**Rural Generalist Coordination Unit**

**2023-26 Rural Procedual Consolidation Term (RPCT) Learning Plan**

November 2023

# Learning Plan

The Learning Plan should be submitted with the Rural Procedural Consolidation Term Grant Application Form where the trainee is known. Where a trainee has not yet been identified the Learning Plan will need to be submitted with the Trainee Details Section D: RPCT Application Form to complete your application once the trainee has been identified and their learning needs assessed. Until the Trainee’s details and the Learning Plan are submitted only provisional approval for your application may be given.

Applications can be emailed to [health.SARuralGeneralistTraining@SA.gov.au](mailto:health.SARuralGeneralistTraining@SA.gov.au)

Enquiries about the program should be directed to Kylee Nuss, Manager, Trainee Medical Officer Unit, Rural Support Service on 0481 466 438 or by emailing [kylee.nuss@sa.gov.au](mailto:kylee.nuss@sa.gov.au).

# Definitions

The following definition apply to this document:

* Primary Mentor: refers to the actively practicing Rural Generalist with the required specialist skills (Rural Generalist Anaesthetist, Obstetrician or other) who will be working at the same location as the trainee for their skills consolidation placement; and
  + has agreed to oversee/supervise the trainee’s skills consolidation placement including the development and review of their learning plan; and
  + Is the primary ongoing support person during the trainee’s skills consolidation placement

# A: Trainee and Organisational Details:

**This learning plan is for:**

|  |  |
| --- | --- |
| Name of Trainee | Click or tap here to enter text. |
| Contact phone number | Click or tap here to enter text. |
| Organisation where skills consolidation post to be undertaken: | Click or tap here to enter text. |
| Name of Primary Mentor | Click or tap here to enter text. |
| Position | Click or tap here to enter text. |

|  |  |
| --- | --- |
| Skills consolidation discipline area | Choose an item. |

# B: Learning Plan

This learning plan is required to be completed by the trainee in consultation with their primary mentor prior to the commencement of the skills consolidation post. It is also a requirement that this plan is reviewed in consultation with your mentor at the halfway mark of the consolidation post.

|  |  |
| --- | --- |
| Post duration: | Click or tap here to enter text. |

What are your goals for this advanced skills consolidation post?   
*Note: in addition to technical skills, also consider personal factors.*

|  |
| --- |
| Click or tap here to enter text. |

**For Trainee:**

How do you plan to achieve these goals over the course of your consolidation post?

|  |
| --- |
| Click or tap here to enter text. |

## Do you foresee any barriers that might impact your ability to achieve these goals and how might these be addressed?

|  |
| --- |
| Click or tap here to enter text. |

## Do you have any other comments or considerations?

|  |
| --- |
| Click or tap here to enter text. |

**For Primary Mentor:**

## Please describe how you will be mentoring the trainee and how you intent to transition them to fully idenpendent practice within the timeframe of the post?

|  |
| --- |
| Click or tap here to enter text. |

# C. Signed Declaration

I confirm that the above learning plan has been agreed by myself as the trainee and the primary mentor

|  |  |  |
| --- | --- | --- |
|  | **Trainee** | **Primary Mentor** |
| Signature: |  |  |
| Name: | Click or tap here to enter text. | Click or tap here to enter text. |
| Date: | Click or tap here to enter text. | Click or tap here to enter text. |