



# EV Registrar Quick Guide

## To Practice Based Learning

This information is contained in the EV Registrar Handbook

It is the role of the registrar to drive and monitor their own teaching and learning whilst they are working in the practices. This should be undertaken in conjunction with discussion with the educational supervisors at the practice.

### Orientation

Registrars who are commencing training usually spend the first day or two in orientation to general practice, sitting in with their supervisor/s or other doctors or the practice manager of the practice. During this time many of the logistics of general practice can be introduced, following up on the information presented at formal orientation. This orientation provides an important foundation to optimise the registrar's ability to successfully work within the practice. EV has orientation checklists available to both registrars and practices.

A similar orientation process should be undertaken at the commencement of each registrar placement.

### Supervision requirements

Term	On-site Availability	Availability by Phone
GPT1/PRR1 – First month	100% Consulting time	Not applicable
GPT1/PRR1- Remainder	80%	20%
GPT2/PRR2	50%	50%
GPT3/PRR3	25%	75%
ESP/PRR4/Elective	25%	75%

When off site, the supervisor is available by phone or other reliable electronic means or ensure that an accredited supervisor is available on-site or by phone 100% of the time. The supervisor or delegate is able to attend a situation that requires back-up unless alternative arrangements have been made prior to the event with the registrar's consent.

### Rostering and patient bookings

After the first few weeks in a new training practice registrars will gradually increase their patient load. This will vary depending on the registrar's prior experience. Appropriate caseload for registrars is displayed in the table below.

GP Term	Average Patients per Hour	Maximum Patients
GPT1/PRR1 (first 1-2 weeks)	1-2	4
GPT1/PRR1 1st 3 months	2-3	4
GPT1/PRR1 2nd 3 months	3-4	4
GPT2/PRR2	3-4	4
GPT3+/PRR3+	3-4	4

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Supervisors should ensure that clinic staff who are involved in taking bookings are aware of the registrar's current schedule. Other important activities to keep in mind are appropriate rostering for EV education activities, administration time and protected teaching time.

### Training Time

Training Time	FTE Hours per Week		
	0.5	0.75	1.0
Minimum scheduled patient consulting time per week (Note 1)	13.5	20.5	27.0
Minimum number of days per week	2.0	3.0	4.0
Total working hours in a non-workshop week	19.0	28.5	38*

\*To be considered as full-time training, registrars must be working a total of 38 hours per week.

### Practice-based learning

The educational supervisors are responsible for planning and coordinating the education of their registrars. This task can be performed alone, or in conjunction with other members of the practice team. Teaching occurs in the registrar's usual working hours and is part of their paid employment.

Other members of the practice team involved in teaching can include: additional accredited supervisors; other doctors; practice nurse; allied health staff or practice manager.

### Weekly teaching times

Teaching times are dependent on the level of training of the registrar and are pro rata for GPT1/PRR1 and GPT2/PRR2 but not for GPT3/PRR3. There is no teaching time for ES/PRR4.

Term	FTE Hours per Week		
	1.00	0.75	0.50
GPT1/PRR1 (1 hr protected)	3.00	2.25	1.50
GPT2/PRR2 (1 hr protected)	1.50	1.00	1.00
GPT3/PRR3 (protected)	0.75	0.75	0.75
ESP (GP)/PRR4	0.00	0.00	0.00

Teaching should ideally be booked first thing in the morning or after a break to ensure that it is not deferred because of running late.

At least one hour of the teaching time each week for GPT1/GPT2 and 45 minutes for GPT3 must be a planned education face-to-face session. These sessions should be driven by the registrar and be negotiated with them. They should be at an appropriate level considering the registrars' knowledge and experience. Combined registrar learning sessions are only acceptable if ALL registrars' learning needs are being met. Registrar feedback is expected and should be encouraged.

### Recommended activities for the weekly one hour protected face-to-face teaching

- Direct observation of registrar consultations with supervisor feedback or vice versa
- Clinical discussions or formal tutorials based on the registrar's learning plan
- Case – based discussions
- Preparation for or follow-up of EV registrar workshops
- Random case analysis
- Video debriefing (note privacy and medical record compliance requirements)
- One on one session on agreed topics
- Registrar risk assessment, orientation to the practice, demonstration of procedures, discussion of the Recent report or other educational enhancement activities

The remainder of the in-practice teaching time can be met with a range of teaching activities including all those listed above as well as: corridor teaching, end of day de-briefing, attending patients together, ward rounds, in-car relevant teaching conversations, participation in practice based clinical and teaching sessions and a limited number of practice management meetings which do not have a primary focus on clinical or teaching topics.

For current updates and policies please refer to the EV Training Practice Handbook located on EV's website.

Version 2

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