



# **Report of Review of Research Training in Fellowship Training Program**

**August 2018**

## **Acknowledgments**

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## Executive summary

The Research Training Program (RTP) of the College was introduced as a mandatory activity of the Fellowship Training Program in 2012, following approximately 18 months of consultation by a working party of the Education and Training Committee.

The key principles of the RTP were that

- The Research in the RACMA program would be Health Services Research; and
- The Candidates would be expected to complete a project to complete the program.

In keeping with the principles of Curriculum design, graduate and intended learning outcomes were developed, and formative and summative assessment activities were identified. The summative activities were an Oral Presentation of Research Progress and a Written Report of the project in a publication-ready format. Rules for recognition of prior learning and experience in health service research were established and exemptions granted.

Trainees entering Candidacy in 2012 were expected to participate in the program which was designed to take place across three years. By late 2014, Candidates had begun to graduate with completion of the research program as fulfilment of the requirements for participation in the exit College Oral Examination. By late-2017/mid-2018 approximately 30 new Fellows have participated in the program.

During 2015-2017, the Board reviewed the structure of the Curriculum and the Fellowship Training Program and it was endorsed that 'Research Training' would become one of four Domains of learning and assessment.

The Curriculum Domains group the eight RACMA competencies as follows:

- Health System Science – incorporates Medical Expert;
- Medical Management Practice – incorporates Medical Manager, Medical Expert and Communicator;
- Personal and Professional Leadership Development – incorporates Advocate, Collaborator, Professional, Leader and the educative intended learning outcomes (ILOs) of Scholar; and
- Research Training – incorporates the research learning outcomes of the Scholar competency.

In late-2017, the Research Training Committee identified the need to evaluate the Domain's components.

The overall aim of this review was the assessment of the extent to which the Research Training Domain in the Fellowship Training Program was meeting the objectives of the Curriculum and the standards of the Australian Medical Council's accreditation processes.

The Committee undertook a search of historical documentation and its own meeting minutes in early 2018, and conducted formal and informal consultation amongst Candidates and Fellows.

The findings of the Review were that:

- There have been 30 Candidates who have completed the requirements of the RACMA research training program during July 2015 – December 2017.
- All were satisfactory in their oral presentations of their research progress (some re-presented within a few weeks of their initial attempts in the early years).
- All provided satisfactory written reports of their research projects before or within six months of sitting their exit Oral Examinations.
- There have been two publications of new health services research via this process.
  
- Candidate reflections on the conduct of their research projects were uniformly positive about their learnings.
  
- There were several reports from Candidates of administrative inconsistencies:
  - in information on the College website,
  - in guidance in the annual Research Handbook,
  - in the modified programs to be completed by Candidates who had been credit;
  - in timeliness of feedback, and
  - in commentary of assessors.
  
- There was a pervading disappointment noted in assessors' comments about the quality of the research and the research outcomes.

It was concluded that:

- The program processes have led to raised awareness amongst Candidates of the principles of scholarly investigation for health service management.
  
- The intended learning outcomes of the Research Training Domain (role competency of Scholar-Researcher) are being met.
  
- The quality of the implementation of the program requirements could be improved:
  - The timelines for completion of components of the program have been too tight to allow for meaningful research to be conducted by most candidates.
  
  - The perceived emphasis in webinar and handbook information, on qualitative vs quantitative health service research; and on the differences between 'quality improvement' and 'research' activities; has been difficult to interpret by many Candidates and Supervisors.
  
  - Written and verbal communication concerning the business rules for operation of the program have been inconsistent.

It is proposed that from 2019

- the **intended learning outcomes** of the Research Training Domain will continue to be:
  - Acquisition of knowledge of scholarly enquiry; and
  - Satisfactory reporting of the outcomes of a health service research or investigation project.
  
- the **educative activities** of the Research Training Domain will be:
  - Completion of a Master's level course in Research methods, evidence-informed decision-making or epidemiology that incorporates:
    - Education; and
    - Assessed assignments.
  
  - Participation in instructional webinars conducted by the College that highlight topics of interest and provide feedback on proposals suggested by Candidates.
  
  - Consultation with supervisors with research supervision expertise.
  
- the **competency development activity** will be proposal and completion of a substantial evidence-informed project.

Candidates will propose and conduct:

- A curiosity-driven qualitative or quantitative health service research project;  
or
- A systematic literature review (following a standardised protocol);  
or
- A bioethical disputation (following standardised criteria) prompted by a work-related event;  
or
- A substantial quality improvement investigation related to medical management practice or health service provision that is reported in a scholarly format (following standardised criteria)

Further suggestions may be incorporated at the suggestion of the Education and Training Committee or the Curriculum Steering Committee from time to time.

- the **summative assessment activities** of the Domain will continue to be:
  - Oral presentation of the project progress/outcomes;  
and
  - Written report of project outcomes (3,000-5,000-word limit);
  
- Reporting of the project will be accompanied by professional reflection on the research journey.

**It is recommended:**

That the Education and Training Committee adopt these proposals;

That with acceptance of this report and endorsement of its proposals by the Education and Training Committee, the Research Training Committee be responsible for:

- Preparation of a new Research Handbook for 2019;
- Development of new credit application and endorsement processes;
- Oversight of scheduling planning to ensure that existing Candidates are not disadvantaged by the changes;
- Training of Research Assessors in the new format; and
- Planning for communication of the changes.

# 1. Background

## 1.1 Curriculum learning outcomes

In 2011, the College published its Medical Leadership and Management Curriculum and identified eight role competencies adapted from the CanMEDS<sup>1,2</sup> competency framework:

Medical Expert	Medical Manager
Communicator	Scholar
Collaborator	Advocate
Professional	Medical Leader

In the RACMA Curriculum, the **Scholar role competency statement** was: “As doctors, medical administrators demonstrate a lifelong commitment to learning as well as the development and communication of new knowledge through research and investigation in the field of medical management...”

The statement’s four graduate outcomes are:

- The ability to maintain and enhance professional activities through ongoing learning;
- The ability to critically evaluate information for decision making;
- The ability to facilitate learning for all stakeholders; and
- The ability to demonstrate application of research skills to management tasks.

The learning objectives for this fourth research-related graduate outcome are:

- To show evidence of being up-to-date with new developments in appropriate fields of knowledge;
- To describe the principles of research and scholarly inquiry;
- To describe the principles of research ethics;
- To pose scholarly questions;
- To conduct a systematic search for evidence;
- To select and apply appropriate methods to address the question;
- To appropriately disseminate the findings of a study; and
- To describe the application of new knowledge and skills to management tasks.

At the same time, the College had a Research Working Party which was consulting on the development of a program of training in research that would meet the standards of the Australian Medical Council, for the College’s accreditation status.

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<sup>1</sup> The Royal College of Physicians and Surgeons of Canada (2005): The CanMEDs 2005 Physician Competency Framework, Better Standards, Better Physicians, Better Care. (J.R. Frank, Ed).

<sup>2</sup> It is noted that the CanMEDS framework released in 2015 (Frank et al, 2015) details the key elements of “scholar” as (a) Engage in the continuous enhancement of their professional activities through ongoing learning; (b) Teach students, residents, the public and other health care professionals; (c) Integrate best available evidence into practice; and (d) Contribute to the creation and dissemination of knowledge and practices applicable to health. [http://canmeds.royalcollege.ca/uploads/en/framework/CanMEDS%202015%20Framework\\_EN\\_Reduced.pdf](http://canmeds.royalcollege.ca/uploads/en/framework/CanMEDS%202015%20Framework_EN_Reduced.pdf) on 30 Apr 18

There were two key principles in the deliberations of the Working Party:

- **That the program should emphasise health services research; and**
- **That a research project should be completed.**

In 2012, the Research Training Program became an activity in the Fellowship Training Program and Candidates in that year-entry-cohort were the first to be formally assessed on their ability to:

- gain knowledge of research methodology;
- pose a scholarly question concerning health services management;
- conduct a search for information or data;
- develop a health services research proposal (quantitative or qualitative, or both),
- have the proposal assessed for its level of requirement for ethics approval;
- conduct an approved health services research activity;
- analyse the outcomes;
- report the findings; and
- reflect on the implications for health/medical service management.

A Research Implementation Working Party then deliberated on definitions, aims, learning objectives, assessment tasks, credit and timeframes. Iterations of the Research Training Handbook became the route for communication of the expectations and ensuring consistency in the processing of Candidate activities.

## 1.2 Australian Medical Council requirements

The Australian Medical Council standards for Accreditation of Specialist Medical Colleges must be met for RACMA to retain its status as the higher education vocational training organisation whose training program must be completed for specialist registration of medical officers in Medical Administration in Australia and New Zealand. The relevant standard identifying Research is Standard 3 The Specialist Medical Education and Training Framework<sup>3</sup>, in effect from January 2016.

This standard includes the following with respect to research:

*“3.2.2 The curriculum includes the scientific foundations of the specialty to develop skills in evidence-based practice and the scholarly development and maintenance of specialist knowledge.*

*3.2.8 The curriculum includes formal learning about research methodology, critical appraisal of literature, scientific data and evidence-based practice, so that all trainees are research literate. The program encourages trainees to participate in research. Appropriate candidates can enter research training during specialist medical training and receive appropriate credit towards completion of specialist training.”*

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<sup>3</sup> Australian Medical Council (AMC), 2015; Standards for Assessment and Accreditation of Specialist Medical Programs and Professional Development Programs by the Australian Medical Council; AMC LTD

### 1.3 Integrated learning model

In 2017 the Board of RACMA endorsed a proposal to shift the structure of the Fellowship Training model from a stepwise model of learning by progression over several hurdles, to one of integrated learning in four domains<sup>4</sup>:

In the RACMA Fellowship Training Program (FTP) in 2018, the Curriculum domains of learning are:

- Health System Science (HSS), incorporating the role competency of medical expert;
- Medical Management Practice (MMP), incorporating the role competencies of medical manager and communicator;
- Research Training (RT), incorporating the research learning outcomes of the role competency of scholar; and
- Personal and Professional Leadership Development (PPLD), incorporating advocacy, collaborator, professional, leader and educative learning outcomes of the competency of scholar.

The facets of evidence of learning are:

- attainment of a Master's degree in health system management;
- success in a minimum of three years of performance in supervised medical management practice;
- satisfactory completion of the Medical Management Practice Oral Examination;
- the satisfactory completion of a health service research project; and
- development and maintenance of personal and professional leadership attributes.

## 2. Research Training Domain in 2018

With this transition, for 2018 the two key principles for the RTD remained:

- That the program should emphasise health services research; and
- That a research project should be completed.

The **overall aim** of the Research Training Domain (RTD)<sup>5</sup> became:

**To raise Candidate awareness of the knowledge, skills and attitudes required to critically evaluate information for decision making in health service management.**

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<sup>4</sup>Royal Australasian College of Medical Administrators (RACMA), 2017a; Programmatic Learning and Assessment in the Fellowship Training Program; Progress Report September 2017.

<sup>5</sup> Royal Australasian College of Medical Administrators (RACMA), 2017b; Research Training Handbook 2017 v 3.5

The **intended learning outcomes** of the RTD in 2018 are that Candidates will:

- Identify a health services research question relevant to the practice of medical administration;
- Undertake a collation of relevant and current information about that issue;
- Choose an appropriate method for deriving knowledge from study of the question;
- Consider the human research ethics implications of the method;
- Analyse, interpret and discuss the outcomes of the research;
- Draw conclusions and make recommendations relating to the identified outcomes;
- Deliver a formal oral presentation of research progress; and
- Write a 'publication-ready' report/paper on the chosen research activity.

Implicit in these intended outcomes is the concept that 'research' is about gaining knowledge, and that there is a difference between research for knowledge and investigation for quality improvement.

The RTD is governed by the **Research Training Committee**. It is chaired by the Lead Fellow in Research Training, who is a member of the Education and Training Committee, a member of the Curriculum Steering Committee and a member of the Board of Censors.

The Committee members are:

- Lead Fellow in Research Training;
- Dean;
- Fellow/s with academic background or experience;
- Associate Fellow with health service research background;
- Candidate (identified by the Candidate Advisory Committee).

The Domain learning and assessment activities are:

- Demonstration of evidence of learning at Master's level in 'health service research methods' during course of candidacy;
- Attendance at the Introduction to Health Service Evaluation Research webinar;
- Submission of a 'research question' and consideration of potential ethical issues, for formative feedback from Research Assessors, at the end of the first year of Medical Management Practice;
- Completion of a Research Project Proposal, by the beginning of the second year of MMP, for receipt of Research Assessor endorsement;
- Provision of evidence of submission and assessment by an institutional human research ethics committee that ethical issues have been addressed and the project cleared;
- Conduct of research project across second and third year of MMP;
- Satisfactory completion of Oral Presentation of Research Progress, by end second year or beginning third year, and prior to sitting the Oral Examination; and
- Satisfactory completion of a publication-ready written research report, with reflection, prior to sitting the Oral Examination or within six months of completion of MMP time.

### 3. Evaluation of the Research Training Domain

Of the 80 new Fellows who have graduated since end-2014, approximately 30 were required to complete the Research Training activities. It was agreed that it was timely for the Research Training Committee to evaluate the activities of the Domain.

The **goals** of the review were to

- Assess the extent to which Candidates are meeting/have met the learning objectives of the Curriculum relating to research scholarship;
- Assess the extent to which the Fellowship Training Program is meeting the Research standards for Accreditation.

The **methodology** employed by Research Training Committee was one of data gathering and consultation for opinions. Across March-July 2018 the Committee:

- Studied past documentation about the formation of the Domain activities,
- Compared the requirements of other specialist medical colleges with respect to research activities, with those of the RACMA RTD;
- Surveyed current Candidates, new Fellows who have completed their fellowship training since 2014, and Censors who have been involved in assessing the elements of the RTP;
- Developed discussion points and consulted with Candidates and Fellows at face-to-face meetings across June and July 2018; and
- Analysed the outcomes of these activities.

## 4. Comparisons with other Colleges

The activities of specialist medical colleges for their trainees to meet the AMC research standards in their training programs are outlined in Table 1.

**Table 1 Overview of research requirements of Specialist Medical Colleges**

<b>College</b>	<b>Requirement</b>
RACMA	Research methods study, Webinar, Oral Presentation and Written paper
Radiation Oncology	Original research project, Accrual of research points
Clinical radiology	Project 1, submitted by end Year 2: writing a case series, undertaking a clinical audit or completing a critical appraisal of published literature etc Project 2, submitted by end Year 4: peer-reviewed publication, literature review, requires pre-approval
Dermatology	Year 1: completion of an on-line Evidence-based research module Year 3: completion of an approved research project
Pathology	Varies by discipline
Ophthalmology	Publication of research as first author, peer-reviewed oral presentation at relevant scientific meeting, approved period of full-time research, Higher degree by research
Dental surgeons	Pathway 1: Formal research project undertaken as part of postgraduate research qualification Pathway 2: Independent research publication-ready
Emergency Medicine	Research project Approved research coursework Thesis for higher degree
Physicians	Varies by Division and Faculty: Research, audit, systematic review Doctoral degree, Masters by research
Surgeons	Varies by Associations: peer-reviewed oral presentation at a conference, Publication refereed journal, dissertation with critical lit review, period of full-time research, higher degree by research

## 5. Outcomes of internal surveys and consultations

Of the surveys to members, there were 23 replies from current Candidates, 8 from New Fellows and 7 from Research Assessors. (Appendix 1 2018 Evaluation of RACMA Research Training Domain Survey)

The survey and consultation comments from current candidates had the following themes throughout:

- Too hard trying to meet the deadlines before research methods study has been undertaken;
- More process support for candidates needed;
- More structured sessions on a number of topics would be helpful;
- Timeliness of feedback – lack thereof meant that registrar candidates rotated before research conducted, necessitating changes in proposals;
- Lot of time-wasting;
- Doing the Master's study required more than gaining knowledge, many people conducted research activities – why were they not 'credited';
- Didn't understand the advice provided by supervisors and support staff; and
- The relative value of the final paper to the overall objective.

Recently qualified Fellows made similar comments with an additional comment as to why appropriately substantial audit and/or quality assurance projects should not be included in the options for completing the RTP.

The comments from the Censors included questioning whether the current RTD is the most effective and efficient way to meet the standard.

Some suggested questions to be considered were:

- Should the scope of the research project be expanded to include other activities that might fit under the scholarship competency such as systematic literature reviews, substantial audits and some quality improvement activities?
- Is not 'researching' data for a management task such as a quality improvement project or preparation of a strategic plan of greater value to Candidates than investigative research?
- Should there be a more formal arrangement to the monthly telephone conferences around research? This might take the form of Learning Sets with specific topics to be covered and potentially a range of formative assessments either brought to the learning set from the workplace or specifically created.
- Could the Oral Presentation of research progress be in jurisdictions or at other opportunities (annual conference or CPD sessions) rather than at a College organised time in Melbourne alone?
- Could not 'taking responsibility for an agenda for a Human Research Ethics Committee meeting' be an assessable activity?

## 6. Conclusions

The Committee concluded that:

- The program processes have led to raised awareness amongst Candidates of the principles of scholarly investigation for health service management and medical administration.
- The intended learning outcomes of the Domain have been met.
- The quality of the implementation of the program requirements could be improved:
  - The timelines for completion of components of the program have been too tight to allow for meaningful research to be conducted by most candidates.
  - The perceived emphasis in webinar and handbook information, on qualitative vs quantitative health service research; and on the differences between 'quality improvement' and 'research' activities; has been difficult to interpret by many Candidates and Supervisors.
  - Written and verbal communication concerning the business rules for operation of the program have been inconsistent.

## 7. Revisions

For each stage and component of the existing program, the Committee considered its options for improving outcomes.

### 7.1 Required knowledge

The RTD knowledge requirements will continue to include definition of health services research, understanding of quantitative research methods, understanding of qualitative research methods and the principles of research ethics.

The **current program** expects that knowledge acquisition will be assured by completion of a Master's level course in research methodology, evidence-informed decision-making or epidemiology, *at any time before sitting the Oral Examination*.

In the **new program** it will be acknowledged that knowledge acquisition will be assured *and some skill development in literature review and research question development* will be assessed by a Master's level course in research methodology, evidence-informed decision-making or epidemiology that has been completed *before developing the proposal for the project*.

It will be expected that the course will be taken in the first year of candidacy or the beginning of the second year, to allow for learning for proposal development.

## 7.2 Required skill development

The **current program** expects that Candidates will develop, in writing, a proposal for research projects that they are able to lead, or to which they are able to be substantial contributors, in their workplaces. They are expected to submit their proposals for feedback and endorsement by the end of their first year of candidacy or the beginning of the second.

In the **new program** it will be required that in addition to explaining aims, proposed methodology, and ethics clearance options, the proposals will identify realistic timelines and risk management *and* identify the form which the reporting is expected to take.

It will be expected that the proposal will be submitted after completion of the university course, most likely at the end of the first year of candidacy or at the beginning of the second year.

## 7.3 Conduct of a scholarly enquiry

The **current program** expects that Candidates will conduct an agreed health services research project across approximately 12-18 months and that they will report in writing on their progress at the time of completion of their time in Medical Management Practice.

In the **new program** Candidates will have the option to:

- Conduct a health service research activity – qualitative or quantitative;  
or
- Conduct a systematic literature review (following an accepted protocol);  
or
- Conduct the reading and write a bioethical disputation relevant to the workplace (following an accepted protocol);  
or
- Conduct a substantial investigation relevant to a quality improvement question.

It will be expected that they will conduct the project across approximately 12-18 months and that it will be completed prior to written reporting. RTD requirements will be completed within a minimum of three, and maximum of 6 calendar years from commencement of candidacy.

## 7.4 Reporting – Verbal

The **current program** expects an Oral Presentation of research progress to be made, and its conduct be satisfactory, *as a pre-requisite to sitting the Oral Examination*.

In the **new program**, it will be expected that an Oral Presentation be made, either before or after the written presentation; unless the Candidate has had an official exemption granted. It will not be required as a pre-requisite for eligibility to sit the Oral Examination *but will be required for completion of the Domain within the expected maximum time of candidacy*.

## 7.6 Reporting – Written

The **current program** requires a 4,000-10,000-word dissertation to be completed.

The **new program** will require a 3,000-5,000-word publication/presentation-format report.

## 8 Recommendations

It is recommended that the proposals for a revised program for the Research Training Domain be accepted by the Education and Training Committee.

It is recommended that the Research Training Committee then be responsible for:

- Preparation of a new Research Handbook for 2019;
- Development of new credit application and endorsement processes;
- Oversight of scheduling planning to ensure that existing Candidates are not disadvantaged by the changes;
- Training of Research Assessors in the new format; and
- Planning for communication of the changes.

## APPENDIX 1 Evaluation of RACMA Research Training Domain Survey

Survey report - Candidates currently pursuing RTD

The survey on 2018 Evaluation of RACMA Research Training Domain was sent out via Survey Monkey to 98 Candidates who are currently pursuing the Research Training Domain as part of their training requirements for the RACMA Fellowship Training Program and election to Fellowship.

- 23 (23.46%) out of the 98 Candidates responded to the survey.

Q: 1 What is your commencement year of candidacy in the Fellowship Training Program?

1 respondent – 2012; 3 respondents – 2013; 2 respondents – 2014; 5 respondents – 2015; 7 respondents – 2016 and 6 respondents – 2017.

Q:5 Have you been granted credit for any of the above component(s) of the Research Training Program? If yes, please specify:

3 out of 23 respondents answered 'Yes' to this question. They were granted credit for their previously completed Research Paper.

Q:6 If you have completed your project, have you submitted it for publication? If yes, please specify the publication:

1 out of 23 respondents answered 'Yes' to this question. PhD by publication.

Q: 9 Are there any aspects of the Research Training Program that you think could be improved? If yes, please comment:

4 skipped the question; 14 out 19 respondents answered 'Yes' to this question, and provided the following comments:

- Allow a broader area of research including health politics and policy
- Involve a mentor
- There needs to be more flexibility to account for various backgrounds as many trainees are not in registrar positions and thus do not have dedicated research time.
- Timely feedback and communication
- More support
- Better descriptions of what constitutes a PH/HM topic without becoming too clinical in focus.
- Improved methodology & one on one
- Review if conducting an actual project achieves (or necessary to achieve) the learning objectives

- Consideration of automatic RPL for research-based masters and professional experience with HERA/NEAF applications. Closer assistance with the research process at all levels. Closer mentoring in research would be valuable.
- I had RPL and it was very unclear as to how to still meet the requirements of the college
- It should be optional
- It's being requested too soon in the training programme and writing / presenting a project without doing it formally would be adequate for training purposes. Submission to local research takes up their time unnecessarily and the added cost of doing this seems wasteful
- Return of the research proposal to candidates in a timely manner would be appreciated. I have had to commence an entirely new project as my proposal was not returned for approximately three months (with no changes other than a slightly altered literature review scope)

Q:10 Are there any activities that you think should be a component of the Research Training Program?

4 skipped the question; 11 out of 19 respondents answered 'Yes' to this question, and provided the following comments:

- Workshop on qualitative analysis
- As it is so important at least one face to face 'workshop' on preparing a research proposal and more one to one support
- Quick guide to biostatistics (refresher)
- A systematic literature review - a good research tool that can help identify gaps in research
- Maybe another webinar session would be good
- An example NEAF or equivalent that represents a good PH/HM topic
- Critiquing literature
- Writing for publication, how to conduct a literature review.
- Lining this up with Master's work would be more effective, running it separate from post graduate study seemed repetitious
- Better education on the project
- Perhaps just assist an exerting researcher by providing "free" labour would also be experiential learning in the real world and may add some benefit to the community

Q: 11 What are your general comments or feedback on the Research Training Program?

4 skipped the question; 19 respondents answered this question with the following comments:

- It could be better structured to provide some theoretical training on qualitative research as most clinicians have more experience with qualitative research.
- Not all that helpful
- The support we have received is very good. The keenness to review and suggest improvement by Prof Lee is remarkable. Thanks to her.
- Needs closer supervision of projects by supervisors to help candidates
- Significant delay in getting responses / feedback on tasks has delayed some of our projects further. Deadline for submission of research proposal to RACMA was September 2017 but had not received feedback until mid-November (and then only after asking directly), and by that time could not action the project further to submit for ethics applications in 2017. The Summer would have been ideal to get the projects under way, but due to ethics application delay, now need to complete simultaneously as master's modules and other RACMA assignments in the new academic year. On that note, at other times there have been no responses to emailed questions / requests for assistance on project difficulties. Lastly, the 2018 Oral presentations scheduled for the same weekend as the National Trial exam is also definitely not ideal in terms of adequate preparation. Preparing for a presentation which is formally assessed and affects eligibility to sit the final exam may take precedence over preparing for the trial exam itself (which has also been brought forward significantly compared to what was anticipated when we started out). (incidentally this is also why I had every intention of working hard over the summer on the project but had reached a roadblock of delayed feedback.) I fear that having both research presentation and trial exam at the same time in will affect performance in both assessments, not to mention being so close to the annual conference which many of us would have liked to attend.
- The program is well structured and beneficial.
- I submitted my research paper in November and I have not yet received any feedback, nearly 4 months later
- Need a little more direction
- Not sure of relevance
- Good
- The learning objectives need to be reviewed to determine what the expected outcome/s will be and if they are truly relevant to medical administration practice e.g. write and present a research paper (my perspective is that the most important elements are being able to critique/analysis research, extrapolate and apply the evidence, and to at least understand the ethics process). Once reviews, the Research Training Program activities

need to be re-aligned to meet the revised learning objectives. sets/learning to be obtained/achieved.

- The research training program handbook requires a word count on 4000-10,000, whereas most journals will publish 2500-3000 words.
- The teleconference support appears to have been reduced in 2018 with RTP teleconferences now re-starting in August. This is concerning as I will be seeking to do my oral exam in September and it would be good to have a forum to discuss this further.
- I found it onerous, did not contribute to my learning and felt I was ticking boxes. I had RPL, but there was no clarity about what I needed to submit with this
- It has been poorly supported-I really don't understand what I need to do
- Research is valuable and training in such is required for accreditation of training programmes. Participating with existing researchers would be beneficial. Very few clinicians are going on to do research and such a large component of training seems excessive. Time on legal/ managing change and other professionals or disaster management might be more valuable for trainees

## Survey report - New Fellows who completed RTD

The survey on 2018 Evaluation of RACMA Research Training Domain was sent out via Survey Monkey to **21 New Fellows** who have successfully completed the Research Training Domain as part of their training requirements for the RACMA Fellowship Training Program and election to Fellowship.

- **8 (38%)** out of the 21 New Fellows responded to the survey with the following comments:

Q: 1 What is your commencement year of candidacy in the Fellowship Training Program?

1 respondent – 2012; 3 respondents – 2014; 2 respondents – 2015; 1 respondent – 2016 and 1 respondent – 2017.

Q:4 Did you submit your research work for publication? If yes, please specify the publication:

1 out of 8 respondents answered 'Yes' to this question; Emergency Medicine Australia

Q:7 Were you granted credit for any of the above component(s) of the Research Training Program? If yes, provide reasons:

2 out of 8 respondents answered 'Yes' to this question; 1 respondent completed his/her research project through La Trobe University and the other respondent did not provide any comment.

Q:8 Are there any aspects of the Research Training Program that you think could be improved? If yes, how would you improve them?

1 skipped this question; 4 out of 7 respondents answered 'Yes' to this question; and 3 respondents provided the following comments and 1 respondent did not provide any comment:

- Better availability of support for research program
- There needs to be a clearer understanding and communication by the college about how students who complete a university project and paper qualifies for RACMA consideration. If the aim is for high quality research, then it should be via the university pathway as per other study requirements. RACMA also needs to consider how research at university fits into the RACMA schedule since you must complete your course work before undertaking a research program.
- The oral presentation was a great opportunity to demonstrate presentation skills but as hijacked by an inappropriate focus on a rigid framework for delivery

Q: 9 Are there any activities that you think should be a component of the Research Training Program? If yes, please comment:

1 skipped the question; 1 out of 7 respondents answered 'Yes' to this question and provided the following comment:

Instead of RACMA considering the merit of the project, the project should go through the local research committee to look at scientific merit and sound methodology. Doing a HREA and the site-specific process is one thing, but a well-developed idea needs to be at the heart and start of the project. It also means that the person will have local support that understands research and the local process well, rather than relying on supervisors or preceptors who might not have that skill. I still think a link to university is crucial

Q:10 What are your general comments or feedback on the Research Training Program?

1 skipped the question; 7 respondents provided the following comments:

- Excellent guidance and support from RACMA research lead made completing this requirement easier
- It was a lot of hard work!
- The program needs more formal support structures during its entirety.
- I think the college need to honestly consider audit and quality assurance projects fulfilling this requirement. This is an expectation of our college from a CPD perspective and is what the majority of research that administrators do and will look over. Doing a major project in a short period of time isn't adding to the body of knowledge in our area because by the time you need to pick a project you don't know enough about what will make a difference or not. A good quality assurance or audit may actually lead to some well-developed projects and therefore contribute more. Forcing someone who isn't research savvy to do poor quality research benefits no one.
- Research governance is important but the RTP took up far too much of the curriculum time for its delivered value
- I did not participate through the routine RTP. I still advise candidate to do it through the university
- Very inconsistent messaging given to candidates from the National Office around the process & what exactly are the deliverables. Lot of stress for candidates because of this. Definite opportunity area for significant improvements

## Survey report - RTD Assessors

The survey on 2018 Evaluation of RACMA Research Training Domain was sent out via Survey Monkey to **11 RTD Assessors** who have been assessing written tasks and/or activities in the Research Training Domain.

- **7 (63.63%)** out of the 11 RTD Assessors responded to the survey with the following comments:

Q:5 Are there any aspects of the Research Training Program that you think could be improved? If yes, how would you improve them?

2 skipped the question; 2 respondents answered 'Yes' to this question, and provided the following comments:

- Not certain the final assessment (written paper) is essential in terms of the aims of the program. Are there're other ways to do this?
- The clarity with respect to the oral presentation. This may have been improved last year as I was not able to participate during 2017 BUT given my experiences in 2016 the task completion for the oral presentation was confused between the communication aspects and the research aspects.

Q:7 What are your general comments or feedback on the Research Training Program?

3 skipped the question; 4 respondents answered this question with the following comments:

- Needs to focus on the objectives of the AMC standards and ensure the most effective and efficient approach is taken
- Not clear that all candidates have a good understanding of identifying limitations in conclusions
- I think it is a good program. However, trainees may not be aware of the implications for future work, and how people can incorporate research with clinical activity. An aspect that focuses on governance issues and feasibility may be relevant.
- Generally good and valuable for candidates