

How to apply guide

This document provides guidance on selection into training for the Queensland Basic Physician Training (Adult Medicine) Network. It outlines the selection requirements and includes guidelines for preparing an application.

What is the network?

The network is a statewide system of training designed to support Queensland trainees in meeting Royal Australasian College of Physicians (RACP) basic training requirements over a pre-determined period (up to 3 years). Queensland Health is responsible for and oversees the network. In Queensland, endorsement of basic training is limited to medical officers that have been formally selected into the training network.

Rotations and network hospitals

If successful, you'll be appointed to one of five network "rotations" to complete basic training. You'll move between multiple hospitals within the rotation over the course of your training. You should expect to work a minimum of 6 months at **any** of the rotation's assigned hospitals as listed below (including fly-away locations).

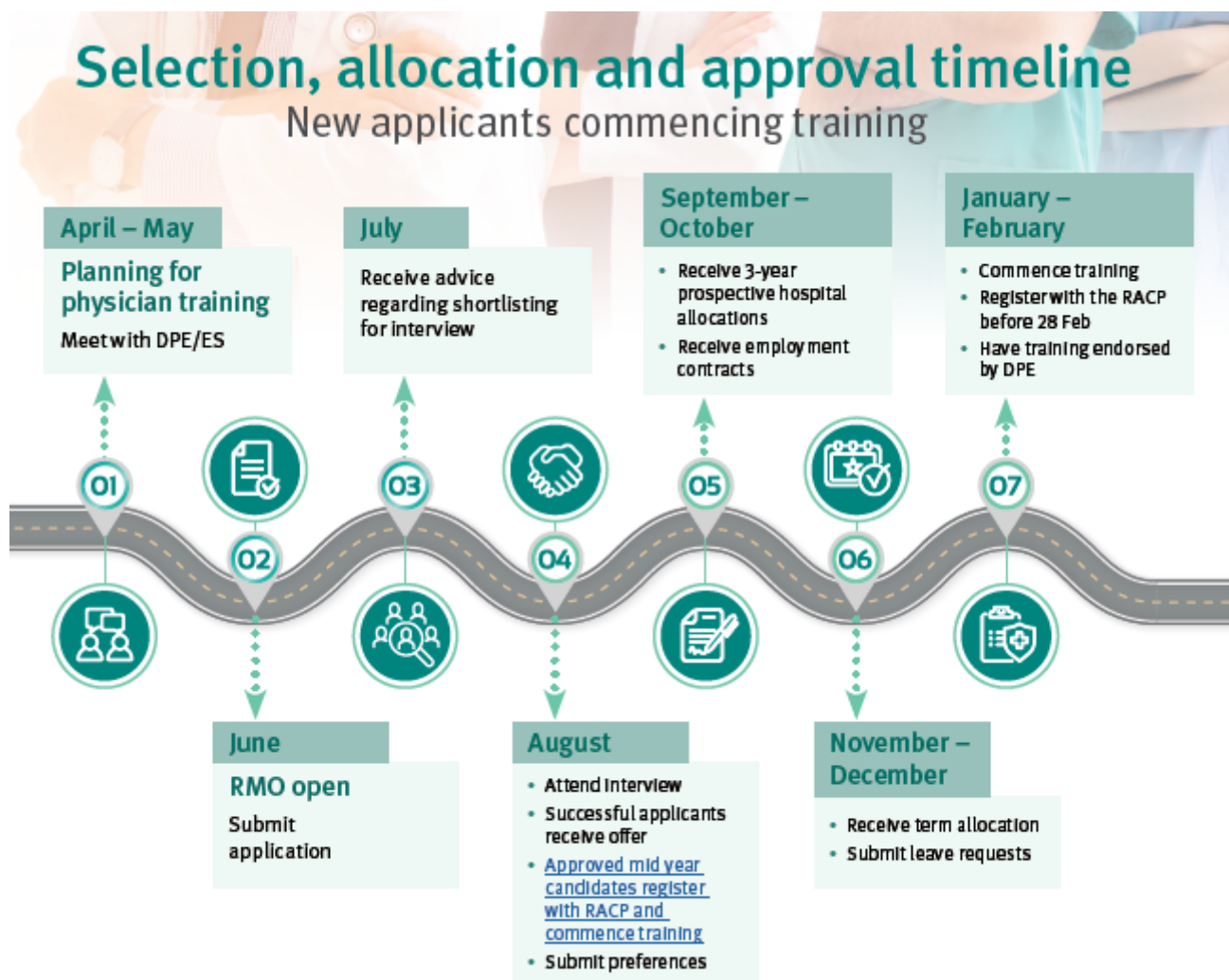
Far North Rotation	North Queensland Rotation	Northside Rotation	Southside Rotation	Coastal Rotation
<p>Cairns Hospital (3)</p> <p>Secondment sites</p> <p>Atherton Hospital</p> <p>Innisfail Hospital</p>	<p>Townsville University Hospital (3)</p> <p>Secondment site</p> <p>Mount Isa Hospital</p>	<p>Royal Brisbane and Women's Hospital (3)</p> <p>Sunshine Coast University Hospital (SCHHS) (3)</p> <p>The Prince Charles Hospital (3)</p> <p>Caboolture Hospital (2)</p> <p>Mackay Base Hospital (2)</p> <p>Redcliffe Hospital (2)</p> <p>Rockhampton Hospital (2)</p> <p>Nambour General Hospital (SCHHS) (1)</p> <p>Secondment site</p> <p>Gympie Hospital (SCHHS)</p>	<p>[^]Greenslopes Private Hospital (3)</p> <p>Mater Hospital Brisbane (3)</p> <p>Princess Alexandra Hospital (3)</p> <p>Ipswich Hospital (2)</p> <p>[*]Logan Hospital (2)</p> <p>Queen Elizabeth II Jubilee Hospital (2)</p> <p>Toowoomba Hospital (2)</p> <p>Bundaberg Hospital (1)</p> <p>Hervey Bay Hospital (1)</p>	<p>Gold Coast University Hospital (3)</p> <p>[*]Logan Hospital (2)</p> <p>Redland Hospital (1)</p> <p>Robina Hospital (1)</p>

Numbers indicative of RACP accreditation level

[^]BPTs at Greenslopes Private Hospital may be offered a short term (10-weeks) secondment to Alice Springs Hospital

^{*}Logan Hospital sits across both Coastal and Southside rotations.

Process for entry into basic physician training



*Note: If you have an extended contract, you must still complete a network application via the RMO Campaign to be considered for selection into physician training.

Eligibility criteria

To be eligible for a network position **prior to commencement of training** you must:

- hold **general registration** with the [Medical Board of Australia](#)
- **be eligible for registration with the RACP** as a basic physician trainee
- qualify as **postgraduate year three (PGY3)** or above.

The network supports and encourages applications from Aboriginal and Torres Strait Islander applicants.

If you're not a current network trainee and have completed RACP basic training requirements but haven't yet passed the exam, then you **should not apply to the network**. Instead, you should contact the Director of Medicine / Medical Administration and the Director of Physician Education (DPE) of your most preferred hospital(s) for advice. A DPE must agree to support you for any future examination attempts.

Selection criteria

You'll be assessed on your ability to demonstrate several key attributes. Within the context of the responsibilities described in the role descriptions on the [network webpage](#), the ideal applicant will be someone who can demonstrate the following:

Trainee as a learner <ul style="list-style-type: none"> ○ Commitment to completing basic physician training ○ Demonstrated participation in ongoing professional development ○ Ability to plan self-directed learning ○ Ability to model learning behaviours and foster development of others ○ Awareness of importance of institutional learning (through Quality Improvement measures) 	Commitment to the health of the people of Queensland <ul style="list-style-type: none"> ○ Commitment to completing workforce responsibilities associated with vocational training positions including term allocations in a variety of training institutions ○ Commitment to addressing health inequalities affecting Queenslanders due to ethnicity (in particular, Aboriginal and Torres Strait Islander people), regionality, gender or other reasons
Trainee as a team member <ul style="list-style-type: none"> ○ Ability to provide leadership, high-level communication and to act safely as a consultant delegate within a multidisciplinary team ○ Effective handover skills between medical and greater allied health workforce ○ Effective conflict management skills 	Trainee as a professional <ul style="list-style-type: none"> ○ Ability to communicate effectively and sensitively with patients, families and caregivers ○ Ability to educate patients about their health to empower their decision making ○ Ability to reflect on personal behaviour and actions and how this may affect other people ○ Demonstrate respect and empathy for all members of the health care team and patients
Trainee as a decision maker <ul style="list-style-type: none"> ○ Ability to recognise when a decision is required and who is best to make that decision ○ Ability to communicate risk and uncertainty ○ Ability to foster creativity and lateral thinking to solve complex problems 	Trainee as after-hours clinician <ul style="list-style-type: none"> ○ Ability to recognise and provide advanced life support to deteriorating patients. Holds current Advanced Life Support certification ○ Awareness of own limitations and know when to ask for help ○ Experience in advanced care planning discussions.

Commitment to rural / regional practice

The network has committed to supporting and encouraging growth of a rural and regional workforce in Queensland by incorporating strategies that strengthen rural and regional training. You'll be assessed on your demonstrated regional commitment with current and completed hospital placements rated against a tier system for 'areas of workforce need / rurality'. Scoring will be based on information you provide in the [clinical experience template](#) and will be worth 10% of the total score for ranking.

Scoring

To determine suitability ranking, the following scoring will apply:

Scoring for selection into training		Weighting of total score
Referee reports		5%
Short statements		20%
Clinical experience		5%
Scoring will be awarded for all completed terms (1 term = or >7 weeks) undertaken post internship (PGY2 onwards): <ul style="list-style-type: none"> 0.5 points for every term completed as JHO / SHO 1 point for every term completed as PHO/ Registrar <p>*Score will be adjusted for full time equivalent *Any periods of leave are not counted *Unexplained breaks will be investigated by NRC</p>		General Medicine inc: Peri-operative medicine, obstetrics medicine, admitting medical registrar, medical assessment unit, acute assessment unit, COVID ward & adolescent & young adult medicine. Medical Specialties inc: Cardiology, clinical genetics, clinical haematology, clinical immunology & allergy, clinical pharmacology, endocrinology, gastroenterology, geriatric medicine, infectious diseases, medical oncology, nephrology, neurology, palliative medicine, rehabilitation medicine (if part of a geriatrics or neurology rotation and supervised by a consultant who is a Fellow of the RACP), respiratory & sleep medicine, rheumatology, intensive care unit & stroke medicine
5 points maximum		
Rural and regional clinical experience		10%
Scoring will be awarded for all completed placements (up to end of term 2 for PHO / Reg, up to end of term 3 for JHO/SJO/intern) in a rural or regional area from PGY1 (includes internship): <p>-2 points for every term (= or >7 weeks) in a Tier 1 facility -1 point for every term in a Tier 2 facility -0.5 points for every term in a Tier 3 facility *Score will be manually adjusted for full time equivalent. *Any periods of leave will not be counted.</p>		Tier 1: Mackay, Rockhampton, Bundaberg, Hervey Bay, Atherton, Innisfail, Gladstone, Mt Isa and all other Queensland Health rural and remote health facilities other than tier 2 and 3 facilities listed at https://www.health.qld.gov.au/clinical-practice/engagement/networks/rural-remote/rural-facilities/map Tier 2: Cairns, Townsville, Gympie and Toowoomba Tier 3: Ipswich, Caboolture, Redcliffe and Redland *placements outside of Queensland will not be counted.
15 points maximum		
Interview & commencement level for employment - Multiple Mini Interview (MMI) assessment consisting of 6 stations.		60%
SHO suitable = A minimum score of 2 is awarded on at least 5 stations REG suitable: Interview = A minimum score of 3 on at least 5 stations AND a minimum score of 2 on the remaining station. OR REG suitable: Experience = SHO suitable at interview + has completed minimum of 6 months (by 1 August) at PHO/Registrar level + current supervisor supportive of performance at that level.		
Interview score 30 points maximum (6 stations worth 5 points each)		

Training positions

The table below provides a snapshot of network training positions that were allocated in 2024. The number of available training positions is dictated by training and examination capacity and may slightly vary from year to year.

250 medical officers applied to join the network to commence training in 2025		
Successful applicants		
Rotation	Registrar	SHO
Coastal	24	25
Far North	10	10
Northside	26	62
North Queensland	11	5
Southside	42	35
Totals	113	137
New trainees in 2025	250	
Current network trainees continuing in 2025	328	

Prior to applying

Consider when to commence physician training

Your level of experience will be assessed and scored and will contribute to your overall suitability ranking. Before applying, you should consider whether you are ready to commit to the following:

- Your first year of training will be undertaken at either Registrar or SHO level: however, all subsequent years of training will be at Registrar level.
- There is an expectation that you will attempt the clinical exam in your third year of training, therefore if you commence training in 2026, you intend to sit the clinical exam in 2028. If you plan to sit any later than this, you should consider applying next year.

Discuss your plans for training

If you are looking to commence training next year, you must meet with an RACP Educational Supervisor (ES) or DPE to discuss physician training as a career and if it is right for you. As part of the meeting ask the DPE / ES to complete the [Planning for Physician Training form](#) electronically as this will need to be uploaded with your application. Other suggested topics to discuss in this meeting include:

- is physician training the best pathway for your long-term career goals?
- what's involved in physician training (both basic and advanced)?
- how to plan your 3 years of basic training?
- starting as an SHO vs a Registrar
- structure of training programs (allocation lines) and how to preference
- how to prepare for the selection process
- your interest in and eligibility for [mid-year entry](#)

If you are looking to continue or complete training and require placements to meet RACP requirements, you must apply to the network.

You'll be allocated placements geared towards preparing for exams in the third year on the network. However, support to sit the exam earlier (if you're eligible due to previous training) will be considered on a case-by-case basis, in consideration of hospital training capacity and available exam preparation resources. Should you choose to sit earlier, the network cannot guarantee an expedited attempt without prior agreement.

Consider which rotation may best suit your needs, as some rotations may be better placed to accommodate an earlier examination attempt. You must then meet with the relevant Network Rotation Coordinator (NRC) to discuss your training plans. As part of the meeting ask the NRC to complete the [Planning for continuation of Physician Training form](#) electronically as this will need to be uploaded to your network application.

Key dates

Refer to the **key dates** on the [network webpage](#). Applicants will be considered as part of the RMO Campaign recruitment [round one](#) (Trainees).

Application process

Applications must be submitted through the Queensland Health [Resident Medical Officer \(RMO\) and Registrar campaign](#) (RMO Campaign). Late applications will not be accepted.

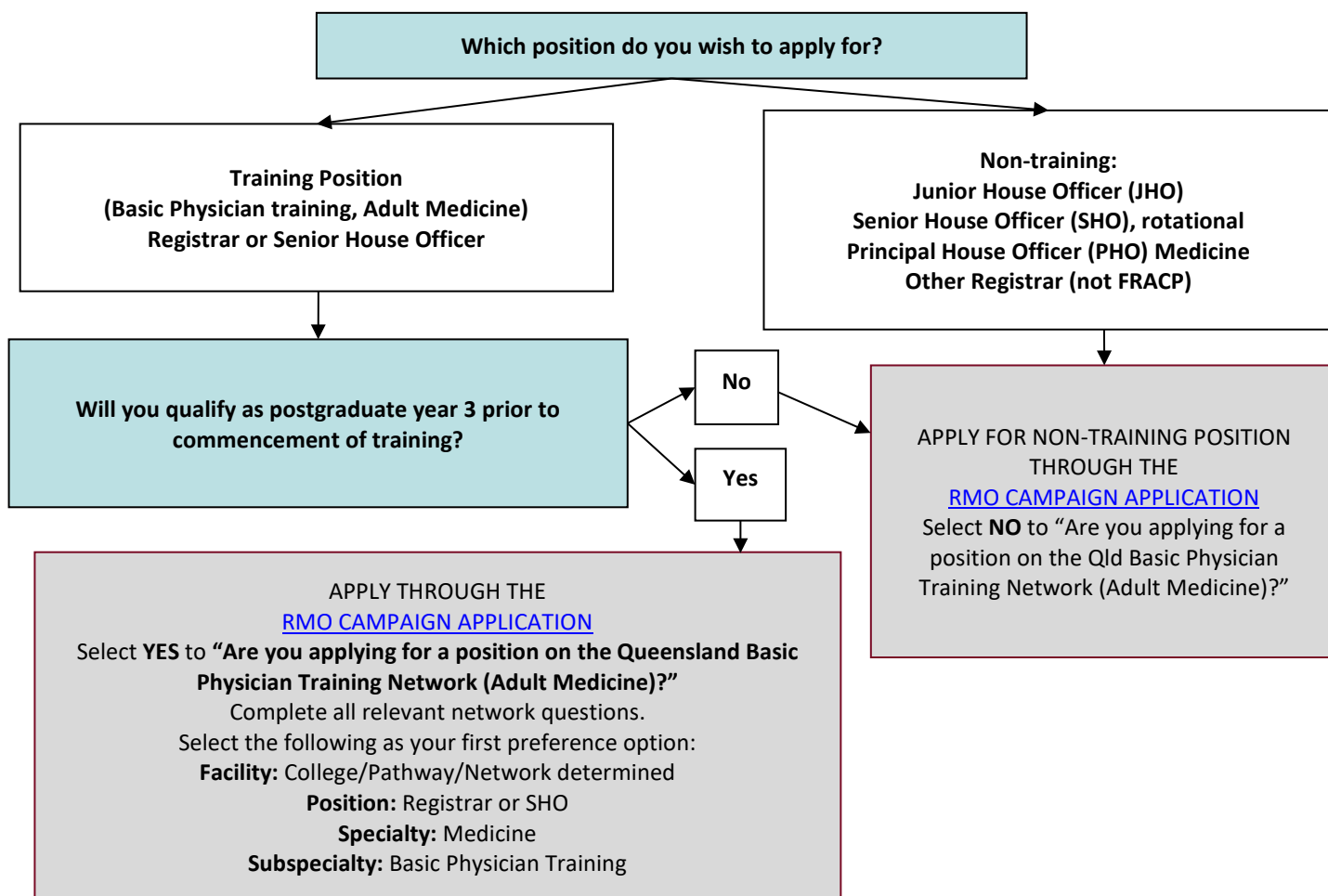


Figure 1 – Application process for the network

All medical officers including current network trainees must apply each year through the Queensland Health RMO Campaign application.

If you have secured an extended contract for 2026, you must still complete a network application through the RMO Campaign to be considered for selection into physician training. If successful, you may be allocated to a hospital that does not align with your extended contract.

Steps to complete the RMO application

You must complete the following steps to apply for the network.

Personal details and curriculum vitae - steps 1-7

Complete all mandatory questions such as:

- personal details including contact information. *Your nominated email address will be the primary method of contacting you regarding the status of your application.*
- educational details
- registrations details
- employment details etc.

A current Curriculum Vitae (CV) must be uploaded. The network selection committee requests that you use the standard [Queensland Health template](#).

Network specific questions – step 8

Specific questions relating to the network are incorporated within the application and will be scored by the network selection panel. In Step 8, you must select **YES** to the question “Are you applying for the Queensland Basic Physician Training (Adult Medicine) Network? After selecting **YES** to this option, you’ll be asked a series of network specific questions. You will need to complete all subsequent questions, and upload documents as indicated below.

Continuing network trainees (including clinical exam candidates)

Read the [FAQs for continuing trainees](#) document. You’ll be asked questions regarding your examination status and which network rotation you are currently training with. After this you will need to complete the remaining questions.

If you are a current network trainee who did **NOT sit the clinical examination** this year you must satisfy the continuation criteria including;

- ongoing satisfactory performance at the level of employment
- receipt of two satisfactory referee reports
- recommendation from your current DPE that you continue training

Your NRC and DPE are responsible for approving you to continue with pre-planned allocations and to receive employment contracts each year.

If you are a network trainee that is **awaiting clinical exam results**, you must nominate advanced training positions and [preference accordingly](#), anticipating that you’ll pass and move into advanced training.

If you are unsuccessful in the exam and you’re eligible for another year on the network, you’ll be contacted in late July and asked to complete a preference survey to provide you with hospital allocations for the next year.

In late August, you’ll receive a letter of offer that outlines your allocation. If you accept this, you’ll remain on the network. If you decline, you’ll exit the network and you’ll need to independently secure your own post-network training position suitable for re-attempting the exam. Trainees that remain on the network will get priority access to exam preparation resources.

If you expect to have outstanding RACP time-based requirements next year, then you must remain in a network approved position until basic training is complete. Non-network positions in Queensland can’t be signed off towards training requirements. Contact your NRC to flag this and discuss plans for completion of your basic training.

New applicants – joining the network

Provide evidence that you have discussed your training plans with an ES or DPE. To do this, arrange a meeting with a DPE / ES and upload the following:

- A completed (signed by DPE or ES) [Planning for Physician Training form](#) - if you are applying to commence training OR
- A completed (signed by DPE or ES) [Planning for continuation of Physician Training form](#) - if you are applying to join the network to continue training.

You can nominate any DPE or ES for this discussion. This may be either at your current hospital or at another hospital.

Nomination of position level

Successful applicants will be employed as either a SHO or registrar for their first year of training. All subsequent years will be completed in registrar level positions.

You'll need to determine at which level you wish to commence training. In the RMO campaign, you'll need to preference either registrar or SHO as your first preference at two separate points in the application (step 8 and again in step 10) and both responses should align.

When nominating a position level, consider the following:

1. nominate a level that you would be comfortable working and commencing training in. This is a good topic to discuss in your [Physician Training Discussion](#)
2. you'll be assessed through the suitability-based selection process which considers referee feedback, your performance at interview and your previous experience. You'll be expected to achieve the standard that you apply for i.e. registrar applicants will be expected to achieve the registrar standard on interview.
3. certain hospitals offer only SHO level positions to first year trainees. Depending on the position level you preference, certain training allocations may not be possible (examples provided in allocations section, page 12 of this document)
4. if you are unsuccessful at registrar standard, you may be considered for SHO positions if there are vacancies..

Mid-year entry

You may be eligible to commence on the network and have your training endorsed from August of this year. Read about [mid-year entry eligibility requirements](#) and process.

You'll be asked to indicate if you wish to be considered for mid-year entry into training. If you select yes, you'll be asked to summarise the circumstances that has led to you making this request. You may be contacted by the network team for further information to support your request. If you are considering mid-year entry you should raise this in your planning for training discussion.

Short statements

Complete the following short statements. These will be scored and will contribute to your suitability ranking.

1. Plan for basic training

Summarise your plan for basic training (i.e. the next 3 years) including where you intend to work and what experiences you are planning to gain. (250 words maximum).

2. Behaviours that contribute to a positive health care environment

Give anonymous examples of behaviours that you have seen exhibited by medical registrars that have helped contribute to a positive health care environment. (250 words maximum).

3. Commitment to and participation in clinical teaching and education

Summarise your commitment to and participation in clinical teaching and education of others. This may include involvement in supervision of students, provision of lectures, clinical bedside coaching etc (250 words maximum). Specific examples must be provided.

4. Leadership and quality improvement

Outline any leadership and/or quality improvement initiatives you have been involved or participated in. This can include leadership roles in extracurricular activities or careers prior to medicine. Include examples of audits, committees, and programs (250 words maximum).

5. Commitment to the health of Queenslanders

Describe your motivation and commitment to providing healthcare for Queensland's population, including those who are socially disadvantaged and geographically isolated. Include any work experience in regional Queensland (experience in the Northern Territory counts equivalently to Queensland experience). (250 words maximum).

Clinical experience

Provide detailed information about your recent clinical experience, up to the last three years, which may include your intern year. This will contribute to your suitability ranking.

You should demonstrate recent experience in clinical / internal medicine, including terms approved for basic training.

To facilitate this, you are provided with a weblink to an approved [clinical experience template](#) that you must complete, save then upload. The following information is required for each term/placement:

- Specialty description (e.g. general medicine, cardiology etc). For relieving terms indicate the number of weeks of medicine completed and in which subspecialty.
- Facility/hospital
- Position you held at the time (e.g. Intern or Junior House Officer) and whether it was undertaken in a part time or full-time capacity
- Year and duration (number of weeks) of the placement
- Name of supervising consultant for each term/placement listed (first name and last name).

In addition to previous experience, you'll also be asked to provide details of terms that you are expecting to complete in the second half of the current training year. Random checks will be undertaken to verify any experience that you claim.

Rotation preferences

This question requires you to indicate which of the 5 network rotations you wish to train within. Successful applicants will complete basic physician training within one rotation across 2-3 hospitals. You must indicate a minimum of three preferences:

- **Far North (Cairns)**
- **North Queensland (Townsville)**
- **Coastal**
- **Northside**
- **Southside**

The Southside rotation includes two non-Queensland Health hospitals: applicants who select these options may as a result, be offered an employment contract that is not from Queensland Health. However, a process has been established to ensure continuity of employment with Queensland Health, to facilitate a smooth transition on your return, and maintain your QH leave entitlements. Further information including hospitals, term availability and educational opportunities, is available on the [network rotations, hospitals and contacts document or](#) by emailing physician_training@health.qld.gov.au

Preferences – step 10

To be considered for the network, you MUST nominate the following as your first preference:

- **Facility:** College/Pathway/Network (determined)
- **Position:** Registrar or SHO (Note: this should align with what you have nominated in Step 8)
- **Specialty:** Medicine
- **Sub-Specialty:** Basic Physician Training

Unless you are a current network trainee who is awaiting clinical exam results, you must nominate the network option (as above) as your first preference.

You'll be given the opportunity to amend preferences between each of the RMO Campaign selection rounds. To ensure that you do not miss out on being considered for an alternate Queensland Health position, if you are not selected to the network, you should nominate non-training positions (e.g. PHO in medicine or SHO - rotational) at specific hospitals as your second and subsequent preferences.

Flexible working arrangements – step 10

If you are interested in flexible training such as a part-time, or job share position, you can register your interest for this within the RMO application. If you are successfully selected to the network, you will be sent a preference survey (via Microsoft Forms) and again given the opportunity to register your interest for a flexible work arrangement. Refer to the [network strategy to support flexible training](#) for further information.

Nominating referees – step 11

Information provided by your referees will be used in the shortlisting process and will contribute to your suitability ranking score to determine if you are suitable for selection to the network. You are required to nominate two referees, who will be asked to provide information about your relevant skills and experience.

The network selection committee requires referees to use professional/institutional email addresses when submitting referee reports. Feedback from non-professional email addresses will not be considered. Queensland Health (through the RMO Campaign) will email your nominated referees directly using the contact information provided in your application. You should inform referees of your nomination (including the professional email address requirement) before submitting your application.

You are required to nominate two specific referees as follows:

1. Your **current** (at the time of application) **immediate supervising consultant**, who has observed your daily clinical work. If you are on a relief term you can either nominate a supervising consultant from this term or your next most recent supervising consultant)
2. The supervising consultant from your most recently completed **general/internal medicine (or medical specialty)** term, who has observed your daily clinical work.

Please ensure that referees are nominated according to these requirements and that both reports are submitted by the due date for your application to be considered complete.

Submit your application – final step

Complete the declaration confirming that the information that you have provided in your application is correct, save and submit your application. Keep a check on your email for updates regarding your application status.

Shortlisting

The application captures information that the network selection team use to assess your suitability for selection. Applications, CVs, and referee feedback are reviewed against key selection criteria to determine eligibility and shortlisting for interview. Shortlisted applicants will progress to interview.

Interview

To be selected into training, you must be successful in the network interview.

The interview dates are published on the [network webpage](#). All shortlisted applicants will be invited to participate in the interview session that corresponds with their first preference rotation. If an alternative session is more suitable, then please contact the network as soon as possible to discuss.

The interview will assess you against specific selection criteria outlined in this document. Interviews are a six station Multiple Mini Interview assessment with each station covering a specific domain e.g. Communication. Applicants will need to complete all six stations. If shortlisted, you'll need to make yourself available either face-to-face or virtually. Details of the time, format and location will be provided to you closer to the date.

Selection outcome

Following interviews, successful applicants will be ranked in order of suitability and notified of the outcome of their application by late August. All unsuccessful applicants will be notified as soon as possible to enable changes to their RMO Campaign preferences on the specified dates. Please check the RMO website [Resident Medical Officer \(RMO\) and Registrar campaign | Careers](#) for further details.

Preferencing training allocations

If you're successful, you'll be offered a prospective 3-year training program. This outlines the training settings (hospitals) where you'll complete basic training. The first year of training will be in one setting.

The network will gather information via a preference survey about your RACP training requirements (including when you wish to sit the college exams) and preferences for hospital and term allocations. You'll then be provided a series of training program allocations to preference from.

If you have applied for a registrar level position and met the standard, you will preference from registrar training allocations. If you meet the SHO standard, you'll preference from SHO training allocations.

Things to consider when preferencing training allocations:

- a. Where do you want to sit your exam?
- b. When do you want to complete your regional term?
- c. Would you prefer to complete 12-month allocations (Northside and Southside)?
- d. What hospitals would you like to get exposure to?

Various allocation options will appeal to different trainees. For example: you may preference a 3-year allocation that ensures you are in a large tertiary hospital for your examinations, others may prefer an allocation with less fly-away placements while others might prefer an allocation that sees them complete regional training earlier in their training program.

Points to note:

1. You should expect to undertake **a minimum of 6 months** of training in any of the rotation hospitals including fly-away locations.
2. **Aboriginal and Torres Strait Islander people that are successful at interview, will be allocated their first preference of training setting (hospital) allocations.**
3. The network may need to modify your training program, hospital, or term allocations to minimise the impact of significant workforce shortages on training and trainees. Any such modifications will be undertaken in consultation with you and any necessary changes communicated as soon as possible.
4. **Relocation and / or accommodation entitlements will differ between 6- and 12-month training placements.** Refer to HR policies [D8. Resident Medical Officers on secondment or rotation](#) and [D4. Transfer and appointment expenses](#) and contact relevant training settings directly for further information. The setting that you'll be moving to will be responsible for transfer and appointment expenses and it will be their HR departments that will provide the appropriate interpretation of the policies relevant to your situation.
5. If you are undertaking a portion of your training in a setting external to Queensland Health, a process has been established to ensure continuity of employment with Queensland Health, facilitate a smooth transition on your return, and maintain your QH leave entitlements. Further information is available from the network team by emailing physician_training@health.qld.gov.au

Sample 3-year training allocations

Southside

Network year 1 Senior House Officer	Network year 2 Registrar	Network year 3 Registrar (exam year)
Princess Alexandra Hospital (PAH)	Toowoomba Hospital	Mater Hospital
PAH	Ipswich	PAH
Greenslopes Hospital	Hervey Bay/ PAH	PAH
Mater Hospital	Toowoomba	PAH
Logan Hospital	QEI Hospital	Greenslopes Hospital
Ipswich Hospital	Logan Hospital	Mater Hospital

Network year 1 Registrar	Network year 2 Registrar	Network year 3 Registrar (exam year)
PAH/ Hervey Bay	QEI	Mater Hospital
PAH	Ipswich Hospital	Greenslopes Hospital
Logan Hospital	Ipswich Hospital	PAH
Toowoomba Hospital	Logan Hospital	PAH
Ipswich Hospital	PAH	Mater Hospital

Northside

Network year 1 Senior House Officer	Network year 2 Registrar	Network year 3 Registrar (exam year)
Royal Brisbane & Women's Hospital (RBWH)	RBWH	RBWH / Redcliffe Hospital
RBWH	Caboolture Hospital /RBWH	RBWH
Sunshine Coast University Hospital (SCUH)	Redcliffe Hospital	RBWH
The Prince Charles Hospital (TPCH)	RBWH	Mackay
RBWH	Mackay Hospital /Caboolture Hospital	RBWH

Note: Majority of the first-year trainees starting at level 3 hospitals will commence in SHO positions.

Network year 1 Registrar	Network year 2 Registrar	Network year 3 Registrar (exam year)
Mackay Hospital	SCUH	SCUH
Caboolture Hospital	TPCH	RBWH
TPCH	Redcliffe Hospital /TPCH	TPCH
SCUH	Caboolture Hospital	SCUH
SCUH	Mackay Hospital /SCUH	SCUH
Rockhampton Hospital	RBWH	RBWH

Coastal

Network year 1	Network year 2	Network year 3 (exam year)
SHO @ Gold Coast University Hospital (GCUH)	Redland Hospital	GCUH
Registrar @ GCUH	GCUH	Logan Hospital
Registrar @ Logan Hospital	Robina Hospital & GCUH	GCUH
Registrar @ Redland Hospital	GCUH	GCUH
Registrar @ Robina Hospital	GCUH	GCUH
Registrar @ GCUH	GCUH	Redland Hospital

Far North (Cairns)

Network year 1	Network year 2	Network year 3 (exam year)
SHO @ Cairns Hospital	Atherton Hospital (3 months) & Cairns Hospital	Cairns Hospital
Registrar @ Cairns Hospital	Cairns Hospital	Cairns Hospital

North-Queensland (Townsville)

Network year 1	Network year 2	Network year 3 (exam year)
SHO @ Townsville University Hospital (TUH)	TUH	TUH
Registrar @ TUH	Mt Isa (3 months) & TUH	TUH

Allocation process

If successful for the network, you'll be allocated according to the following:

- your suitability ranking
- your preferences
- your RACP training requirements (including when you intend to sit the RACP examination)
- available training positions and workforce requirements.

Allocations will be confirmed by mid-October at which point you'll be notified in writing of your prospective training program allocations.

Special consideration

Network trainees are expected to commit to allocated training programs and placements for the duration of basic training (up to 3 years). If special circumstances affect your ability to comply with this, you can [apply for special consideration](#) and seek an alternate arrangement. You must contact your NRC in the first instance to make the request and discuss the process and possible options available to you.

Employment contracts

Hospitals arrange employment contracts annually. These will consist of either 2 x 6 or 1 x 12-month contracts in line with your allocations. Successful applicants will be offered a basic training place for up to three years, dependent upon your individual training requirements.

An additional year or second exam attempt will be available if:

- in consultation with your DPE you elect to delay an examination attempt
- you fail an examination attempt.

Continuation on the network is subject to ongoing satisfactory performance, receipt of two satisfactory referee reports, and DPE approval.

All Queensland Government appointments are subject to routine pre-employment screening, and criminal history checking. It is expected that employment contracts will be sent to successful applicants at the conclusion of the allocation phase.

Commencement of training

Following conclusion of the selection and allocation process, you'll commence in your network position in line with the training year or in August of the current year if you were approved for mid-year entry into training.

Hospital orientation will be delivered locally, and you'll also receive a Rotation Education Handbook. This will include information relating to educational opportunities available to network trainees and how to access these.

The local DPE will endorse your basic training application so that you can commence training and finalise your registration with the RACP by the end of February or for successful mid-year entry applicants, by the end of August. Further information relating to the RACP registration process can be found at

<https://www.racp.edu.au/registration/introduction/start/#register>

Requesting deferral of commencement

You can request a deferral of commencement on the network of up to 6 months. Your NRC in consultation with the relevant rotation education committee can consider allowing you to delay joining the network, providing the deferral is no longer than 6 months. Deferral's may impact or change your pre-planned training allocation. NOTE – Deferrals due to parental, sick or other compassionate leave is considered separately as a flexible training request and will be assessed on a case-by-case basis and according to the Network strategy to support flexible training.

If you defer commencement for more than 6 months, you are deemed to have declined your network offer and must re-apply to the network via the [Resident Medical Officer \(RMO\) and Registrar campaign | Careers](#).

Appeals

The network is governed by Queensland Health, and Queensland Health's human resources policies provide the framework for the resolution of complaints, appeals and access to feedback on recruitment and selection decisions. For an overview of this framework read the [network selection appeals guide](#).

Further information

For further information contact the network via email Physician_Training@health.qld.gov.au.

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