Fractional (i.e. part-time) training in the FRANZCOG Training Program, whether at Core or Advanced level, should meet the following criteria:

1.1. Credited Time for Fractional/Part-time Training

**Definition:** For the purposes of credited time, the College defines fractional/part-time training as any training undertaken between 0.5 and full-time training (1.0) at the relevant site for the relevant period of training.

**Minimum credited time:** Credit will only be given for fractional/part-time training per six-month block of not less than ten (10) weeks FTE, irrespective of the number of training sites at which the relevant training block was located.

**Maximum limits for training time:** Trainees undertaking fractional training must remain within the maximum limits for time in training allowed under RANZCOG regulations for completion of all Core and Advanced training and assessment requirements. Trainees who commenced training as from December 2013 must complete Core training within six (6) years of time in training from the commencement of Core training; they must complete Advanced training within three (3) years of time in training from the commencement of Advanced training. Trainees who commenced training prior to December 2013 must complete Core Training requirements within eight (8) years of commencing the FRANZCOG program and complete both Core and Advanced training within eleven (11) years of commencing the FRANZCOG program.

(Note: Time in training is the aggregate of all time in the relevant component of the FRANZCOG Training Program. This includes standard leave but not time taken as approved extended leave or approved research leave as part of the ‘Academic Stream’.

1.2. Approval of Fractional/Part-time Training

**Approval by Regional TAC Chair:** All fractional training must be prospectively approved by the Chair of the relevant regional Training Accreditation Committee (TAC) and by the employing hospital. For the purposes of seeking the approval of the relevant TAC Chair, the trainee must submit a prospective approval of training form via the relevant RANZCOG Regional Office.

**Right of Veto:** The Chair of the relevant regional Training Accreditation Committee may veto a request from a trainee to undertake fractional training if he/she has valid grounds for believing it is not in the best interests of the trainee, taking into account both the trainee’s particular training needs and performance/progress to date.

**First Year Must be Full-time:** Fractional training may only be approved for Years 2 – 6 of the FRANZCOG Training Program. Year 1 of Core Training must be undertaken on a full-time continuous basis at the trainee’s home or base hospital.

**Extended Leave:** As is the case for full-time trainees, fractional/part-time trainees may interrupt their training to take extended leave of absence from the training program for a maximum of 104 weeks. But only 52 weeks’ extended leave can be approved at any one time. All extended leave must be prospectively approved.
1.3. **Content of Fractional/Part-time Training**

Trainees undertaking such training are required to meet all the assessment requirements relevant to their year level as prescribed in RANZCOG regulations B1.3/C1.3 (Satisfactory Completion of the FRANZCOG Training Program), including the required three-monthly formative appraisals and six-monthly summative assessments.

Although the number of training hours are necessarily reduced, trainees undertaking fractional training are still expected to participate in the same areas of training as their full-time colleagues. Depending on the level of hospital/s at which the fractional training is being undertaken, this includes the following:

- Obstetrics (both high-risk and low-risk);
- General gynaecological surgery (including major procedures as the primary operator);
- Caesarean section list;
- Colposcopy;
- Antenatal clinics;
- Gynaecological clinics;
- Pre-admission clinics;
- Antenatal, postnatal and gynaecology ward rounds;
- Ultrasound training sessions;
- Attendance at birthing suite handovers;
- Attendance at formal in-hospital education sessions organised for the registrars, including giving presentations on a rotational basis;
- Attendance at other educational opportunities e.g. perinatal, neonatal and maternal morbidity/mortality meetings, combined case review meetings, CTG audit meetings.
- Some involvement in the continuity of care from admission to discharge (where practicable);
- Available subspecialty opportunities (e.g. urogynaecology, gynaecological oncology; reproductive endocrinology and infertility).

In the event that a trainee undertaking fractional training is experiencing difficulty in accessing all the available training and teaching opportunities at the relevant site/s, it is their responsibility to discuss these difficulties with their Training Supervisor so that they can be rostered appropriately to ensure fractional training arrangements do not adversely impact on their progress.