

**Document type:** Guide  
**Document category:** Training  
**Date established:** 2017



**College of Intensive Care Medicine  
of Australia and New Zealand**

**Guide to Recognition of Prior Learning**

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## About this Guide

This document outlines the information required for Censors when giving recognition of prior learning (RPL). RPL is applied during the Censor's review of a trainee's file. This review can occur during the Censor's initial assessment (first assessment letter) or when a trainee submits a request to have their remaining training requirements reviewed.

Information contained within the guide is correct at the time of being published and is applicable to all trainees (pre-2014 curriculum and current curriculum).

The College is mindful of the changing environment within each discipline of medicine and will endeavour to update this document and any internal RPL processes accordingly.

This guide should be read in conjunction with the relevant Regulations and Policy Documents available on the website.

This RPL guide has been designed to:

- Assist Censors when completing assessments for new trainees;
- Provide information to current and prospective trainees on what training and assessments may be accredited;
- Provide clarification on what to accredit when a trainee submits a Censor request.

Conventions used throughout this Guide



Suggested resource



Reflection point



Important note

## Applying RPL

Applying recognition of prior learning is the process of evaluating previous training, qualifications and experience undertaken prior to a trainee's registration for the CICM training program. Depending on the number of years spent in the medical workforce prior to joining the College, trainees will usually be credited with some form of RPL.

Every assessment is individual based and RPL cannot always be given to all training, qualifications and experience a trainee may have.

The following areas are eligible for RPL:

1. Anaesthesia;
2. Medicine (acute and longitudinal);
3. Elective – various disciplines;
4. Paediatric exposure (General pathway);
5. Rural exposure;
6. Examinations;
7. Research;
8. Courses.

## 1. Anaesthesia experience (General and Paediatric pathway)

This requirement involves acquiring knowledge and skills in those aspects of anaesthesia and peri-operative management that are relevant to the practice of an intensive care specialist. Trainees on the paediatric pathway may undertake this requirement in adult or paediatric anaesthesia. At least 6 months must be undertaken in a registrar position that is approved by the College.

The Censor will consider anaesthetic training retrospectively for time spent at a site that:

- i) Holds accreditation by ANZCA for anaesthetic training;
- ii) Has been approved by the CICM Hospital Accreditation Committee (HAC) only for the anaesthetic component of intensive care training.

The College recognises that anaesthetic training may take place at sites that do not come under either of the above categories, for example, in overseas jurisdictions not generally included in Australasian college accreditation processes. In such cases the Censor will make an assessment based on the submitted documentation in conjunction with the Objectives of Training and the level of supervision available at the site.



For further information please refer to [Objectives of Training for the Anaesthesia Term](#) available in the Training Program Resources section of the College website.

## 2. Medicine experience (General and Paediatric pathway)

This requirement should be attached to a clinical internal medicine unit. This precludes predominately research, clinical or laboratory, and interventional positions. Paediatric trainees **must** complete their medicine requirements in approved paediatric medicine posts.

### Acute Medicine

All hospital emergency departments which are accredited by the Australasian College for Emergency Medicine (ACEM) are approved as suitable for CICM trainees to undertake their acute medicine training time. Some acute care settings accredited by the Royal Australasian College of Physicians (RACP) may also be considered suitable for the six months of acute medicine training. In these cases, the Censor will make a decision based on the position description matching the requirements of the Objectives of Training.

Trainees on the paediatric pathway can satisfy the objectives of this component by completing either 6 months of paediatric Acute Care Medicine (in a role equivalent to an RACP accredited position), or paediatric Emergency Medicine (in a role equivalent to a ACEM accredited position). Trainees may also undertake paediatric retrieval training to fulfil this requirement.

Retrieval rotations must be prospectively approved by the Censor.

## Longitudinal Care

Six (6) months of medicine must involve responsibility for longitudinal care of medical patients. In order to satisfy the requirements, the position must be accredited by the RACP for either basic physician training or for one of the RACP advanced vocational training streams that satisfy the Objectives of Training for longitudinal care of patients.

**Not all** rotations approved by the RACP are considered acceptable to fulfil the medicine requirements. A list of disciplines acceptable for medicine has been created to guide Censors in their accreditation of medicine terms for trainees on both pathways:

- Cardiology
- Community Child Health
- Endocrinology
- Gastroenterology
- General Medicine
- Geriatric Medicine
- Haematology
- Hepatobiliary
- Immunology & Allergy
- Infectious Diseases
- Medical Oncology
- Nephrology
- Neurology
- Paediatric Cardiology
- Paediatric Endocrinology
- Paediatric Gastroenterology
- Paediatric General Medicine
- Paediatric Haematology
- Paediatric Immunology & Allergy
- Paediatric Infectious Diseases
- Paediatric Medical Oncology
- Paediatric Nephrology
- Paediatric Neurology
- Paediatric Palliative Care
- Paediatric Renal Medicine
- Paediatric Respiratory & Sleep Medicine\*
- Paediatric Rheumatology
- Paediatric Thoracic Medicine
- Paediatric Toxicology
- Palliative Care
- Renal Medicine
- Respiratory & Sleep Medicine\*
- Rheumatology
- Thoracic Medicine
- Toxicology

\*A combination of Respiratory & Sleep Medicine is acceptable however sleep medicine itself is not suitable.

Please note the following rotations are not considered suitable for longitudinal care:

- Hyperbaric Medicine – May be used for Elective training
- High Dependency Unit
- Night relieving

Trainees may submit a request for approval of training in a position that is not accredited by either RACP or ACEM. The Censor will consider such requests on an individual basis and may grant approval, for example if the position has clear educational merit, fulfils the requirements of the Objectives of Training and provides consistent supervision from appropriately qualified specialists (e.g. FRACP).

## Relieving Terms

Relieving terms will only be accredited if the relief blocks are of one month or more when done in a medical subspecialty rotation of at least 12 weeks in duration. Night relief rotations will not be accredited.



Trainees who registered with the College **before January 1<sup>st</sup>, 2014** may be eligible to spend up to 6 months of their medicine requirements in Acute Care Medicine positions.



For further information please refer to [Objectives of Training for the Medical Term](#) available in the Training Program Resources section of the College website.

### 3. Elective requirements (General and Paediatric pathway)

In most cases, elective training can be retrospectively accredited prior to registering with the College. Elective training may be in one of the following disciplines:

- Intensive care medicine
- Clinical anaesthesia
- Longitudinal care medicine
- Specialist medicine
- Emergency medicine
- Surgery
- Pain medicine
- Research
- Other disciplines related to intensive care medicine

Please note the following:

<b>Intensive care in non-accredited units</b>	May be suitable to fulfil elective training requirements.
<b>Core, Conditional Core or Transition</b>	No RPL granted. All <b>must be</b> prospectively approved.
<b>NICU</b>	Neonatal Intensive Care (NICU) training may be accepted towards paediatric medicine and paediatric exposure requirements.
<b>General Practice</b>	GP rotations are classified as <b>non-training time</b> , however practice in a rural environment would satisfy the rural exposure requirements.
<b>Stand-alone High Dependency Unit (HDU)</b>	HDU may be accredited for Elective training.
<b>Locum</b>	Due to the variety and absence of a designated supervisor, Locum training can be accredited for Elective training only.

#### 4. Paediatric exposure (General pathway)



The following information is applicable to trainees on the General pathway who registered after January 1<sup>st</sup> 2014.

The following rotations (completed prospectively or retrospectively) will be acceptable for fulfilling the paediatric exposure requirement;

Discipline	College	Accreditation level	Level	Minimum period required
Paediatrics emergency departments	ACEM	12 and 24 months	RMO+	3 months
Paediatrics emergency departments	ACEM	6 months	RMO+	6 months
Mixed emergency department with minimum number of paediatric presentations as per ACEM Paediatric Requirements	ACEM	Up to 24 months	RMO+	6 months + log Book (min. 400 cases)
Paediatric anaesthesia as per ANZCA Paediatric Requirements	ANZCA	Up to 12 months	RMO+	3 months
Intensive care (with paediatric admissions)	CICM	>100 admissions per year	RMO+	6 months
Intensive care (with paediatric admissions)	CICM	>50 admissions per year	RMO+	12 months
Neonatal Medicine	RACP	3 and 6 month blocks	RMO+	6 months
Paediatric intensive care	CICM	Core training	RMO+	3 months
Paediatric intensive care	CICM	Foundation training	RMO+	6 months
Paediatric medicine as per RACP Paediatric Requirements	RACP	Level 3 or 2 teaching hospital or 'secondment site' for the purposes of Basic Paediatric Training	RMO+	3 months
Paediatric Surgery	RACS	3 and 6 months	RMO+	6 months



The Censor may also make an assessment based on patient numbers, case mix and supervision.



## 5. Rural exposure (General and Paediatric pathways)



The following information is applicable to trainees who registered after January 1<sup>st</sup> 2014.

Trainees must spend at least 3 months in a rural hospital in any approved discipline. This **must** fulfil the requirements outlined in the [Rural Term Guidelines](#) on the CICM website. For trainees residing in Hong Kong and Singapore, the Censor will assess the suitability of the post.

Trainees should also contact the College at any time if they wish to discuss the suitability of a rotation towards their rural requirements.



Trainees are eligible to count General Practice training and internship training if the training post was in a rural setting. Small rural rotations may also be counted if the total training time equates to 3 months.

## 6. Examinations

A trainee's eligibility for receiving an exemption from the CICM First Part Examination is individually assessed and is also dependant on the date of registration.

Trainees undertaking a training program with another College and who have completed the First or Primary component of that program may be granted conditional entry into CICM Core Training. Conditional Core Training will only be ratified upon completion of the other College's training program including award of Fellowship.

Should trainees withdraw from their training program with another College, ALL conditionally approved core training will then be classified as deferred training and they will be required to complete the CICM First Part Examination.

### What cannot be considered for an exemption

- European Diploma Intensive Care (EDIC)
- Fellowship Royal Australian and New Zealand College of Radiologists (FRANZCR)
- Fellowship Royal Australian and New Zealand College of Psychiatrists (FRANZCP)
- Indian Diploma Critical Care Medicine (IDCCM)
- Indian MD in Anaesthesia or Medicine
- Membership of the Royal College of Physicians (MRCP UK)

## What can be considered for an exemption

Trainees registered prior to 1<sup>st</sup> January 2014

Training body	Criteria
Australasian College for Emergency Medicine (ACEM)	Completion of all components of the primary examination (or equivalent)
Australian and New Zealand College of Anaesthetists (ANZCA)	
Royal Australasian College of Physicians (RACP)	
Royal Australasian College of Surgeons (RACS)	
Other overseas Colleges	Completion of all equivalent training and examination requirements

Trainees registered after to 1<sup>st</sup> January 2014

Training body	Criteria
Australasian College for Emergency Medicine (ACEM)	Completion of all components of the Fellowship
Australian and New Zealand College of Anaesthetists (ANZCA)	
Royal Australasian College of Physicians (RACP)	
Royal Australasian College of Surgeons (RACS)	

Trainees who have completed a training program listed below that is equivalent to the ACEM, ANZCA or RACP Fellowship may be considered for exemption upon completion of all training and examination requirements:

- Academy of Medicine (in medicine, emergency medicine or anaesthesia) – Singapore;
- College of Anaesthetists – South Africa;
- Hong Kong Academy of Medicine;
- Royal College of Anaesthetists (FRCA) – United Kingdom;
- Royal College of Emergency Medicine (FCEM) – United Kingdom;
- Royal College of Physicians (FRCP) – United Kingdom;
- Royal College of Physicians and Surgeons of Canada;
- Royal College of Physicians of Canada;
- Royal College of Surgeons of Canada;
- Royal Colleges of Surgeons (FRCS) – United Kingdom;
- The College of Anaesthetists (FCAI) – Ireland.

## 7. Research

Trainees are expected to complete a Formal Project and if a request is made to have an existing thesis or research paper considered for RPL, the Censor is unable to approve the equivalence without the paper being submitted and approved by the CICM Formal Project Panel.



For further information please visit the [Formal Project](#) section of the CICM website

## 8. Courses



The following information is applicable to trainees who registered after January 1<sup>st</sup> 2014.

Trainees are eligible to have the following face to face courses retrospectively accredited;

- Introductory Course in Intensive Care Medicine;
- Advanced Life Support;
- Communication Skills (run by CICM);
- Difficult Airways Management;
- Introduction Echocardiography and Ultrasound;
- Medical ADAPT / Family Donation Conversation Workshop

If the College receive a request to have a course not listed above considered equivalent, the Censor will assess the available information (including the course content) for equivalence. The Management Skills Course must be completed during the Transition Year and therefore, cannot be retrospectively accredited.

Trainees who registered prior to 1<sup>st</sup> January 2014 are only required to complete the Medical ADAPT/Family Donation Conversation Workshop and may apply for RPL.



For a list of acceptable face to face courses please visit the [Training Courses](#) section of the CICM website

## Minimum duration of training terms

The minimum duration of accredited training (for anaesthesia, medicine, non-core ICU, paediatric and rural exposure) is 10 weeks. Over the course of one year, 10 week terms in a single discipline may be accredited as 3 months of training. If there were multiple disciplines during the term, the total must be counted in weeks.

In some instances, 8 week terms may be accredited if there are multiple terms in the same discipline in the same hospital campus. Eight (8) week terms are only to be accredited if there are multiple terms in the same discipline. The trainee's whole 12 months must also be reviewed.

### 10-week term example

Rotation	Date
Anaesthesia	01/02/2015 – 10/04/2015
Emergency Medicine	11/04/2015 – 20/06/2015
Anaesthesia	21/06/2015 – 30/08/2015
Orthopaedics	31/08/2015 – 9/11/2015
Emergency Medicine	10/11/2015 – 1/02/2016

Depending on the individual set of circumstances, the Censor would likely approve this as 6 months of Anaesthesia and 6 months of Emergency Medicine.



If multiple 10 week terms are approved, no more than 12 months can be accredited for that training year.

### 8-week term example

Rotation	Date
Anaesthesia	01/02/2015 – 01/04/2015
Geriatric Medicine	02/04/2015 – 01/06/2015
Anaesthesia	02/06/2015 – 03/08/2015
Relief	04/08/2015 – 01/10/2015
Cardiology	02/10/2015 – 01/12/2015
Anaesthesia	02/12/2015 – 01/02/2016

Depending on the individual the Censor would likely approve this as 6 months of anaesthesia and 3 months of Medicine.

The remaining training may fall under Elective however it would depend on what other training had been approved for this trainee.

## Part time training

The College allows trainees to undertake part time training. Part-time training requires a commitment to both in-hours and out-of-hours duties. These duties must be assigned on a pro rata basis and must comprise a minimum of 0.4 of the commitment of a full-time trainee.

Trainees are encouraged to contact the College at any time to discuss the suitability of a part time rotation.

*Published: 2017*

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