

Flexible Approach to Training in Expanded Settings (FATES)

Rural Director of Training (Rural DoT) Guidelines

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1. Introduction

In the 2021-22 Budget, the Australian Government (through the Department of Health) (DoH) announced funding support over four years for the Flexible Approach to Training in Expanded Settings (FATES) to enhance training system quality and capacity for non-GP medical specialist training activities.

The purpose of FATES is to support specialist medical college (College) projects that address priority areas and actions identified in the National Medical Workforce Strategy (NMWS), and other Australian Government priorities. These include a focus on addressing maldistribution and undersupply issues, as well as meeting community need by increasing support for building capacity in the rural, remote and Aboriginal and Torres Strait Islander specialist medical workforce.

In 2021, the Royal Australian and New Zealand College of Psychiatrists (RANZCP) launched a visionary strategic document [*Rural Psychiatry Roadmap 2021-31: A pathway to equitable and sustainable rural mental health services \(Roadmap\)*](#).

The Roadmap emphasises building the rural psychiatry workforce with the development of a dedicated Rural Psychiatry Training Pathway (RPTP). Its focus is on expanding opportunities for aspiring psychiatrists to live, train and practice in regional, rural and remote settings ('Rural'). This will see the establishment of dedicated and sustainable Rural training pathways to Fellowship.

The RANZCP was successful in its application for funding under the FATES program administered by the DoH to assist with addressing the workforce shortage in regional, rural and remote Australia.

The RANZCP applied to invest in innovative models of supervision, increasing the training systems' quality and capacity. This modelling includes supporting the roll-out of Rural Directors of Training (DoT) for local health jurisdictions to create a network of Rural DoTs in Australia.

2. Aims and Objectives

The objectives of FATES are:

- Improve and promote a positive rural and remote medical education culture and support quality specialist medical training in Rural Australia.
- Reduce barriers and improve incentives for entering Rural medical practice.
- Improve the imbalance of distribution of the non-GP specialist medical training arrangements and workforce, particularly in areas of unmet need.
- Attract and support Aboriginal and Torres Strait Islander trainees to grow the Indigenous workforce towards population parity.

The RPTP identified the potential for Rural DoTs to contribute to the delivery of the Fellowship program in Rural locations with an emphasis on generalist psychiatry and increasing the future availability of psychiatrists in Rural settings with suitable supports and networks.

The funding is available for the period August 2022 to August 2024 to establish three Rural DoT positions, which must be co-funded and provided with appropriate administrative support. The positions cannot have been previously funded; a commitment is expected from applicants to fully fund the position when the DoH funding expires in 2024, at which time an evaluation of the position is required to be completed.

The Rural DoTs will be responsible for:

- Supporting quality psychiatry training in Rural Australia.
- Reducing barriers and improving incentives for entering Rural medical practice.
- Improve the distribution and supply of psychiatry training in areas of undersupply to meet the needs of the community, particularly in Rural areas.
- Prioritise support for Rural training.

3. General Principles

The following principles apply to projects funded under FATES:

1. Training Focussed
 - Proposals must focus on non-GP specialist medical training.
2. Evidence and Evaluation
 - Proposals are supported by evidence and the academic literature (where possible). Proposals are sought that will target known barriers to Rural training and increase enablers, such as building connection to regions and communities through long, rather than short term, rural placements.
 - Projects must include an evaluation component, commensurate to their size and scope, made publicly available. Applicants are required to identify the evaluation criteria that aim to achieve the FATES objectives and outcomes as part of their application.
3. Sustainability
 - FATES is intended to be one-off/short-term funding. Ongoing initiatives should be based on alternate funding sources.
4. Collaborative
 - Projects are to build on current rural initiatives and programs (where available).

4. Outcome Parameters

The intended outcome of this activity is to strengthen workforce capability to deliver psychiatry services specific to the unique needs of Rural areas of Australia.

Rural DoTs will collaborate with:

- The RANZCP to streamline post planning, allocation, and accreditation processes.
- The RANZCP to build capacity to expand Rural training to smaller and more remote locations.
- Health Services to fund new training opportunities.
- Universities and Regional Training Hubs to create connections with medical students and junior doctors interested in the practice of psychiatry.

Rural DoTs will focus on outcomes to:

- Support quality psychiatry training in Rural Australia.
- Reduce barriers and improve incentives for entering Rural psychiatry medical practice.
- Improve the distribution and supply of psychiatry training in areas of undersupply to meet the needs of the community, particularly in Rural areas.
- Prioritise support for Rural training.

5. Funding

The parameters for the funding are outlined below:

Salary support for Rural DoTs

- A contribution of \$125,000 per year (GST exclusive) pro rata, per 0.45 FTE.
- Maximum funded period from August 2022 to August 2024.
- A maximum of three positions may be funded.

6. Eligibility

6.1 Eligible activities

The following organisations are eligible to apply under the initiative:

Health Services and/or State and Territory Governments in Australia committed to co-fund a rural DoT position.

6.2 Conditional Requirements

Appropriate resources and support for the position are required¹.

The Rural DoT must be geographically dedicated to locations in Modified Monash Model (MM) 2-7 (2019).

The RANZCP minimum resourcing requirement is:

- 0.5 FTE DoT time per 20 trainees is required for training, support, teaching, remediation, and administration.
- Only 0.4 FTE is required if there is a separate Formal Educational Course used by trainees in the program, for which the DoT is not responsible.
- The minimum FTE, even in small programs, is 0.3 FTE DoT.
- 0.4 FTE Administrative staffing per 20 trainees.
- The minimum administrative staffing to run a training base, even in small programs, is 0.3 FTE.

¹ "DoT time" refers to all funded DoT/Coordinating or DoAT sessions.

6.3 Ineligible activities

The following are ineligible activities:

- (a) Rural DoT positions which are not considered to be new positions:
 - (i) a position will not be considered new if it is currently or has been previously funded.
 - (ii) positions currently funded by the applicant organisation, or a State and Territory government will not be considered new and will be ineligible for support.
- (b) Any activity not directly related to the development or delivery of the Rural DoT activities.

The funding cannot be used for the following costs:

- purchase of land;
- major capital expenditure / major construction / capital works;
- staff salaries and on-costs not directly attributed to the delivery of an eligible funded activity;
- the covering of retrospective costs;
- costs for the preparation of a training post application or related documentation;
- overseas travel; and/or
- activities for which other Commonwealth, State, Territory or local government bodies have primary responsibility.

7. Governance

7.1 Management of Vacancies

Positions are to be filled for a minimum of three months. Rural DoT positions that will be unfilled for greater than six months are required to have another eligible person recruited to fill the vacancy.

7.2 Long term leave arrangements for Rural DoTs

- (a) Employers of Rural DoTs who are participating in the initiative must ensure that access to leave entitlements such as maternity leave and personal leave are maintained for the duration of the position. Leave arrangements (including long service leave and maternity leave) are to be managed directly between the position holder and the employer.
- (b) Rural DoT salary support funds are not intended to fund extended periods of personal leave (including maternity leave). The intent is to provide support for the Rural DoT, including providing services to the local community.
- (c) RANZCP management of unfilled positions due to extended leave (including maternity leave) will take into consideration the length of time that the position will be unfilled. In some cases, it may be appropriate for the Rural DoT position to be unfilled for a short period and then resume as a shared or part-time role.
- (d) As a guide, Rural DoT positions that will be unfilled for greater than six months are required to have another eligible person recruited to fill the vacancy.

7.3 Insurance requirements including Medical Indemnity

All applicants will be required to demonstrate they hold the following insurances:

- public indemnity,
- medical indemnity,
- professional indemnity
- workers compensation.

8. Reporting

A report must be submitted in accordance with a funding agreement which will be issued and administered by the RANZCP. A reminder of reporting obligations will be provided to the Health Services (fundholder) by the RANZCP before a report is due. A report will be required twice a year, at the end of each training rotation. Reports must cover:

- progress against agreed Rural DoT objectives and outcomes e.g.
 - The number of and location of rural posts available, fill rate and management of vacancies.
 - Work undertaken to improve and promote rural and remote medical education.
 - Work undertaken to influence provision of rural training posts.
 - Work undertaken to influence Aboriginal and Torres Strait Islander people to undertake Psychiatry training.

Sample templates will be provided to successful applicants by the RANZCP for reports in accordance with the funding agreement.