

Performance Review Policy

Note

1. This policy commences on 1 January 2019 and will apply to all GPEx registrars training under the Australian General Practice Training (AGPT) program.

Purpose

2. To ensure registrars satisfactorily meet the training requirements within the time limits associated with the AGPT training program and the relevant college fellowship requirements.

Scope of this policy

3. This policy applies to GPEx registrars.

Responsibility for implementation, compliance monitoring, measuring and continual improvement

4. Director of Medical Education and Training (DMET)
5. Chief Executive Officer (CEO)
6. Director of Education Operations (DEO)

Policy statement

7. This policy outlines the GPEx process of monitoring registrar performance and managing those registrars who do not meet the requirements of GPEx and the AGPT program.

Monitoring

8. Registrar's performance is continuously monitored throughout the year by a range of methods including but not limited to:
 - a. Program Training Advisors Contacts
 - b. Assessments
 - c. Supervisor reports and practice feedback
 - d. Professionalism displayed throughout the program (including, but not limited to, punctuality, appropriate working relationships with colleagues, practice staff, GPEx staff and patients, as well as no evidence of plagiarism).
 - e. Monitoring of deadlines to ensure completion of the training program within the available timeframes.
9. GP Registrars may experience challenges whilst on the training program and require additional support and resources to enable them to complete the program successfully.

10. GPEx will consider available support options that may be appropriate to the circumstances, including but not limited to medical or psychological support, extensions, practice interventions and various types of leave in accordance with *GPEx Registrar Leave Policy*, *GPEx Remediation Policy*, *GPEx Wellbeing and At Risk Policy*, *AGPT Program Leave Policy 2019*, *AGPT Transfer Policy 2019*, and *Remediation Policy* of the relevant GP College.

Non-compliance

11. Where there is non-compliance with any components of the GPEx training program, a registrar may be required to complete additional learning activities.
12. Persistent non-compliance will result in assessment by a senior medical educator. In such circumstances, an extension may be granted and/or a Focussed Learning Intervention Plan (FLIP) developed.
13. These interventions may require a period of Extension for Assessment Purposes (as per the *AGPT Extension of Training Time Policy 2019*). This ceases training time until the necessary requirements are met.
14. Registrars in periods of Extension for Assessment Purposes may not progress to the next level of training, and may be deemed ineligible to sit for examinations/assessments required of each GP college.
15. Failure to complete the extension requirements or a FLIP may lead to further FLIPs, formal remediation or withdrawal from the training program.

Performance Review Committee (PRC)

16. The training record of all registrars is formally reviewed four times per year, and registrars are discussed by the PRC as required.
17. The PRC membership consists of:
 - a. Deputy Director of Medical Education and Training (DDMET - Chair)
 - b. Director of Medical Education and Training (DMET)
 - c. Chief Executive Officer
 - d. Director of Education Operations
 - e. Medical Educators (MEs)
 - f. Managers - AGPT
 - g. Program Training Advisors (PTAs)
18. Meetings have an agenda and are minuted.
19. Registrars will be notified (as required) by their PTA of the PRC recommendations with respect to them individually after each meeting. These may include:
 - a. A performance review meeting with PTA/ ME;
 - b. A performance review meeting with a senior ME or DDMET;
 - c. A performance review meeting with the DMET.

Performance Management Panel (PMP)

20. In the case of serious and/or repeated or continuing underperformance, the DMET may refer the registrar to the PMP for review.
21. The PMP will comprise:
 - a. Chief Executive Officer (Chair)
 - b. Director of Medical Education and Training
 - c. Deputy Director of Medical Education and Training
 - d. Director of Education Operations or delegate as required
 - e. The registrar's Medical Educator
22. The PMP will review the performance interventions to date and may consider formal remediation or withdrawal as additional options. One or more members of the PMP will meet with the registrar to discuss the issues in question.
23. Recommendations for formal remediation or withdrawal will be notified to the relevant College.
24. The CEO will notify the registrar of the PMP outcome.

Supporting procedures

25. The DMET, 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 Wellbeing and At Risk Policy*, *AGPT Program Leave Policy 2019*, *AGPT Transfer Policy 2019*, and *Remediation Policy* of the relevant GP College.

Related documents

26. This policy should be read in conjunction with the following GPEX and AGPT policies:
 - a. GPEX Grievance Policy
 - b. GPEX Registrar Leave Policy
 - c. GPEX Remediation Policy
 - d. GPEX Wellbeing and At Risk Policy
 - e. GPEX Withdrawal Policy
 - f. GPEX Appeals
 - g. AGPT Program Leave Policy 2019
 - h. AGPT Transfer Policy 2019
 - i. AGPT Extension of Training Time Policy 2019
 - j. Remediation Policy (ACRRM or RACGP as applicable)