Specialist Training Program (STP) Operational Framework

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The Government has extended the STP to cover the 2017 academic year on the same basis as 2016. The specialist medical colleges will be allocated the same number of training posts and the funding levels for the various components of the program will remain at 2016 levels.

Introduction

The delivery of well-supervised, high quality specialist training opportunities is a collaboration between the Commonwealth, States and Territories and training organisations including the Medical Specialist Colleges of Australia (the Colleges) and private and community health sectors. The Specialist Training Program (STP) seeks to extend vocational training for specialist registrars into settings outside traditional metropolitan teaching hospitals where trainees can obtain skills and benefits from learning experiences to meet the professional standards required of their discipline that are not generally available in conventional training arrangements.

History

The Commonwealth has been supporting the provision of specialist training arrangements in rural and outer metropolitan areas since 1997 with the establishment of the Advanced Specialist Training Posts in Rural Areas (ASTPRA) measure in the 1997-1998 budget. This early work was complemented and significantly expanded through a 2006 Council of Australian Government’s decision to fund training places in settings other than public teaching hospitals. This initiative became known as the Expanded Specialist Training Program (ESTP). At the same time funding was provided through the COAG National Action Plan on Mental Health (2006-2011) to fund psychiatry training, delivered through the Psychiatry Training Outside Teaching Hospitals (PTOTH) program. Further COAG investment was agreed to in 2008 through the Hospital and Health Workforce Reform - Health Workforce package.

Under the 2009-2010 Budget Health and Ageing Measure Workforce program these specialist training programs were brought together into a single program.

Previous programs consolidated into the current STP:

(a) the Expanded Specialist Training Program (ESTP);
(b) the Outer Metropolitan Specialist Trainee Program (OMSTP);
(c) Advanced Specialist Training Posts in Rural Areas (ASTPRA);
(d) the Pathology Memorandum of Understanding (Path MoU);
(e) the Overseas Trained Specialist Upskilling Program;
(f) Psychiatry Training Outside Teaching Hospitals (PTOTH); and
(g) Supporting best practice and workforce in pathology and diagnostic imaging.

The 2009-2010 Budget also included the “Improving the Quality of Services and Addressing Workforce Shortages – Supporting best practice and workforce in pathology and diagnostic imaging” initiative. This initiative continued funding for training specialists which was previously supplied under the Pathology Memorandum of Understanding and has been implemented under the STP.

On 15 March 2010 the Government announced the National Health and Hospitals Network initiative “Expand and Enhance the Specialist Training Program”. This provided resources to increase the number of specialist training places to be made available under the Program to
900 by 2014 ongoing, and allowed for resources to support the private sector via a clinical supervision and infrastructure allowance.

Aims and Objectives

The aims and objectives of the STP are to:

(a) increase the capacity of the health care sector to provide high quality, appropriate training opportunities to facilitate the required educational experiences for specialists in training;

(b) supplement the available specialist workforce in outer metropolitan, rural and remote locations; and

(c) develop specialist training arrangements beyond traditional inner metropolitan teaching settings:

(i) with rotations to accredited training posts in health care settings that include private hospitals; specialists’ rooms; clinics and day surgeries; Aboriginal Community Controlled Health Service (ACCHS); publicly funded health care facilities which can provide training opportunities not previously available, particularly in areas of workforce shortage (such as regional, rural and community health settings); and non-clinical settings (such as simulated learning environments);

(ii) with training in these settings fully integrated with and complementing training occurring at the major public teaching hospitals; and

(iii) that provide training for Australian specialist trainees, overseas trained doctors (OTDs) and specialist international medical graduates (SIMGs) in pursuit of Fellowship of the relevant College within the boundaries of Australia.

The aims and objectives of the Program must be achieved without an associated loss to the capacity of the public health care system to deliver services.

Outcomes

Expected outcomes for the STP include:

(a) specialist trainees rotating through an integrated range of settings beyond traditional inner metropolitan teaching hospitals, including a range of public settings (including regional, rural and ambulatory settings), the private sector (hospitals and rooms), community settings and non-clinical environments;

(b) increased number and better distribution of specialist services;

(c) increased capacity within the sector to train specialists;

(d) improved quality of specialist training with trainees gaining appropriate skills not otherwise available through traditional settings;

(e) developing system wide education and infrastructure support projects to enhance training opportunities for eligible trainees;

(f) improved access to appropriate training for overseas trained specialists seeking Fellowship with a College;
(g) increased flexibility within the specialist workforce;
(h) development of specialist training initiatives that complement those currently provided within the States and Territories; and
(i) establishing processes which enable effective and efficient administration of specialist training posts, with reduced complexity for both stakeholders and the department.

Outcomes will be monitored through progress reports on posts provided to the Department by the Participants.

**Governance**

The STP is designed to be a collaborative approach to specialist training, with the engagement and participation of all the major stakeholders, including the Colleges, State and Territory health departments, public health services, the private health sector and the specialist trainees (registrars), through their representative bodies.

**The Department of Health and Ageing:**

(a) Oversight of the STP, including delivery of the program by the medical specialist colleges, is the responsibility of the Department.

(b) The Department maintains policy authority and management responsibility for the STP Expression of Interest (EOI) to be conducted in 2016-17.

(c) In its role the Department will facilitate the development of appropriate training for specialists to address future training and workforce needs and to enable expansion to new settings including primary, community and mental health, aged care and the private sector.

(d) The Department will provide information to the public in relation to the Specialist Training Program.

(e) The Department will develop evaluation and review processes in order to enhance the efficiency and effectiveness of training for the specialist workforce.

**Medical Specialist Colleges:**

The medical specialist colleges are key partners in the delivery of high quality specialist training due to their role in setting professional standards, accrediting training settings and the coordination and support for education and training of future College Fellows. The Colleges also play a vital role in providing national oversight and consistency to medical specialist training. Under this program:

(a) all training opportunities offered need to meet the standards set by the relevant College and be considered by the College to deliver educational value. This will be achieved through only funding accredited training posts and through seeking advice from the Colleges on all posts to be delivered under the program; and

(b) Colleges directly engaged under this Program will be required to establish training arrangements for trainees which better link training to opportunities not available in major public hospitals.

The Commonwealth currently funds 12 Specialist Medical Colleges for the management of specialist training posts including:
- Australasian College for Emergency Medicine (ACEM);
- Australasian College of Dermatologists (ACD);
- Australasian College of Sport and Exercise Physicians (ACSEP);
- Australian and New Zealand College of Anaesthetists (ANZCA);
- Royal Australasian College of Medical Administrators (RACMA);
- Royal Australasian College of Physicians (RACP);
- Royal Australasian College of Surgeons (RACS);
- Royal Australian and New Zealand College of Obstetricians and Gynaecologists (RANZCOG);
- Royal Australian and New Zealand College of Ophthalmologists (RANZCO);
- Royal Australian and New Zealand College of Psychiatrists (RANZCP);
- Royal Australian and New Zealand College of Radiologists (RANZCR); and
- Royal College of Pathologists of Australasia (RCPA).

In addition to funding training posts in a broad range of settings, the Program provides funds, via the specialist medical colleges for a range of support activities, including:

(a) developing system wide education and infrastructure support projects e.g Video conferencing and delivery of a Specialty Specific Video Lecture Series to enhance training opportunities for eligible trainees, with a particular focus on supporting training posts and positions in regional and rural areas and those in private settings;

(b) developing support projects aimed at SIMGs to assist these doctors gain Fellowship in a timely and efficient manner e.g SIMG Orientation Resource Kits or provision of a Fellowship Attainment Coordinator; and

(c) developing networks for training i.e formal agreements between training settings for registrars to rotate for defined periods in which all trainee entitlements will be maintained.

Training Settings and Employers:

State and Territory Governments and public health services are also key partners in the delivery of specialist training arrangements. They are the providers of the majority of funded training places and specialist trainees are usually employees of the state health system. Under this program jurisdictional Health Departments (or the equivalent level of management in their health sector) will be asked to provide advice on the merits of individual EOIs seeking to provide a training post, from the perspective of the availability of registrars to fill the posts identified and areas of workforce need.

Private health care organisations/private health care settings are critical to achieving an expansion of training opportunities across Australia. To achieve this objective the private sector needs to be engaged in the establishment of posts in collaboration with the public sector to facilitate the transfer of registrars for the purposes of training. Where the registrar undertaking training remains in the employ of a public teaching hospital, these funds must flow to the employer to enable that hospital to ‘backfill’ the position, thereby ensuring there is no reduction in the capacity of the public teaching hospital to deliver services. Such arrangements will also facilitate maintenance of the trainee’s entitlements, such as medical indemnity, workers compensation, superannuation, long service leave, etc.
Program activities

Through the STP the Commonwealth seeks to establish and support a variety of training posts which form part of an integrated program of learning for specialist trainees pursuing a fellowship program. Available training posts can be full-time or part-time with multiple trainees rotating through a single training post. Alternatively, training posts can be designed to support individual trainees through their full fellowship program, particularly in rural and regional areas. The exact nature of the training post will be determined by its value to overall training in pursuit of becoming a specialist.

Specialist training posts established under the program will be supported across the 2012-17 academic years if they continue to meet the eligibility criteria and the aims and objectives of the STP. An EOI process to identify suitable specialist training posts to add to the overall network will be publicised through the Department’s website. The EOI will be conducted by the Department in 2016-17.

Reserve Lists

Training settings that lodge an EOI and are assessed by the colleges and jurisdictions to be potential suitable STP posts will be placed on the Reserve List to be managed by the relevant specialist medical college. Posts on the Reserve List may be funded in the event that a successful post does not go ahead. The colleges will be responsible for managing the Reserve List in consultation with the Department.

Unsuccessful EOIs

There is no appeals process. Decisions are final. Organisations which have not been added to the Reserve List through the EOI process, may seek feedback from the Colleges. Noting that decisions will have been made on a complex range of considerations. These considerations include the support of a post by both the jurisdiction and the relevant College.

Eligibility

The following organisations are eligible to submit an EOI in accordance with the aims and objectives of the STP, and their relevant roles and responsibilities:

(a) Medical education providers, including but not limited to Specialist Medical Colleges recognized by the Australian Medical Council;

(b) State and Territory Health Departments, local hospital networks and regional hospitals;

(c) Private health care organisations/private health care settings;

(d) Aboriginal Community Controlled Health Services; and

(e) Community Health Organisations

What is not eligible for funding under the STP?

(a) Post-fellowship training.

(b) General Practice training.

(c) Direct costs associated with accreditation of training posts.
(d) Training posts funded under the STP may not be occupied by overseas trainees employed by hospitals in other countries seeking a rotation through expanded settings within Australia.

(e) Training posts which are not considered to be new posts. A position will not be considered new if it has been funded by another organisation for more than 12 months within the last three years. Additionally, a position that was funded by another organisation within the last 12 months will need to conclusively demonstrate that its funding is not ongoing. This allows for short term funding from organisations such as charitable trusts. In this context, positions funded by the applicant organisation or a state and territory government will not be considered new and will be ineligible for STP support.

Individual trainees are not eligible to apply for funding. Trainees should liaise with their relevant college and/or specific health care facility if they wish to participate in the STP.

**Funding**

Funds are available under the STP for:

(a) training posts in eligible settings, with funding to include a salary contribution for trainees (including SIMGs) rotating through these posts. This contribution flowing to the employer of the trainee(s) occupying the post at a rate of $100,000 per annum (GST exclusive) pro rata, per full time equivalent (FTE); and

(b) rural loadings, up to $20,000 per annum (GST exclusive) pro rata per FTE, to support eligible posts in Australian Standard Geographical Classification – **Remoteness Areas (ASGC-RA)** 2-5;

(c) development of system wide education and infrastructure support projects, managed by participating specialist medical colleges, to enhance training networks, with a particular focus on rural and regional training arrangements.

(d) developing support projects aimed at SIMGs to assist these doctors to gain Fellowship in a timely and efficient manner; and

(e) activities associated with provision of clinical supervision and training infrastructure in the private sector:
   
   (i) clinical supervision at $30,000 (GST exclusive) pro rata per FTE per annum
   
   (ii) private infrastructure at $10,000 (GST exclusive) pro rata per FTE, once only in a 3 year period

(f) One off funding for training posts in the event that surplus funds are available at individual participating specialist medical colleges. Posts which are funded as a result of this will not be precluded from ongoing funding under the STP at a future date.

**Specialist medical colleges** activities include:

(a) Management of a set of training posts including selecting from reserve lists as appropriate;
(i) ensuring the rotation of trainees through these posts is not detrimental to the
capacity of the public health care system to deliver services;

(ii) establishing contract and financial management processes in order to:
  • reduce the complexity of the contract management system;
  • ensure funding for trainee salaries is directed appropriately, i.e. that
    the employer of the trainee is recompensed for the time that the
    trainee spends in the expanded setting; and
  • ensure trainee entitlements are maintained, such as medical
    indemnity, superannuation, workers compensation etc.

(b) Developing networks for training which:

(i) Integrate the training posts into the relevant College’s training network;

(ii) Integrate the training occurring beyond the traditional teaching hospital with
     training provided by the local state or territory health service providers;

(iii) Evaluate the health service delivery requirements of regions around
     Australia to identify other suitable training posts to add to the overall
     network; and

(iv) Develop systems which ensure that:
     • providers of training posts included in the network are equipped with
       information necessary for the sustainability of the posts;
     • a method for thorough and ongoing evaluation of all posts within the
       network is implemented; and
     • cross College training occurs with the agreement of both relevant
       Colleges.

(v) Create new generalist training pathways for medical graduates.
(c) Developing support projects to enhance training networks by:

(i) developing and delivering strategic support programs to ensure success and sustainability of the expanded training posts for trainees;

(ii) developing support projects aimed at SIMGs to assist these doctors gain Fellowship in a timely and efficient manner; and

(iii) Ensuring governance arrangements which provide strategic oversight and responsibility for support project activities are implemented.

(iv) Support projects may not include:

- direct payments to supervisors or trainees within a training network; or
- expenses associated with the direct accreditation of specific training sites.

(d) Developing networks within large private hospitals. This work may require inter-college arrangements and foster inter-disciplinary approaches to specialist training to:

(i) facilitate and coordinate specialist training in expanded settings that have multiple registrar positions under the Program;

(ii) oversee trainees and their rotations in approved training positions and ensure that trainees receive the appropriate education and support required to successfully undertake training in the private sector;

(iii) develop a centralised process for the management of specialist training positions in larger private settings to assist settings in maximising their effect;

(iv) develop means to ensure the training in each private setting/s integrates into the public training programs; and

(v) ensure funding does not cover or replace existing arrangements for specialist trainee coordination positions, such as currently exist within the public sector.

Private Infrastructure and Clinical Supervision (PICS):

The private infrastructure and clinical supervision (PICS) allowance was introduced to the STP as part of the 15 March 2010 National Health and Hospitals Network initiative Expand and Enhance the Specialist Training Program. This provides funding support for activities associated with clinical supervision and training infrastructure from the beginning of the 2011 academic year for all private sector training posts funded under the program.

The PICS allowance recognises the cost of delivering training in the private sector with funding designed to contribute to meeting these costs. Funds are provided to the training settings to assist in the provision of a high quality training environment for both trainees and supervisors.

The Royal Australasian College of Administrators (RACMA) currently administers this funding. Eligibility for the PICS allowance will be determined at the time of the original STP application or EOI based on the eligibility requirements. All eligible applicants will be advised of their eligibility.
Please note: The definition of "Private" relates to the facility and its ownership. A private setting is not a publicly owned facility treating private patients.

Additional Information

Access to the Medicare Benefits Schedule

Under the Medicare Benefits Schedule (MBS), eligible persons who elect to be treated privately may be entitled to receive a Medicare rebate for clinically relevant services performed by the practitioner. Bulk billing arrangements may also apply to these services. Practitioners should refer to the MBS for the full explanation of Medicare arrangements including eligibility requirements, entitlements, and the list of eligible services including rebate levels.

Medicare Australia provider enquiry line - 132 150.

Proposals for Support Funding

Proposals for specialist college support funding will be evaluated by the Department, taking into consideration each proposal’s capacity to meet the overall aims, objectives and outcomes of the STP and the availability of program funds. Proposals will be assessed on the range of potential projects to be undertaken, the rationale for potential projects to contribute to training in the expanded settings and the governance arrangements within the organisation to determine the allocation of support funds to particular projects. Approval of proposals will be subject to available funds.

Proposals which seek funding for support projects aimed at SIMGs must assist these doctors to gain Fellowship in a timely and efficient manner and will be required to indicate the number of SIMGs who require such assistance throughout a calendar year, their location, type of support required and likely success rates for achieving Fellowship within an academic year.

Medical Indemnity

(a) The Commonwealth does not prescribe the manner in which a specialist trainee should be covered for medical indemnity insurance while undertaking training in an expanded setting however, it does require that the trainee is covered. Expanded settings and specialist trainees participating in the STP will need to satisfy themselves that the specialist trainee is covered in relation to medical indemnity insurance when undertaking training in the expanded setting.

(b) In some circumstances the state or territory within which the training is occurring may extend public hospital medical indemnity insurance to the specialist trainee while in the expanded setting. Under other circumstances the expanded setting may need to take out separate medical indemnity insurance to cover trainees. The trainee themselves may need to, or choose to, take out their own medical indemnity insurance to cover themselves while training in the expanded setting.

(c) It is recommended that settings and specialist trainees make enquiries with their relevant state or territory health department to ascertain the necessary arrangements relating to their individual circumstances.
Long term leave arrangements for trainees

(a) Employers of trainees who are participating in the STP must ensure that access to leave entitlements such as maternity leave and personal leave are maintained for the duration of the placement.

(b) Management of unfilled posts due to extended leave (including maternity leave) should take into consideration the length of time that the post will be unfilled and the training requirements of the trainee who will be accessing the leave. In some cases, it may be appropriate for the training post to be unfilled for a short period and then resume as a shared or part-time role.

(c) As a guide, training posts that will be unfilled for greater than 6 months should have another registrar recruited to fill the vacancy.

(d) STP salary funds are not intended to fund the period of personal leave. The salary contribution must flow to the employer of the trainee, as either a backfill arrangement or for the direct salary costs of the trainee if they are employed by the facility where they are undertaking their expanded training.

Contact Details

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Postgraduate training Section
Health Training Branch
Health Workforce Division

Department of Health
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Canberra ACT 2601

specialist.training@health.gov.au

Website for the Department of Health Specialist Training Program:

Priority Framework

The Specialist Training Program (STP) is designed to provide opportunities for medical specialist trainees to rotate through an expanded range of settings beyond traditional public teaching hospitals, in pursuit of becoming a fellow of a recognised specialist medical college. The aims and objectives of this program are to:

- increase the number of registrars through the system participating in vocational training; and
- support quality training posts that provide an educational experience that reflects current health care delivery and builds the overall training capacity in the system, by extending specialist training into new healthcare settings.

Eligibility

Training posts which support either Australian specialist trainees or can support the upskilling of Specialist International Medical Graduates (SIMGs) are eligible to submit an EOI for funding under the STP. For posts to be eligible for STP they must:

- be accredited, undergoing or planning to undertake accreditation by the relevant specialist medical college;
- have a recruitment strategy to ensure a trainee is available to commence training in the 2017 academic year; and
- be a new position representing a genuine expansion of training (not previously filled).

Priority Settings

The priority settings for the 2017 STP Expression of Interest are consistent with the 2014 STP application round and are outlined below.

- **The Private health sector**: For the purposes of STP, training sites which can be defined as eligible private sector settings are those which do not derive their operational funding directly from a state or territory government.
- **Regional, rural and remote areas**: settings located in Australian Standard Geographical Classification (ASGC) – Remoteness Areas (RA) 2-5.
- **Non-hospital settings including Aged Care, Community Health and Aboriginal Medical Services**: training posts which involve assisting population groups with acute health needs to receive appropriate services and effectively manage chronic disease to maintain good health. These may include, but are not limited to residential and community settings, as well as outreach arrangements.

Only posts which represent 1 FTE or a minimum of 0.5 FTE in the above settings will be prioritised for funding. Posts with 0.5FTE (if not part-time) must also be comprised of another 0.5FTE of demonstrated, comprehensive networked training arrangements. A comprehensive networked arrangement is a formal agreement between training settings for registrars to rotate for defined periods in which all trainee entitlements will be maintained.

As the EOI to be undertaken in 2016-17 is aimed at providing the colleges with new ‘Reserve List’ posts that will be used to fill vacancies that occur in 2017 it is not necessary to identify specialties that will be given priority. Generally a vacancy occurring in a specialty will be replaced by a post in the same specialty. Previous STP specialty priorities have been reflected in the allocation of posts to each of the colleges. Posts which can demonstrate attributes of quality training, a distinct educational imperative and integration with the public specialist training network will be highly regarded.