
TEACHING PRACTICE APPLICATION FORM

Background

In-practice learning, where a trainee works under supervision in a team-based environment within a practice, is the foundation on which general practice based training is built. A trainee's success and the likelihood of them continuing with a career in general practice hinges on their in-practice learning experience. **The Standards for Teaching Practices are provided on the College website** [\[http://www.rnzcgp.org.nz/teaching-standards/\]](http://www.rnzcgp.org.nz/teaching-standards/).

The College needs to understand the capacity and capacity within your practice for the training. This application form focuses on the **capacity** aspect of your application. A practice's **capability** to provide a successful in-practice learning environment is determined using a practice assessment visit.

Further information regarding the application process for approval to become a teaching practice can be found on the College website. Queries should be directed GPEP1@rnzcgp.org.nz

Application form

This application form consists of three parts. Please ensure all sections within the form are completed. If you require additional space, please attach additional separate sheets, and be sure to include your practice's name is on the top of each additional page.

Application forms should be emailed to GPEP1@rnzcgp.org.nz

1 Application information

This section provides the College with information about your application.

1.1 Key Contact for application

Please provide the following information for the key contract for this application:

Name	
Job description	
Practice	
Telephone number	
email	

1.2 Group response

Is your response from:

- a single practice
- a group of practices

1.3 Current GPEP teaching practice

Is your practice, or any of the practices within your group, currently a GPEP teaching practice?

- Yes No

2 Number and levels of trainees

2.1 Number and level of trainees

- Yes - using the current one-on-one training method I can have a registrar for:
 First Attachment Second Attachment Both Attachments

- Yes - using the new model of training approach

If you have indicated the blended approach,, please outline the number and level of trainees you believe your practice(s) would have capacity to host.

Position	Number	Supervisor/teacher resource likely to be assigned
GPEP year 1 registrar		
GPEP years 2/3 registrar		
PGY2+ interns (PGGP)		
Undergraduate medical students		

2.2 Full time or part time trainees

Would you prefer trainees who are:

- Full time Part time Either

2.3 Blended learning in your practice(s)

Outline how the learning for the mix of trainees noted above would be undertaken in your practice(s). How would group based learning would occur, while ensuring individual learning needs are being met.

2.4 Barriers limiting numbers and/or levels of trainees

Outline any barriers within your practice(s) which may be limiting the number and/or level of trainees your practice(s) would have capacity to host.

Please note, there is no requirement for a trainee to have a consultation room for their sole use.

3 Other requirements

3.1 Approved teacher

Does your practice(s) have either:

- a College approved teacher on site

Name: _____

- a College fellow who is willing to become an approved teacher

Name: _____

3.2 Access to facilities and equipment

- This practice(s) has physical rooms, other facilities and equipment that can be utilised to host trainees, including consultation rooms, study space, internet access, recording equipment, emergency equipment, Otoscopes and Ophthalmoscopes.

Please note: trainees do not require a consultation room for their sole use, rather they require access to a suitable room when they are consulting with patients and this can be shared with other doctors.

3.3 Access for visiting Medical Educators

- This practice(s) are willing to enter into a Memorandum of Understanding” with the College to ensure that visiting Medical Educators are given access to the practice during in practice visits. This includes ‘sitting in’ on consultations, access to patient records and access to practice rooms and facilities if required.

4 Practice profile

This section provides the College with background information regarding the size and operational approach of your practice(s). The information provides context for the College when considering the most appropriate number and mix of trainees for your practice(s).

If your application is from a group of practices, please ensure **each individual practice** provides the following information.

4.1 Practice Contact details

Please provide the contact details for your practice including:

Name of practice	
Physical address	
Postal address (if different from above)	
Telephone	
Fax	
Email	
Website	
Associated PHO	

4.2 People working in your practice

Please outline who is working in your practice? Include the following:

Position	Number
GPs	
Locums	
Practice nurses	
Practice manager	
Administration staff	
Other	

4.3 Trainees present in your practice

Note the numbers of trainees who have been present in your practice during the past 24 months?

Trainee	Number
GPEP year 1 registrar	
GPEP year 2/3 registrar	
PGY2+ (PGGP)	
Trainee interns	
Undergraduate medical students	
Physical assistants	
Nurses	
Pharmacy students	
others	

4.4 Profile of enrolled patients

Please provide a description of the patient population of your practice. Please include:

- Total number of patients enrolled
- Gender ratio¹
- Ethnicity ratios
- Age ratios (use bands of 10 years)
- Socio-economic statuses

4.5 After-hours services

Does the practice provide an after-hours service?

¹ Patient ethnicity data should be collected, recorded and audited in accordance with *Aiming for Excellence* standards.

If so, does the practice:

- run its own after hours
- rosters after hours care with other practices
- a member of an after-hours centre
- use another approach, if so describe.

4.6 Patient consultation approach

Describe your practice's patient consultation approach, noting the following:

Number of consulting rooms	
The appointment system used	
If "walk-in" appointments are accepted	
The length of scheduled appointments	
The name of the electronic patient management system used	

5 What next

On submission of this application form, College staff will review our application and determine if the teaching practice meets the required standards. If so, then a practice visit will be arranged.

The practice assessment visit focuses on a practice's **capability** to provide a successful in-practice learning environment by adhering to the College's teaching practice standards. Guidelines for the practice assessment visit are provided on the College website.