

## **Private Infrastructure Clinical Supervision (PICS) Allowance**

### **Management Guidelines**

#### **Aim of the Project**

The aim of the PICS Allowance is to support delivery of the Specialist Training Program (STP) in private sector settings.

#### **Program Outcomes**

Through these activities it is expected the following outcomes will be achieved:

- increased capacity in the private sector to participate in the Commonwealth's STP;
- increased support for clinical supervision for all private sector STP training posts;
- better infrastructure for training in STP private sector posts;
- better trained specialists with education that matches the nature of demand and reflects the way health services are delivered;

#### **Allocated Funding**

Funding for PICS supervision and infrastructure is up to \$30,000 (GST exclusive) per FTE per annum, pro rata, in the private sector. Eligible training settings are able to use the allowance flexibly for either infrastructure or supervision costs. This must ensure settings provide appropriate supervision of their STP trainees/registrars in accordance with the accreditation standards set by RACMA.

The training setting must submit to RACMA an Activity Work Plan detailing how it intends to expend the PICS allowance (either as infrastructure or supervision or both). A reporting template will be provided. Upon acceptance of this report, the training setting can proceed with the Activity.

Once the Activity period has ended, training settings will be required to report on the outcomes of the Activity. Detailed expenditure receipts are not required for the report, however, RACMA must be satisfied that Activities are delivered as agreed.

In cases where a training setting has more than one STP training position, the PICS allowance may be aggregated and used across the facility for the benefit of the whole training cohort. The allowance should not be diverted to support other settings, for example where a provider operates multiple hospitals. For training networks, the allowance should be shared proportionally across each training site.

#### **Infrastructure allowance**

The infrastructure allowance is attached to the training site, not the trainee or the supervisor, and is linked to specific STP training positions.

Investment in facilities if the Activity is an infrastructure project, must not be to the detriment of the delivery of direct education and training support to STP registrars. This means the clinical supervision allowance should not be reduced in order to deliver infrastructure, if this is going to have a negative impact on resources for direct supervision.

Should RACMA have concerns in this regard, the college may direct the training setting to reduce its expenditure on the infrastructure allowance and may consult with the Department of Health before finalising its position on these matters.

### **Eligible Infrastructure Activities**

Eligible infrastructure include:

- training room outfitting, including purchasing specific training equipment such as microscopes for trainees and training simulation equipment;
- minor renovation of existing facilities to make space within the training setting suitable for use in registrar training;
- videoconferencing facilities;
- investments in on-line educational training software;
- overhead infrastructure in general i.e. office asset equipment purchases such as computers; phones; desks; IT equipment and associated facilities that will be used by trainees and their supervisors.

Resources which may be required for the activity of clinical training which are excluded, i.e., **not eligible**, for funding support are:

- the use of infrastructure funding to contribute to operational expenses such as salaries, training courses or ongoing building maintenance costs;
- the purchase of office consumables and other recurrent items such as stationery and printer cartridges, recurrent telephone line and rental costs, including phone call costs, as well as uniforms and cleaning products;
- major capital works projects involving the construction of new facilities, including as a funding contribution towards the total cost of larger capital projects, or as a funding contribution towards the purchase of substantial medical equipment used in service delivery rather than specifically for training;
- hospital consumables used in the treatment of patients;
- recreational equipment; and
- operational expenditure for initial training post setup, including any costs associated with the process of gaining accreditation for training.

### **Clinical supervision**

The clinical supervision allowance is linked to a specific STP training position and to support the delivery of education and training. It does not represent a direct financial benefit to the supporting hospital provider. Training settings must be able to demonstrate that clinical supervision funding is allocated towards maintaining and/or enhancing the delivery of appropriate supervision to STP trainees undertaking placements.

The supervision allowance may be aggregated within training settings and across training networks in the same way as the infrastructure allowance. This includes aggregating funding where settings and networks support multiple STP trainees.

Under STP, eligible supervision activities include:

- **Administrative support**
  - Support for activities which promote and maintain good work standards, coordinate practices and policies which lead to an efficient and smooth running training experience for STP participants;

- Educational support
  - Activities which help coordinate the educational development of trainees to ensure delivery of a training experience that contributes towards fellowship training of the relevant college;
- Trainee employment support
  - Effective support projects to ensure the trainee's entitlements are met;
- Networked supervision support
  - Development of networks of training which facilitate seamless transition between training sites that ensures that trainees receive high quality, appropriate training that coordinates supervision across the network; and
- Supervisor development training support
  - Training programs aimed at enhancing supervisors' leadership and management skills.

### **Use of funds under Contracts with Settings**

The Participant will use funds under contracts with settings in the following manner:

- If a post is not filled to the full FTE originally approved under the STP only a pro-rata amount of the private infrastructure and clinical supervision allowance can be made.
- If the contracting entity has delivered, or indicates that it is proposing to deliver, substantially different PICS Activities than was agreed, RACMA will be responsible for approving this change to the Activity; and seeking the advice of the Department on how these cases will be addressed if a dispute arises;
- Funding is conditional on FTE working and training in the private setting.

### **Definitions**

#### **Infrastructure**

Resources which provide for, or enhance, the training experience delivered by the STP training position, attached to the training setting.

#### **Clinical supervision**

Direct or first- hand observation of teaching and involves face to face and other associated interactions between the trainee and the supervisor. Generally supervision will be provided by a senior practitioner (i.e. a college fellow). The role of the supervisor is to ensure that trainees achieve the established goals or tasks contained in their training curriculum.

#### **The funds must be used for:**

- supervisor salary only
- coordination of education activities that contribute towards Fellowship
- training programs that enhance supervisors' management skills
- CPD activities related to the supervision of the training post