

GPEX Performance Review and Remediation Policy

Note

This policy will apply to all registrars training with GPEX under the Australian General Practice Training (AGPT) program from 3 February 2020. This policy supersedes the previous GPEX Performance Review Policy and the previous GPEX Remediation Policy.

Purpose

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

To outline the management of registrars who have performance difficulties.

Scope of this policy

This policy applies to all registrars enrolled in the AGPT program with GPEX.

Responsibility for implementation, compliance monitoring, measuring and continual improvement

1. Director of Medical Education and Training (DMET)
2. Chief Executive Officer (CEO)
3. Director of Education Operations (DEO)

Policy statement

This policy outlines the GPEX process of monitoring registrar performance and managing those registrars with difficulty meeting the training requirements of GPEX and the AGPT program, so that, where possible, they may successfully obtain fellowship.

- a. Performance management and remediation strategies are implemented to assist registrars to succeed in training. Such strategies are not designed to penalise registrars and should not be viewed in this light.

Performance management and remediation will be dealt with in a confidential manner. Issues resulting in performance management and remediation will be discussed between the relevant parties only (the registrar, the training facility, the supervisor, GPEX) and will not be falsely shared unnecessarily.

- b. In cases whereby management and/or remediation is unsuccessful in bringing about resolution, GPEX reserves the right to escalate the issue to external third parties where it is contractually required to do so (relevant Colleges, Department of Health, AHPRA).

Formal remediation will require approval from the ACRRM and the RACGP in accordance with the college/s Registrar Remediation policies.

Monitoring

Registrar performance is continuously monitored by a range of methods including but not limited to:

- c. Program Training Advisors Contacts
- d. Assessments
- e. Practice, supervisor and medical educator feedback
- f. Monitoring compliance with educational and training activities.

GP Registrars may experience challenges whilst in the training program and may require additional support and resources to enable them to complete the program successfully.

GPEX will consider available support options that may be appropriate to the circumstances, including but not limited to:

- g. Medical or psychological support
- h. Extensions
- i. Practice interventions
- j. Focussed Learning Intervention Plan (FLIP) and
- k. Various types of leave in accordance with the related documents listed in paragraph 38 below.

Whereby a registrar is required to attend a face to face meeting at GPEX to discuss performance, remediation and support options, GPEX encourages the involvement of a support person, such as a family member or GPRA representative, to ensure the registrar feels comfortable and supported.

Non-compliance

Where there is non-compliance with any components of the GPEX training program, a registrar may be required to complete additional learning activities.

Persistent non-compliance will result in assessment by a senior medical educator. In such circumstances, an extension may be granted and/or a FLIP developed.

A FLIP will be developed in consultation with the supervisor, medical educator, registrar and other relevant parties.

These interventions may require a period of Extension for Assessment Purposes (as per the *AGPT Program Extension of Training Time Policy 2020*). This ceases training time until the necessary requirements are met.

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.

Failure to complete the extension requirements of a FLIP may lead to further FLIPs, formal remediation or withdrawal from the training program.

Performance Review Committee (PRC)

The training record of all registrars is formally reviewed four times per year at meetings of the PRC.

The PRC membership consists of:

- l. Deputy Director of Medical Education and Training (DDMET - Chair)
- m. Director of Medical Education and Training (DMET)
- n. Chief Executive Officer
- o. Director of Education Operations
- p. Medical Educators (MEs)
- q. Manager - AGPT
- r. Program Training Advisors (PTAs)

Meetings have an agenda and are minuted.

Registrars will be notified (as required) by their PTA of the PRC recommendations with respect to them individually after each meeting. These may include:

- s. A performance review meeting with their ME;
- t. A performance review meeting with a senior ME or DDMET;
- u. A performance review meeting with the DMET.

Performance Management Panel (PMP)

In the case of serious, repeated and/or ongoing performance issues, the DMET may refer the registrar to the PMP for review.

The PMP will comprise:

- v. Chief Executive Officer (Chair)
- w. Director of Medical Education and Training
- x. Deputy Director of Medical Education and Training
- y. Director of Education Operations or delegate as required
- z. The registrar's Medical Educator

The PMP will review the performance interventions to date and may consider a further FLIP, 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.

Recommendations for formal remediation or withdrawal will be notified to the relevant College.

The CEO will notify the registrar of the PMP outcome.

Remediation Plans

Where the PMP determines that a remediation plan (RP) be implemented, the RP will be developed between GPEX, the supervisor and the registrar.

GPEX must submit an application to the relevant college for remediation support. If the application for remediation is accepted, GPEX will notify the Department of Health of the suspension to training time.

The RP will define the required activities, outcomes, progress review schedule and timeframes.

Once an RP has been entered into, the registrar will cease to accrue training time until such time as the registrar has satisfactorily completed the agreed obligations of the RP.

The RP will be included in the registrar's training record and a copy provided to the registrar and the PMP.

Assessment Process

Following the completion of the RP, the PMP may require the registrar to complete a formal assessment, which may include:

- aa. Online knowledge assessment and subsequent feedback;
- bb. Multi-station assessment and feedback;
- cc. Standardised patient role-plays;
- dd. Written stations;
- ee. Oral stations.

At the completion of the remediation, GPEX will inform the registrar of the outcome, which may include:

- ff. The identified performance issue has been adequately remediated and the registrar will resume training; or
- gg. The identified performance issue has not been adequately remediated and the registrar may require further remediation, discretionary leave or withdrawal from training.

Withdrawal

Registrars who fail or refuse to complete an RP may be subject to withdrawal from the GPEX training program under the terms of the *AGPT* and *GPEX Withdrawal Policies*.

Related documents

4. This policy should be read in conjunction with the following GPEX and AGPT policies:
 - a. GPEX Registrar Grievance Policy
 - b. GPEX Registrar Leave Policy
 - c. GPEX Wellbeing and At Risk Policy
 - d. GPEX Withdrawal Policy
 - e. GPEX Appeals
 - f. AGPT Program Leave Policy 2020
 - g. AGPT Program Transfer Policy 2020
 - h. AGPT Program Extension of Training Time Policy 2020
 - i. AGPT Program Withdrawal Policy 2020
 - j. Remediation Policy (ACRRM or RACGP as applicable)
 - k. GPEX Registrar Declaration
 - l. Declaration of Suitability for Training