resource persons may not be available, please escalate concerns to the senior doctor on call for the relevant clinical area or to the Executive Director on call, for further advice and assistance. Version: 1.2020