

Queensland Palliative Medicine Training Program Effective: March 2025 Review: March 2026



Published by the State of Queensland (Metro North Hospital and Health Service), October 2023
rublished by the State of Queensland (wetto North Hospital and Health Service), October 2023
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1. The Queensland Palliative Medicine Training Program

The Queensland Palliative Medicine Training Program is a centrally coordinated statewide program for eligible medical officers wishing to complete palliative medicine advanced training through the Royal Australasian College of Physicians (RACP) in Queensland.

The program facilitates appointment to a medical registrar position in advanced training through a centralised selection and allocation process to complete either a Clinical Foundation in Palliative Medicine or Advanced Training in Palliative Medicine. Trainees are appointed to accredited services for 6 or 12 months, can spend a maximum of 18 months in one service and will remain on the program for the three years of their palliative medicine training subject to satisfactory clinical performance.

This document outlines the statewide approach to delivering palliative medicine advanced training in Queensland, specifically the operation of the training program.

2. Aims and benefits

The training program aims to provide equity, transparency and efficiency for both trainees and training services in the delivery of advanced training in palliative medicine in Queensland. The benefits of a centralised training program include:

Training experience

- a diverse training experience in more than one clinical setting
- a streamlined process between service placements as a result of cooperation and collaboration between participating services
- greater support processes for trainees in difficulty
- the ability to represent and advocate for Queensland palliative medicine advanced trainees at a state and national level.

Education

The training program provides equitable access to education and networking opportunities for trainees across the state by:

- delivering fortnightly statewide education sessions for all Queensland palliative medicine advanced trainees (further information on the Queensland Palliative Medicine Education Program is at **Appendix 1**).
- Providing opportunities for trainees to meet and interact in addition to fortnightly education session, the Program
 organises face to face networking and education events, including an annual statewide trainee day for both
 Advanced Trainees and Clinical Foundation Trainees.
- Developing targeted additional education opportunities for palliative medicine advanced trainees for example, in 2023, three places on the QUT leadership program (Leading Self and Others) were offered to a limited number of third year advanced trainees through EOI.

Trainee experience

The training program enhances the trainee experience by providing:

- a centralised single-entry point which is transparent, fair and consistent
- employment surety for the three years of training (dependent on ongoing satisfactory professional and clinical performance)
- continuity of training for trainees to satisfy the core components of the RACP Palliative Medicine advanced training program
- flexibility to complete dual training.

Royal Australasian College of Physicians (RACP)

The training program aligns with the policies and standards prescribed by the RACP in relation to the Curriculum, Accreditation, Selection into Training and Network Training Standards.

3. Overview of training

The RACP Palliative Medicine advanced training program consists of three years of full-time equivalent (FTE) training – two years of core rotations and one year of non-core rotations—in a mix of clinical settings.

The Clinical Foundation in Palliative Medicine requires 6 months of full-time equivalent (FTE) training undertaken at an accredited setting.

Full information is available on the RACP Palliative Medicine advanced training program webpage.

Training supervision and support is provided by the trainee's designated supervisors in conjunction with the Medical Director, Queensland Palliative Medicine Training Program, and Consultant supervisors.

4. Governance

4.1 Administration

Metro North HHS administers the Queensland Palliative Medicine Training Program under the direction and leadership of the Medical Director, Palliative Medicine Training Program and with governance and oversight through the Directors Palliative Care Group and an Education committee comprised of Palliative Medicine Specialists from across Queensland with a specific interest in education.

4.2 Oversight

The Palliative Medicine Training Oversight Committee (PMTOC) oversees several aspects of the program including:

- Providing oversight in selection of advanced trainees and endorsing statewide assessment and selection tools, timelines, and processes;
- Monitoring consistence and quality of educational and training standards across palliative medicine advanced training sites;
- Providing support to the training program when required for out of session interviews, support with trainees in difficulty etc.

An update on the Queensland Palliative Medicine Training Program is provided by the Medical Director every two months to the broader Queensland Palliative Medicine Directors Group.

The PMTOC is chaired by the Medical Director, Queensland Palliative Medicine Training Program, and membership includes Directors of Palliative Medicine and palliative medicine specialists from several training sites across Queensland.

4.3 Compliance

The operation of the training program is delivered in accordance with current Commonwealth, State and Departmental legislation, policies and directives. All stakeholders of the training program are responsible for exercising due diligence to ensure compliance is met.

5. Participating hospitals

The following Queensland hospitals participate in the Queensland Palliative Medicine training program:

- Caboolture Public Hospital
- Cairns Base Hospital
- Gold Coast Palliative Care Service
- Ipswich Hospital
- Mackay Base Hospital
- Mater Health Service Brisbane
- Metro South Palliative Care Service (multiple facilities)
- Metro North Community Palliative Care Service
- · Redcliffe Hospital
- Rockhampton Base Hospital
- Royal Brisbane and Women's Hospital
- St. Vincent's Hospital Brisbane
- Sunshine Coast Palliative Care Service
- The Prince Charles Hospital
- Toowoomba Hospital
- Townsville University Hospital
- The Wesley Private Hospital

6. Selection to the Program

Selection of trainees is informed by data gathered from the online Resident Medical Officer (RMO) Campaign application process, curricula vitae, referee reports and applicant interviews.

Selection processes are documented, transparent and objective, with applicants having access to eligibility criteria, information on the selection process, selection criteria and an appropriate appeals or feedback process. The final selection is based on merit.

Selection occurs in August/September each year prior to completion of the RMO campaign recruitment process. Following selection, the Program maintains a ranked waitlist of any surplus applicants deemed suitable but not selected. Suitable but unselected applicants are offered positions in ranked order when positions become available.

6.1 Eligibility

Medical officers who meet the following criteria are eligible for a position on the Queensland Palliative Medicine Training Program:

RACP Basic Trainees

Adult Medicine and Paediatrics & Child Health streams

Basic Trainees applying must have:

- completed RACP Basic Training, including successful completion of Written and Clinical Examinations
- a current medical registration

Already a Fellow

Adult Medicine stream only

You can apply to enter Advanced Training in Palliative Medicine if you:

- hold a Fellowship from an eligible medical college
- · have a current medical registration

Fellows from all RACP's Divisions (AMD and PCHD), Faculties (AFOEM, AFPHM and AFRM) and Chapters (AChAM and AChSHM) are eligible to apply. Other medical colleges eligible are:

Australasian College for Emergency Medicine

- Australian and New Zealand College of Anaesthetics
- Faculty of Pain Medicine, Australian and New Zealand College of Anaesthetics
- College of Intensive Care Medicine
- Australian College of Rural and Remote Medicine
- Royal Australasian College of Surgeons
- Royal Australian and New Zealand College of Obstetricians and Gynaecologists
- Royal Australian and New Zealand College of Psychiatrists
- Royal Australian and New Zealand College of Radiologists
- Royal Australian College of General Practitioners
- Royal New Zealand College of General Practitioners

New and current trainees need to apply for Advanced Training each year.

6.2 Selection criteria

Assessment for entry into the Palliative Medicine Training Program is undertaken according to a set of statewide selection criteria. The selection criteria are designed to encompass the minimum expected attributes of a first-year advanced training palliative medicine registrar.

Applicants are assessed on their ability to demonstrate evidence of the following:

- Provide ongoing clinical care of patients referred to the Palliative Care Service including appropriate patient
 assessment and management under the direction of the Palliative Medicine Specialist and in the context of a
 multidisciplinary team.
- may include provision of inpatient care, consultation/liaison support, outpatient clinics and or community care
 depending on the setting of care and training term. These duties may be defined for each service but in general
 will include:
 - assessment and developing management plans to address the clinical and psychosocial problems of patients and families/carers
 - o developing high-level skills in communication to support patient and family meetings to discuss goals of care, future plans for care and prognosis within a multidisciplinary approach to care
 - o attendance at interdepartmental Multidisciplinary team meetings
 - o maintaining the patient clinical record
 - ensuring appropriate and timely communication to other health care providers in external settings and the community including GP and at the time of death.
- Support Quality Improvement activities within the Palliative Care Service such as Palliative Care Outcomes Collaborative data and as directed.
- Support research activities of the Palliative Care Service as directed.
- Participate in the provision of an on-call roster supporting the Palliative Care Service as determined by the Director of the Palliative Care service.
- Contribute to other activities as defined by the Director of the service
- Provide supervision, feedback, teaching and support to junior clinical staff and medical students. This includes serving as a professional role model for junior medical staff and students by demonstration of appropriate behaviour and attitude.
- Fulfil the responsibilities of this role in accordance with Queensland Health's core values, as outlined above.
- Demonstrate a commitment to continuous education through the Qld Palliative Medicine Training Program
 integrated education support, attendance at national Palliative Medicine trainee days, completion of RACP
 modules of education for Palliative Medicine, enrolment in the RACP Communication Skills training, enrolment
 in the RACP Spirituality workshop and engagement with all other recognised educational opportunities.

6.3 Application process

Applications for Queensland Palliative Medicine advanced training positions are submitted online annually through the Queensland Health RMO Campaign (Resident Medical Officer (RMO) and Registrar campaign | Queensland Health). The Program's application process opens and closes in line with the RMO Campaign. Late applications are not considered.

The RMO campaign application includes specific questions to identify palliative medicine applicants.

A detailed guide outlining the Program application process including how to preference is published on the <u>program</u> webpage on the Queensland Health website.

6.4 Suitability assessment

Four components are used to assess an applicant's suitability for a position on the training program:

- 1. Curriculum vitae (CV)
- 2. Short statement
- 3. Referee reports
- 4. Interview (not required for Clinical Foundation applicants)

6.4.1 CV

Applicants are requested to upload a current CV as part of the RMO Campaign online application.

6.4.2 Short statement

Applicants must provide a short statement indicating how their experience, abilities, knowledge and personal qualities are relevant for a palliative medicine training program position (Clinical Foundation applicants also provide a short statement addressing the same criteria).

The CV and short statement are assessed by the *Queensland Palliative Medicine Training Program* and are scored for the purposes of suitability and ranking.

Any score discrepancies are referred to the Medical Director, Palliative Medicine Training Program.

6.4.3 Referee reports

Applicants nominate two referees. The nominated referees must include (direct wording from RMO Campaign is provided below):

- current immediate/supervisor and current consultant, staff specialist, clinical director, director of medical services etc.
- able to comment on your ability, capacity / motivation and rapport / cooperation.
- · able to comment on your general character and performance
- Specialty training programs may require additional or specific referee reports, please refer to your Specialty training program webpage for further information

Applicants for the Clinical Foundation of Palliative Medicine will be ranked for suitability for positions using their CV, short statement and referee reports.

6.4.4 Interview

Applicants who have been deemed suitable after review of the CV , short statement and references are invited to attend an interview in person.

The interview panel will comprise of a panel consisting of Medical Director, Queensland Palliative Medicine Training Program and representative Directors of Palliative Care for a number of QH services and non-QH services in Queensland. The administrative procedures are managed by the Qld Palliative Medicine Training Program Manager in conjunction with Qld RACP staff and facility.

6.5 Ranking and allocation

Scores for each candidate interviewed will be ranked to determine those to be allocated to training positions for the following year. Positions are allocated based on merit ranking, trainee preference and RACP training requirements. An allocation meeting (per geographic region) is held for this purpose in line with RMO Campaign timeframes. Trainees are placed through mutual agreement. It is expected that the directors of palliative care or their representatives attend the allocation meeting.

6.6 Flexible working arrangements

The training program supports flexible working arrangements for trainees where possible. All requests for flexible working arrangements, either lodged at the time of application or after selection, will be treated fairly and while every effort will be made, some requests may not be able to be accommodated.

6.7 Condition of offer

Once an eligibility list is determined, positions are allocated in the following order:

- AST- ACRRM by prior arrangement following interview process for Regional Sites
- Continuing trainees year 2 and year 3
- 1st year advanced trainees in palliative medicine
- · Clinical foundation in palliative medicine
- Other medical officers.

Applicants, in the above preference order, are allocated to their first preference facility wherever possible. It is assumed they will accept the position to which they have been allocated. Applicants who decline an offer on the network will only be considered for further offers after all other suitable applicants have been placed.

An applicant who accepts an offer and then later withdraws is expected to notify the palliative medicine training program and discuss this directly with the director of palliative care of their allocated facility.

Applicants who have accepted a position are advised that the late reneging of offers is considered unprofessional behaviour and may affect future employability with Queensland Health.

Unsuccessful applicants are notified by the Program as soon as possible to give them the opportunity to amend RMO campaign preferences and seek an alternative position.

6.8 Post-selection feedback

Applicants can request post-selection feedback which is provided by the Medical Director or proxy Chair of the interview panel. Feedback should be factual, constructive, and sensitive and aim to assist with professional development.

6.9 Appointment

Successful applicants are allocated to a training facility for 6 or 12 months. Appointments (employment contracts) are arranged by the employing facility.

Participating hospitals should honour the confirmed allocations through the Program process. Trainee movement between hospitals post-allocation can only occur after consultation and agreement between the directors of palliative care of both hospitals.

7. Continuation on the Program

7.1 Progression of trainees

Trainees commencing in 2026 will be subject to the revised progression criteria as set by the RACP under the new <u>curriculum</u>. Those who commenced prior to 2026 will continue with previous arrangements as below:

Progression of trainees is governed by RACP training requirements and satisfactory clinical and professional performance according to Queensland Health expectations. Continuation on the program is subject to trainees meeting the following criteria for each year of training:

- demonstrated satisfactory performance as determined by current supervisors
- application through the annual RMO Campaign including two satisfactory referee reports
- maintain registration as a trainee of the RACP.
- (Progress interviews after 1 year and 2 years of training take place but do not determine continuation of training)

If these criteria are satisfied, the trainee is not required to undergo further suitability assessment and may continue on the program as previously allocated.

If these criteria are not satisfied, the director of palliative care from the allocated facility, in consultation with the current supervisor and the Medical Director, Qld Palliative Medicine Training Program, liaise to determine whether the trainee should be ranked as borderline so as to commence the IPAP process through the RACP.

7.2 Trainee in difficulty

Palliative medicine advanced trainees with identified performance issues must be managed as per the Queensland Health <u>Performance Improvement HR Policy G11 QH-POL-190</u> (effective June 2021) performance improvement process and the RACP's Trainees in Difficulty Support Policy and Trainees in Difficulty Support Process.

The training program has a defined trainee in difficulty process which follows Queensland Health and RACP guidelines. This process aims to support trainees who are not progressing through their training. It is not in lieu of hospital-based performance management processes.

The Director of palliative care should inform the training program of any trainee in difficulty at the earliest opportunity. Feedback is sought from the trainee's current supervisor and director of palliative care and a panel may be convened to interview the trainee. The panel are required to determine a suitable training outcome or escalate to the RACP if required.

8. Dual trainees

The Program accommodates doctors who wish to complete dual training.

Dual trainees who have completed the program selection process and previously held a program position are considered as current palliative medicine program trainees.

At the time of allocation, current dual trainees will *not* be unfavourably regarded if they decide to accept a subspecialty training post in favour of a palliative medicine training position.

9. Managing vacancies

From time to time, vacancies arise through resignation or withdrawal of trainees.

In all instances the training program should be notified of any vacancies as they occur. This is the responsibility of the trainee; however, directors of palliative care and supervisors are also encouraged to inform the program.

Filling vacancies after the completion of the annual recruiting period is difficult due to the contractual commitments that potential trainees have already made. Services are encouraged to enquire with the training program in the first instance but may be required to recruit a trainee independently of the training program. In this instance, a trainee will be considered 'non-program' and will need to be assessed through an out of session interview.

10. Appeals and complaints

The Queensland Palliative Medicine Training Program is governed by Queensland Health. Queensland Health's human resources policies provide the framework for the resolution of complaints, appeals and access to feedback on recruitment and selection decisions.

Appendix 1: Queensland Palliative Medicine Education Program

The Queensland Palliative Medicine *Education* Program provides palliative medicine advanced trainees (and trainees completing the clinical foundation in palliative medicine) with statewide online education, administered and managed by the Principal Medical Education Officer. Education sessions are run fortnightly on Wednesday afternoons from 3-5pm from February to December via an online videoconference platform. Topics highly relevant to Advanced Trainees in any stage of their training are presented by subject matter experts, either from within or outside the Palliative Medicine discipline. Multidisciplinary sessions allow for the integration of different perspectives and collaboration across disciplines. Education topics support the Palliative Medicine Advanced Training curriculum and cover areas such as communication, clinical knowledge and skill development, leadership and management, professionalism, law and ethics, and research skills. Education sessions provide an opportunity for formal learning, collaboration and social networking amongst Palliative Medicine Advanced Trainees across Queensland.

Queensland Palliative Medicine Education Committee

The Queensland Palliative Medicine Education Committee (QPMEC) was founded in early 2021. Meetings are held every two months. The objectives of the Committee have been to provide governance, innovation and excellence in state-wide formal education of Advanced Trainees in Palliative Medicine. Additionally, the committee is tasked with ensuring all trainees in their jurisdiction have access to technology and provided leave to attend the education sessions. The Committee consists of:

- Chair, Medical Lead, Qld Palliative Medicine Training Program
- Staff Specialists representing different HHS's across Queensland with special interest in higher education of Palliative Medicine Trainees.
- Principal Medical Education Officer, Qld Palliative Medicine Training Program

The spread of committee members across QLD has ensured statewide promotion and support for the program as well as a variety of networks and perspectives on educational topics.