



RANZCR acknowledges the Traditional Owners of Country throughout Australia. We recognise the continuing connection of Aboriginal and Torres Strait Islander people to the sky, lands, waters and culture and we pay our respect to their Elders past, and present and emerging.

RANZCR acknowledges Māori as tangata whenua and Treaty of Waitangi partners in Aotearoa New Zealand.



WELCOME

- Type any queries you have into 'Questions'
- Queries will be read out and answered
- Queries will also contribute to a series of 'Frequently Asked Questions'
- If you think of any queries after the webinar, please email.

OVERVIEW

This webinar session will cover:

Curriculum Learning Outcomes

The Training Handbook

Training Program Requirements

Structured Learning Experiences

Work-Based Assessments

Research & Examinations

Monitoring and Review

Trainees Requiring Additional Support

Progression (briefly)

TRAINING PROGRAM 2022 WHY THE CHANGE?

- ACER-Prideaux Review evaluation of the training program identified areas to improve
- Update the structure of the training program in line with current best practice in medical education
 - Competency based approach
 - More direct observation of trainees and feedback
 - Progression through stages of training rather than years
 - A programmatic approach to assessment
- Curriculum required updating to reflect contemporary practice

All trainees have transitioned to the new training program.

OVERVIEW OF THE TRAINING PROGRAM

- * Designed as a 5-year program over 3 phases
- * Trainees progress between phases as competencies are achieved

Phase 1

- Must complete by 24 months training time
- Cannot progress to Phase 2 before 12 months training time

Local Governance Committee to determine trainee progression to Phase 2

Phase 2

- Must complete by 60 months training time
- Cannot progress to Phase 3 before 48 months training time

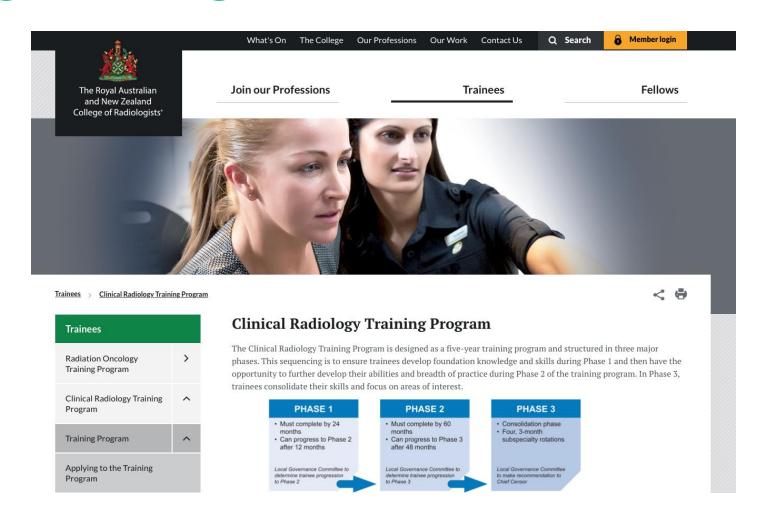
Local Governance Committee to determine trainee progression to Phase 3

Phase 3

- Consolidation phase
- 4 x 3 month subspecialty rotations

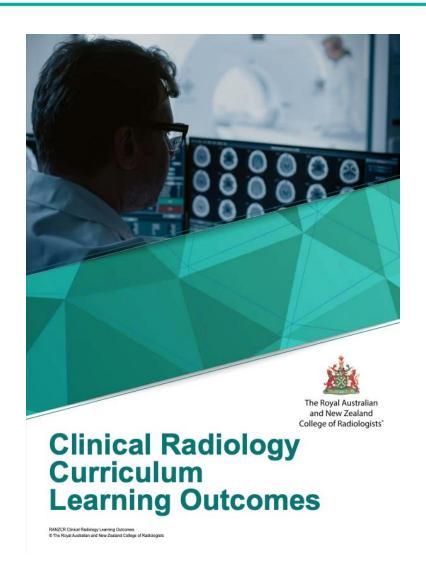
Local Governance Committee to make recommendation to Chief Censor

COLLEGE WEBSITE



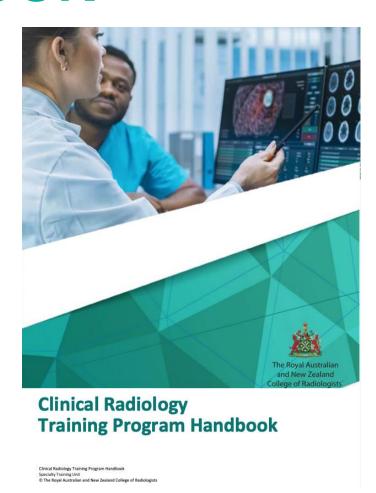
LEARNING OUTCOMES

- The Curriculum Learning Outcomes document articulates what is expected of a trainee on their FIRST DAY of specialist practice
- The Learning Outcomes guide teaching and learning, and assessment in the program
- Trainees are eligible for Fellowship when they have completed the training requirements and demonstrated competence



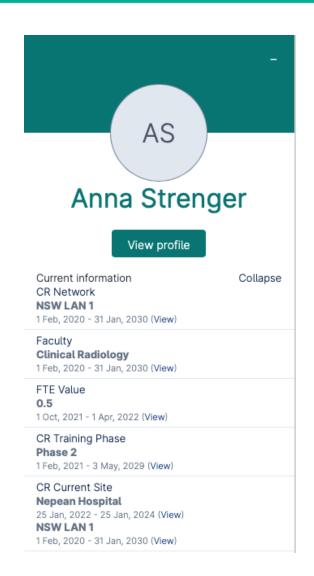
TRAINING PROGRAM HANDBOOK

- The handbook is a comprehensive guide to all elements of the enhanced program
- One resource which provides information about:
 - Training program requirements
 - Possible variations to training
 - Progressing through the program
 - Additional trainee support
- Links to updated policies and guides
- Links to further resources on RANZCR website



ePORTFOLIO SYSTEM

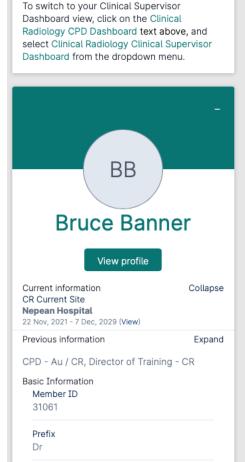
- Trainee profiles include a record of all training requirements
- Facilitates work-based assessment
- Monitors trainees progress through each phase of training
- Identifies when trainees are eligible to progress to the next phase or sit an examination
- User friendly and mobile device compatible

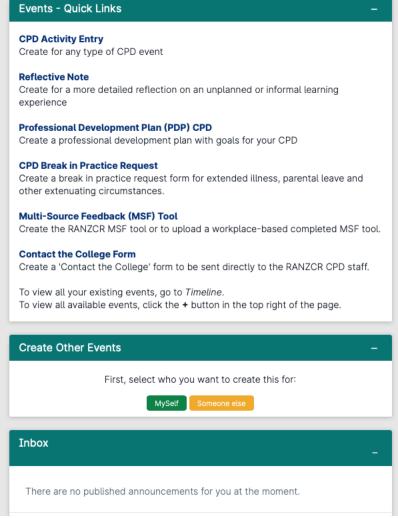


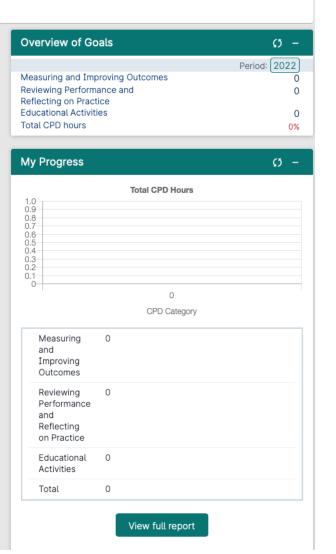
Clinical Radiology CPD Dashboard -

Dashboard Views

Program









Clinical Radiology Director of Training Dashboard

Te Clinical Radiology CPD Dashboard

Radiology CPD Dashboard text above, and select Clinical Radiology Clinical Supervisor be thought from the dropdown menu.



Bruce Banner

View profile

Current information Collapse CR Current Site

Nepean Hospital

22 Nov, 2021 - 7 Dec, 2029 (View)

Previous information Expand

CPD - Au / CR, Director of Training - CR

Basic Information

Member ID

31061

Profiv

Events - Quick Li ks

CPD Activity Entr

Create for any the of CPD event

Reflecti Note

conce for a more detailed reflection on an unplanned or informal learning experience

Professional Development Plan (PDP) CPD

Create a professional development plan with goals for your CPD

CPD Break in Practice Request

Create a break in practice request form for extended illness, parental leave and other extenuating circumstances.

Multi-Source Feedback (MSF) Tool

Create the RANZCR MSF tool or to upload a workplace-based completed MSF tool.

Contact the College Form

Create a 'Contact the College' form to be sent directly to the RANZCR CPD staff.

To view all your existing events, go to Timeline.

To view all available events, click the + button in the top right of the page.

Create Other Events

First, select who you want to create this for:

MySelf

Someone else

Inbox

Overview of Goals

Period: 2022

Measuring and Improving Outcomes 0
Reviewing Performance and 0
Reflecting on Practice
Educational Activities 0
Total CPD hours 0%

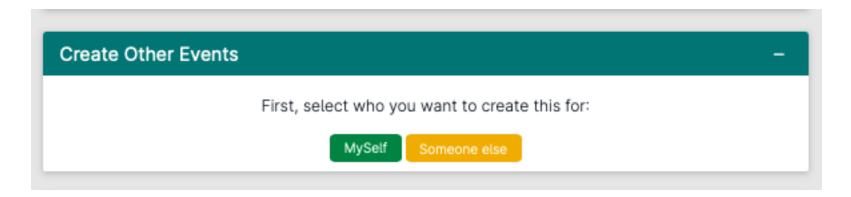


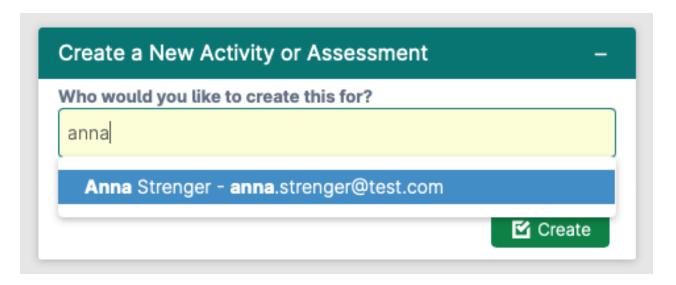
Measuring and Improving Outcomes

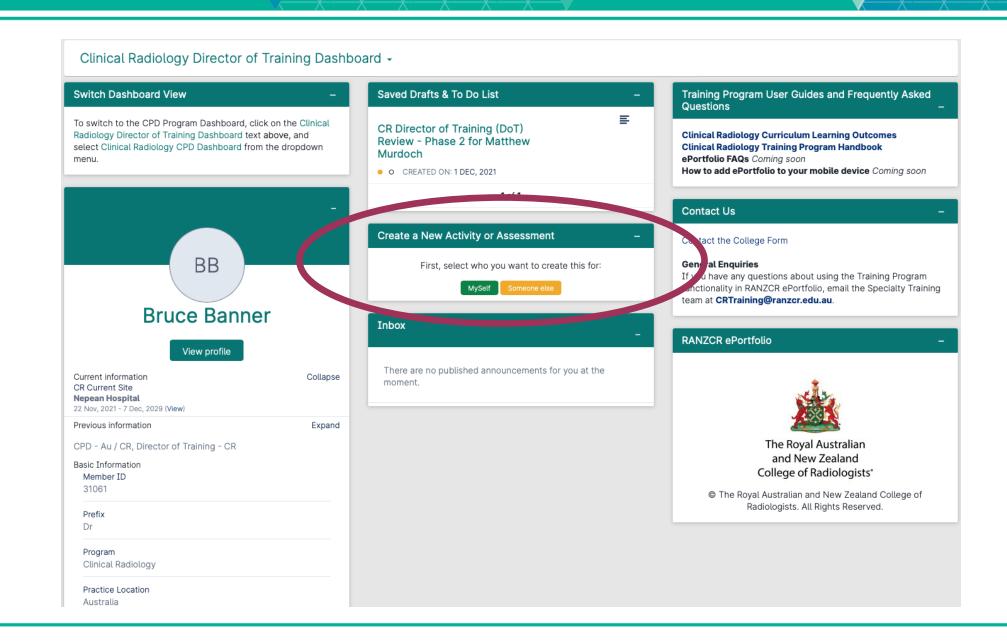
Reviewing Operformance and Reflecting on Practice

Educational Activities

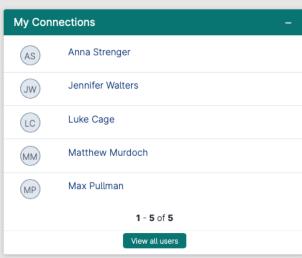
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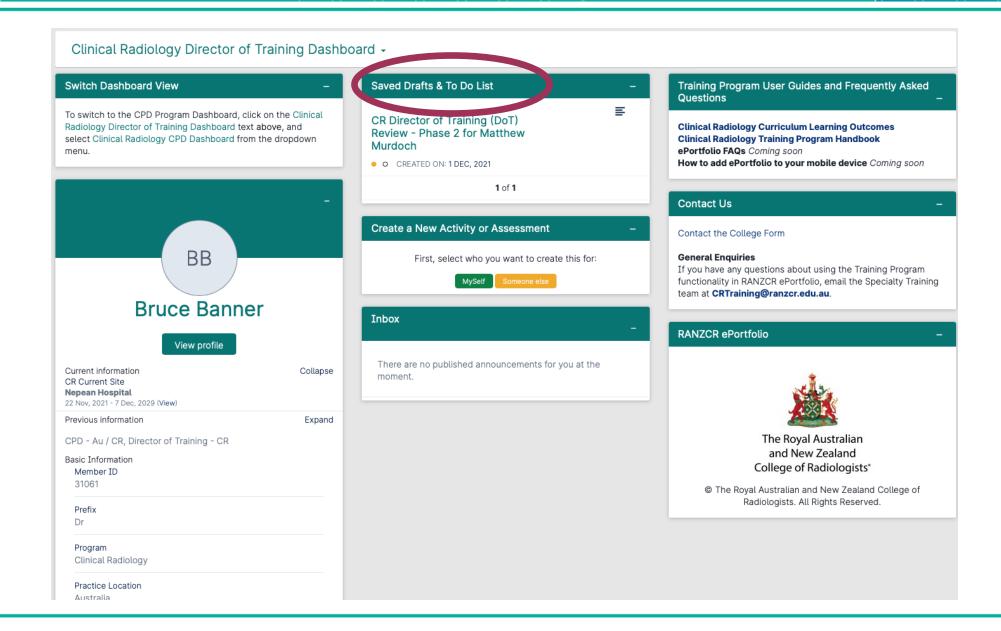


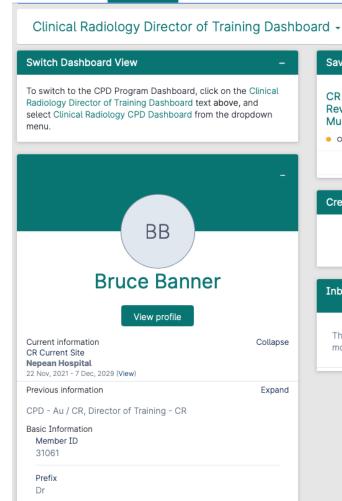












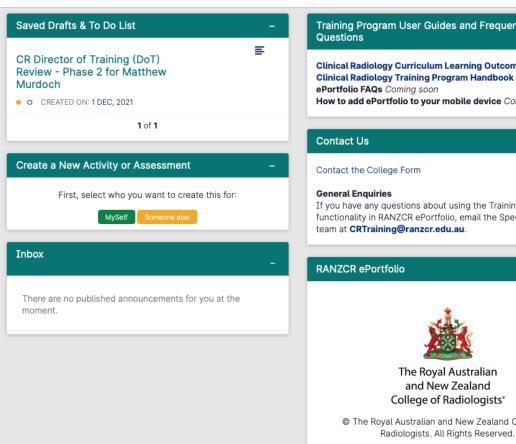
Dashboard

Timeline +

Documents

🚵 kaizen

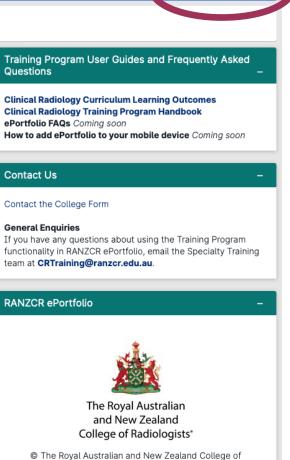
Program Clinical Radiology

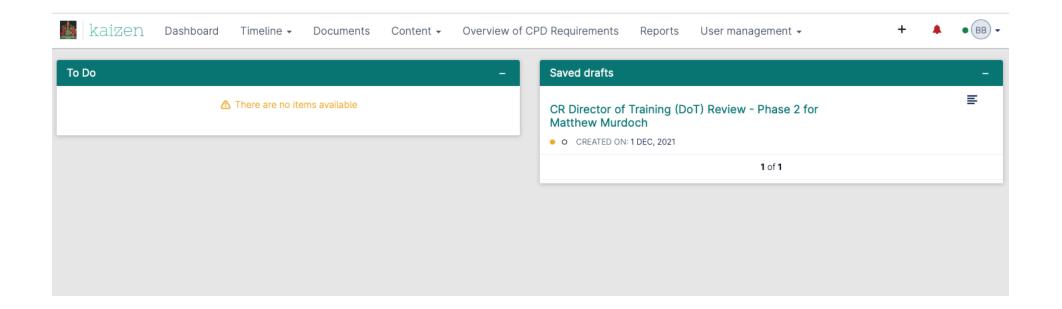


Reports

User management -

Content ▼ Overview of CPD Requirements





STRUCTURED LEARNING EXPERIENCES

Attachments

- Phase 1 progress
- Phase 2 completion

Nuclear Medicine - 4 weeks / 40 sessions

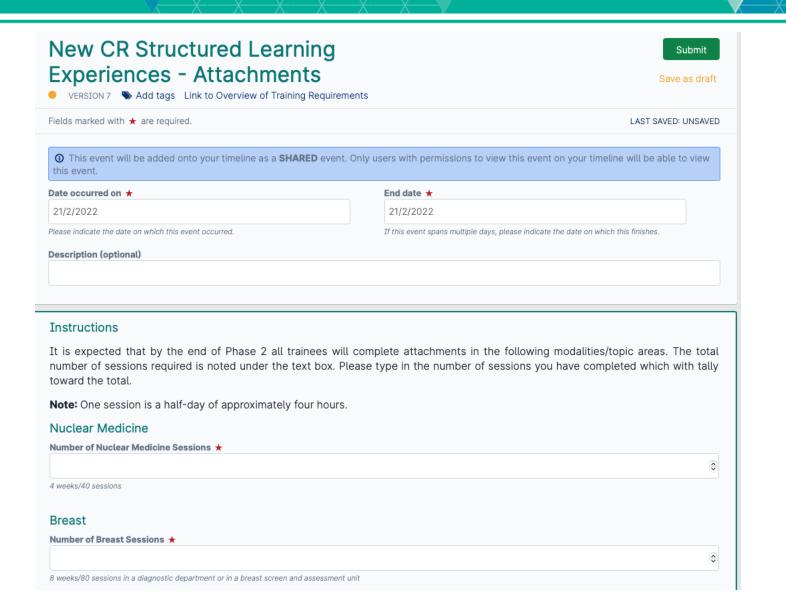
Breast - 8 weeks / 80 sessions

O&G - 8 weeks / 80 sessions

Paediatrics - 12 weeks / 120 sessions

Procedural Radiology - 12 weeks / 120 sessions





STRUCTURED LEARNING EXPERIENCES

Experiential Training Requirements

- Phase 1 progress
- Phase 2 progress
- Phase 3 completion

General X-Rays – 10,000

MRI - 750 + 20 breast

Nuclear Medicine – 200

Mammograms – 600

CT – 5,000, 20 CTC, 50 CTCA

BMD - 50

Breast Ultrasounds - 100

New CR Structured Learning Experiences - Experiential Traini...

Name Add tags Link to Overview of Training Requirements

Instructions	
Trainees must log experiential training requirements. Trainees may enter the number of studies for various modalities and the examinations will tally toward the total requirement. Not all fields need to be completed on this form.	
X-Ray	
General X-Ray ★	
	‡
Paediatric X-Ray ★	
	②
Computed Tomography	
CT Studies ★	
	•
CTC Studies ★	
	•
CTCA Studies ★	
	•
Paediatric CT ★	
	•

Submit Save as draft

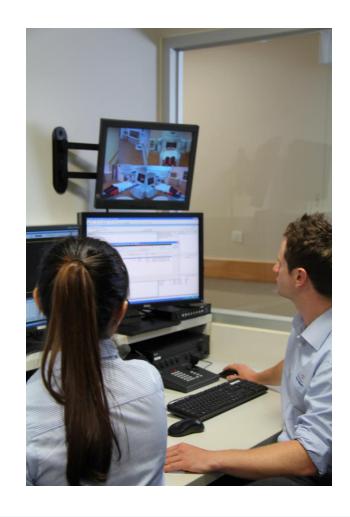
STRUCTURED LEARNING EXPERIENCES



Supporting the provision of culturally competent and culturally safe, best practice medicine for Aboriginal, Torres COURSE MENU Strait Islander and Maori patients through reflection on the physician's own cultural values and recognition of their influence on professional practice. About this resource Purpose of the resource Pre-participation course evaluation Post-participation course evaluation Introduction to Cultural Competence and Cultural Safety Pages: 4 Assignment: 1 File: 1 Progress: 4 / 5 Certificate of Completion Applying Cultural Competence and Cultural Safety Frameworks Pages: 8 Forums: 5 Assignments: 3 Files: 3 Progress: 0 / 13 Copyright & Disclaimer Copyright @ The Royal

WORK-BASED ASSESSMENT (WBA)

- Assessment of trainees completing activities in the clinical setting
- Onus is on trainees to initiate
- Assessment for learning
 - Assessments are repeated
 - Focus is on improvement
- Feedback from a variety of clinical supervisors
- Tools focus on medical expertise as well as other competencies (communication, advocacy etc.)



WORK-BASED ASSESSMENT TOOLS FIT FOR PURPOSE



Reporting Assessments



Performed Ultrasound Assessment



Fluoroscopic Procedures Assessment



Procedural Radiology Assessment



MDM/Clinical Radiology Meeting Assessment

ENTRUSTABILITY SCALE

The benchmark: Competent specialist capable of safe independent practice

LEVEL 1	LEVEL 2	LEVEL 3	LEVEL 4
Constant Direct Supervision Study is reported in conjunction with consultant.	Direct Supervision Consultant is on site. Study and report are reviewed within 4 hours.	Minimal Direct Supervision Direct and timely access to a consultant or	<u>Direct Supervision Not</u> <u>Required</u> Consultant or sonographer is available if needed.
Procedures or ultrasound is performed in conjunction with the consultant/sonographer.	Consultant/sonographer observes trainee performing the procedure or ultrasound.	Study and report are reviewed within 24 hours. Trainee performs procedures or ultrasound.	Study and report are reviewed within 24 hours. Trainee performs procedure or ultrasound.



kaizen Dashboard Timeline - Documents Content - Overview of Training Requirements

Reports





What would you like to create?

Competencies of Early Training

CR Key Conditions Assessment

CR Radiography Attachment Assessment

CR Report Writing Module

Monitoring and Review

CR Multi-Source Feedback (MSF)

CR Trainee Assessment of Training Site (TATS)

Research

CR Critically Appraised Topics (CATs) - Diagnosis

CR Critically Appraised Topics (CATs) - Harm

CR Critically Appraised Topics (CATs) - Treatment

CR Oral Presentation

CR Project 1 - Project 1 Completion

CR Project 1 - Project 1 Proposal

CR Project 2 - Project 2 Completion

CR Project 2 - Project 2 Proposal

CR Research Project - Completion

CR Research Project - Proposal

Structured Learning Experiences

CR Structured Learning Experiences - Attachments

CR Structured Learning Experiences - Experiential Training Requirements (ETR)

Work Based Assessments

CR Work-based Assessment - Clinical Radiology/Multidisciplinary Meeting

CR Work-based Assessment - Fluoroscopic Procedures

CR Work-based Assessment - Performed Ultrasound

CR Work-based Assessment - Procedural Radiology

CR Work-based Assessment - Reporting

↑ Information

Select a form from the list and you will be redirected to fill it in. Forms displayed here are grouped based on the created Timeline categories.

How many WBAs?

- Competencies of Early Training Key Conditions Assessment
- Reporting Assessments 20 sessions per 6 month period
- Performed Ultrasound Assessments 50 general (level 4)
- Progress toward competence:
 - Fluoroscopic Procedures Assessment
 - Procedural Radiology Assessment
 - Clinical Radiology Meeting / MDM Assessment

How many WBAs?

- Reporting Assessments 20 sessions per 6 month period
- Progress toward competence:
 - Performed Ultrasound Assessments paeds and O&G
 - Fluoroscopic Procedures Assessment
 - Procedural Radiology Assessment
 - Clinical Radiology Meeting / MDM Assessment

How many WBAs?

- Reporting Assessments 20 sessions per 6 month period
- Performed Ultrasound Assessments
 - 50 paediatric (Level 3) and 50 O&G (Level 4)
- Fluoroscopic Procedures Assessment
 - 50 general (Level 4) and 20 paediatric (Level 3)
- Procedural Radiology Assessment
 - 100 core skills (Level 4) at least 15 each of injection, drainage, biopsy and vascular access
- Clinical Radiology Meeting / MDM Assessment (Level 4)
 - 50 with a pathologist present

RESEARCH

Critically Appraised Topics (CATs) – 6 in total, 2 in each phase

ONE Research Project

- Project plan / research proposal approval by end of Phase 1
- Research project to be completed by end of training, including:
 - evidence of acceptance for peer review in peer-reviewed journal of impact factor greater than 1.0, or
 - in the event that a manuscript is declined, submission of a research report of approx. 7000 words

Oral Presentation at local Branch level for consideration for Branch of Origin

Basic Radiology Research Methods Course

EXAMINATIONS – PHASE 1

From 2022

- Anatomy Examination one 3 hour paper
 - Labelling
 - MCQs
 - Very short answer questions
 - Short answer questions
- Applied Imaging Technology (AIT) Examination one 3 hour paper
 - Constructed response questions
 - MCQs

Can sit Anatomy and AIT Examination independently

EXAMINATIONS – PHASE 2

From 2023

- Pathology Examination one 3 hour paper
 - MCQs
 - Short answer questions
- Clinical Radiology Examinations
 - MCQ Examination 2 hours, 100 MCQs
 - Case Reporting Examination 3 hours, various cases
- Objective Structured Clinical Examination in Radiology (OSCER)

Trainees must pass the Phase 2 written examinations before they can present to the OSCER

PHASE 2 EXAMINATION RULES

Rules	Current	Future
Sitting	All Examinations sat at the same time Can pass "piecemeal"	 Pathology and Clinical Radiology Written Examinations can be sat independent of each other. Written Examinations has two components, CR MCQ and Case Reporting, which must be sat together. Written Examinations must be passed before presenting for the OSCER.
Number of attempts	4 consecutive opportunities	Maximum consecutive opportunities: • Pathology - 3 • Written Examinations - 3 • OSCERS - 3
Passing	Must reach a passing standard in each Examination / Viva Can pass Vivas	 Written Examinations and OSCERS: For borderline candidates, WBAs and other Examinations will be considered when determining is a candidate has reached a passing standard (conceded pass). OSCERS: If 1 or 2 stations failed, only repeat those stations that were failed
	"piecemeal"	If 3 or more stations failed, repeat the whole OSCER.

HANDBOOK – SECTION 2

Anticipated Completion of Phase 1	Minimum: 12 months of accredited training time Maximum: 24 months of accredited training time
Learning Outcomes Primary Focus	Section 1 – Intrinsic Roles Section 2 – Applied Imaging Technology Section 4 – Anatomy
Competencies of Early Training	Radiography Attachment All trainees must spend one week (FTE) / 10 sessions rostered with a radiographer to obtain experience across a range of modalities and gain insight on patient positioning and various protocols. Report Writing Module Trainees must complete the RANZCR report writing module. Key Conditions Assessment Trainees are expected to attempt the Key Conditions Assessment within 6 months of training. Trainees must reach Level 3 on the entrustability scale on the Key Conditions Assessment within 12 months or they will be placed on remediation. Refer to the Section 4 – Competencies of Early Training for more information on the Key Conditions Assessment and expectations before a trainee can be rostered after hours.

MONITORING AND REVIEW

- Multisource Feedback (MSF)
 - During each phase
 - The trainee should initiate at least 6 weeks prior to a DoT Review
 - DoT then sends the link to 10-12 assessors.
 - 8 or more forms = A valid assessment
 - Results collated and feedback provided during the DoT Review

Multi-Source Feedback

Please return the completed form by:

File attachments are not mandatory for this assessment.

Attach files

The next section of this form has been designed to be completed by multiple people. Please indicate who you would like to invite using the boxes below. The minimum number of responses you must achieve is 8. Invitations can be sent now and also after this form has been submitted by returning to this page.

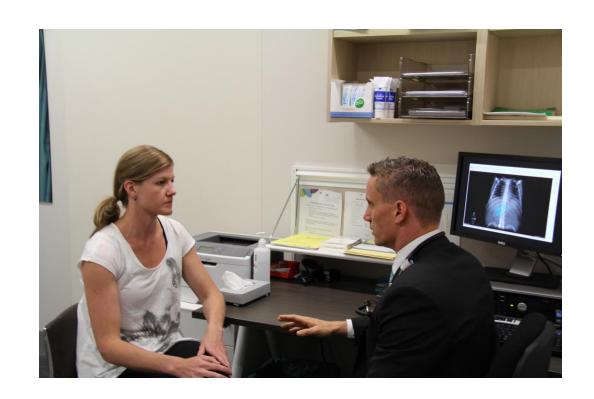
The next section of this form can be filled in by users with these roles: External assessor, Chief Censor - CR, Clinical Supervisor - CR, CPD - OS/ CR, Director of Training - CR, Education Support Officer - CR, CPD - Au / CR, CPD - NZ / CR, Network Training Director - CR, Trainee - Au / CR, Trainee - NZ / CR, Anyone Who would you like to fill in the next section of this form?

Start typing to search

You can invite users with or without a Kaizen account to fill in the next section. After typing at least 3 characters, we will suggest matches from known users in Kaizen. You may enter a user's name or email address.

MONITORING AND REVIEW

- Clinical Supervisor Feedback Forms
 - Just prior to the DoT Review
 - Focus on feedback from daily work with trainees
 - DoT initiates, similar to MSF
- Director of Training Review
 - Every 6 months
 - Review progress over past 6 months
 - Assist to remove barriers to completion

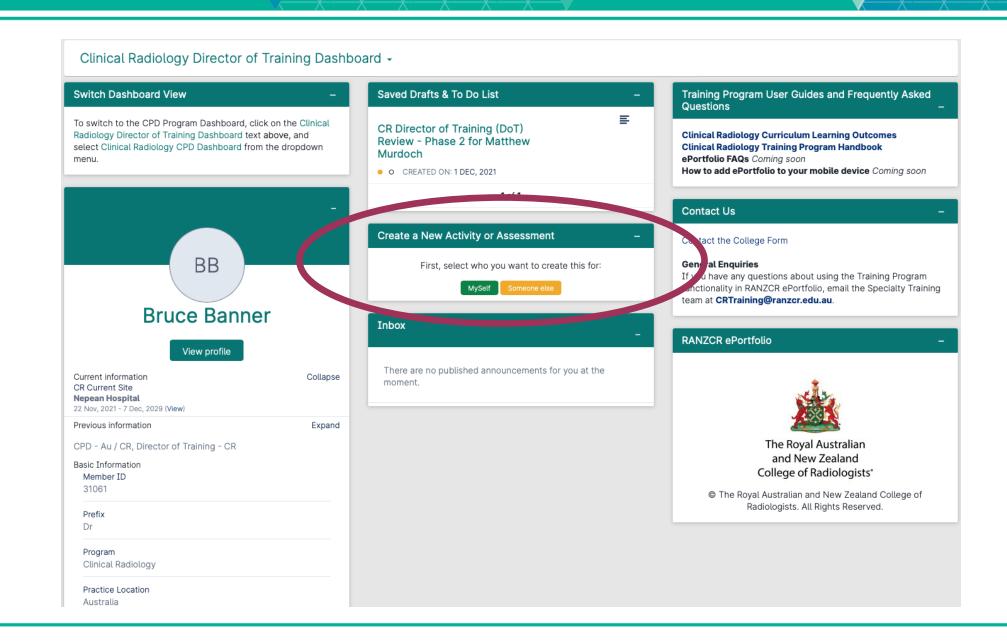


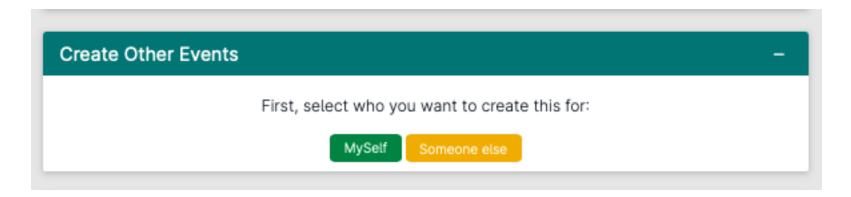
DoT Review

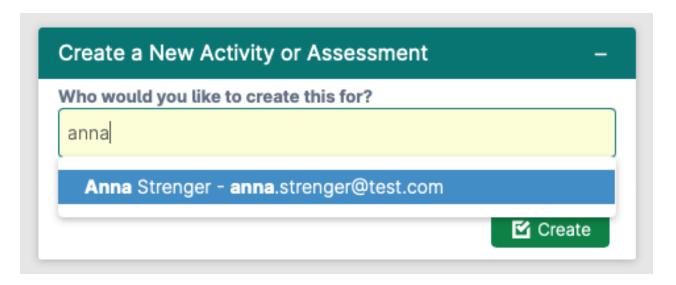
Focus is on completion of requirements for the phase

- Check volume of work-based assessment compared to phase requirement
- Is the trainee acting on the WBA feedback? Are they progressing?
- Is the trainee engaging in a range of studies (reporting assessment)? If not, what do they need more exposure to?
- Discuss plans for sitting exams
- Phase 2 discuss how the trainee's research is progressing

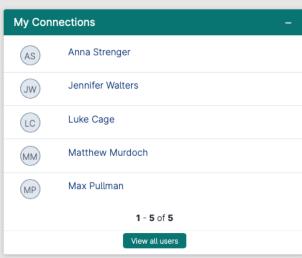
Progression between phases and for completion of training is determined by the Local Governance Committee.











What would you like to create?

Monitoring and Review

CR Clinical Supervisor Feedback Form

CR Director of Training (DoT) Review - Phase 1

CR Director of Training (DoT) Review - Phase 2

CR Director of Training (DoT) Review - Phase 3

Instructions for Director of Training

- 1. Select a due date for completion of the form.
- 2. Enter the name of the trainee being assessed.
- 3. Enter the emails of assessors you wish to invite. A minimum of six assessors are required.

Please	return	the	com	plet	ed	form	by	<i>j</i> :
--------	--------	-----	-----	------	----	------	----	------------

Select form due date.

This appraisal is for: *

Anna Stenger

Enter trainee's full name.

File attachments are not mandatory for this assessment.

📤 Attach files

The next section of this form has been designed to be completed by multiple people. Please indicate who you would like to invite using the boxes below. The minimum number of responses you must achieve is 6. Invitations can be sent now and also after this form has been submitted by returning to this page.

The next section of this form can be filled in by users with these roles: External assessor, Chief Censor - CR, Clinical Supervisor - CR, Director of Training - CR, Network Training Director - CR

Who would you like to fill in the next section of this form?

Start typing to search

You can invite users with or without a Kaizen account to fill in the next section. After typing at least 3 characters, we will suggest matches from known users in Kaizen. You may enter a user's name or email address.

What would you like to create?

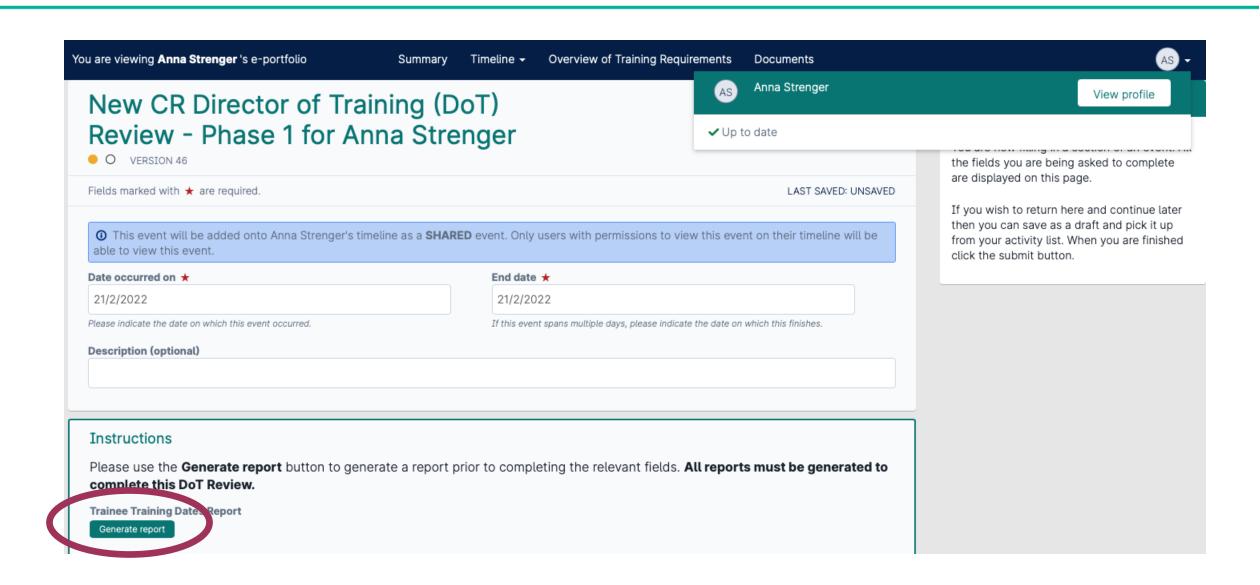
Monitoring and Review

CR Clinical Supervisor Feedback Form

CR Director of Training (DoT) Review - Phase 1

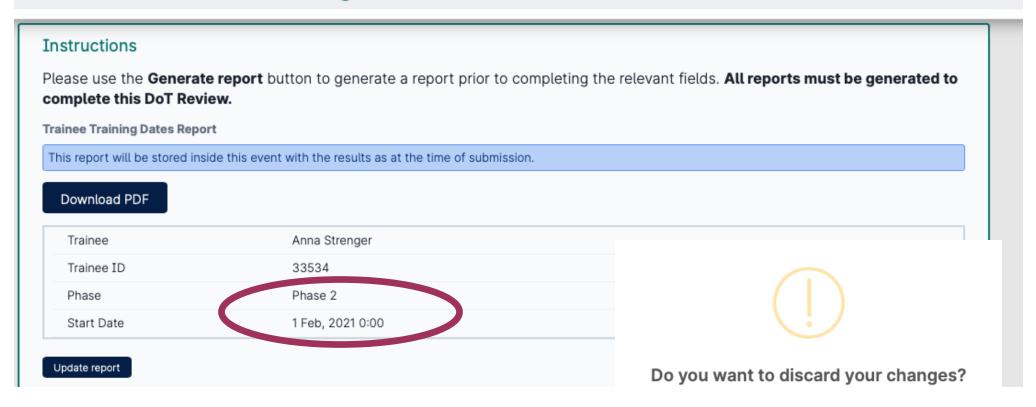
CR Director of Training (DoT) Review - Phase 2

CR Director of Training (DoT) Review - Phase 3



New CR Director of Training (DoT) Review - Phase 2 for Anna...

Documents



Cancel

OK

Instructions

Please use the **Generate report** button to generate a report prior to completing the relevant fields. **All reports must be generated to complete this DoT Review.**

Trainee Training Dates Report

This report will be stored inside this event with the results as at the time of submission.

Download PDF

Trainee	Anna Strenger
Trainee ID	33534
Phase	Phase 2
Start Date	1 Feb, 2021 0:00

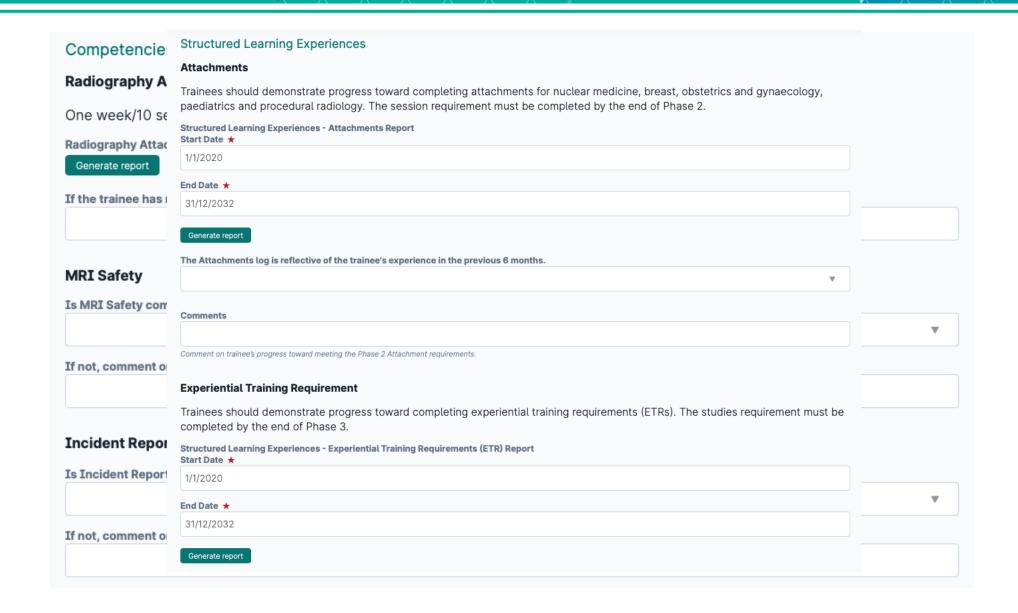
Update report

Is this your first DoT Review since the start of training?

Nο



Yes



Structured Learning Experiences Attachments Trainees should demonstrate progress toward completing attachments for nuclear medicine, breast, obstetrics and gynaecology, paediatrics and procedural radiology. The session requirement must be completed by the end of Phase 2. Structured Learning Experiences - Attachments Report Start Date * 1/1/2020 End Date * 31/12/2032 Generate report g is reflective of the trainee's experience in the previous 6 months. Comments Comment on trainee's progress toward meeting the Phase 2 Attachment requirements. **Experiential Training Requirement** Trainees should demonstrate progress toward completing experiential training requirements (ETRs). The studies requirement must be completed by the end of Phase 3. Structured Learning Experiences - Experiential Training Requirements (ETR) Report Start Date * 1/1/2020 End Date * 31/12/2032 Generate report

Structured Learning Experiences

Workshops/Courses (indicate those completed)

RO Structured Learning Experiences - Workshop and Courses Report

This report will be stored inside this event with the results as at the time of submission.

Download PDF

Workshops/Courses	Completed Date
RO Structured Learning Experiences - SMART Workshop	14 Oct, 2021 12:40

Change report inputs

Comment on any plans to complete workshops/courses

Peter is considering attending the second SMART workshop which will assist his with his research project

Structured Learning Experiences

Attachments

Trainees should demonstrate progress toward completing attachments for nuclear medicine, breast, obstetrics and gynaecology, paediatrics and procedural radiology. The session requirement must be completed by the end of Phase 2.

Structured Learning Experiences - Attachments Report

This report will be stored inside this event with the results as at the time of submission.

Download PDF

Attachment (Requirement) and No. of Sessions

Nuclear Medicine (40 sessions)	0
Breast (80 sessions)	0
Obstetrics and Gynaecology (80 sessions)	0
Paediatrics (120 sessions)	0
Procedural Radiology (120 sessions)	0
Total	0

Change report inputs

The Attachments log is reflective of the trainee's experience in the previous 6 months.

Yes

₹

Comments

Comment on trainee's progress toward meeting the Phase 2 Attachment requirements.

Experiential Training Requirement

Trainees should demonstrate progress toward completing experiential training requirements (ETRs). The studies requirement must be completed by the end of Phase 3.

Structured Learning Experiences - Experiential Training Requirements (ETR) Report

This report will be stored inside this event with the results as at the time of submission.

Download PDF

Modality (Requirement) and No. of Studies

X-Ray (10,000 studies)	0
- X-Ray Paediatric (300 studies)	0
CTs (5,000 studies)	0
- CTC (20 studies)	0
- CTCA (50 studies)	0
MRI (750 studies)	0
Nuclear Medicine (200 studies)	0
Bone Mineral Density (50 studies)	0
Mammograms (600 studies)	0
Breast Ultrasound (100 studies)	0

MRI Range of Studies

Abdomen and pelvis (100 recommended)	0
Cardiothoracic (30 recommended)	0
Head and neck (50 recommended)	0
Brain (200 recommended)	0
Spine (150 recommended)	0

Performed Ultrasound Assessment

Trainees must perform 50 paediatric ultrasound studies achieving Level 3 on the entrustability scale (minimal direct supervision required), and 50 obstetric and gynaecology ultrasound studies achieving Level 4 on the entrustability scale (direct supervision not required) by the end of Phase 3.

Work-based Assessment - Performed Ultrasound Report

This report will be stored inside this event with the results as at the time of submission.

Download PDF

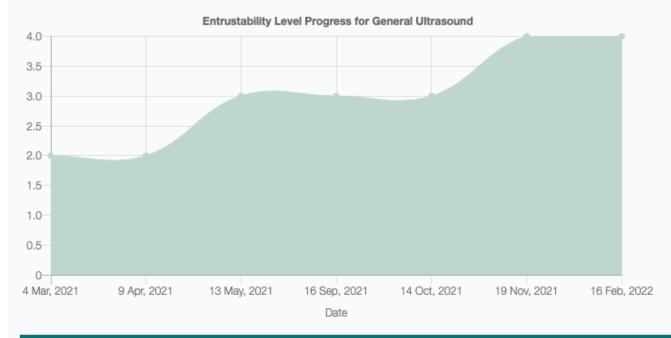
Summary by Type of Scan

Ultrasound Type and No. of Cases

General Ultrasound (50 by the end of Phase 1)	9
Gynaecological and Obstetric Ultrasound (50 by the end of Phase 3)	1
Paediatric Ultrasound (50 by the end of Phase 3)	0

General Ultrasound

General Ultrasound assessment to reach level 4 by the end of Phase 1



Level 1	Level 2	Level 3	Level 4	Total
0	3	4	2	9

All recorded Performed Ultrasound Assessment

Date	Type of Scan	Entrustability Level	Supervisor	Preview
16 Feb, 2022 0:00	General Ultrasound	2.0	-	Preview
16 Feb, 2022 0:00	General Ultrasound	4.0	-	Preview
16 Feb, 2022 0:00	General Ultrasound	3.0	-	Preview
13 May, 2021 0:00	General Ultrasound	3.0	-	Preview
16 Sep, 2021 0:00	General Ultrasound	3.0	-	Preview
14 Oct, 2021 0:00	General Ultrasound	3.0	-	Preview
4 Mar, 2021 0:00	General Ultrasound	2.0	-	Preview
9 Apr, 2021 0:00	General Ultrasound	2.0	-	Preview
19 Nov, 2021 0:00	General Ultrasound	4.0	-	Preview

Date	Type of Scan	Entrustability Level	Supervisor	Preview

There are no data for the given criteria

Date	Type of Scan	Scan Details	Entrustability Level	Supervisor	Preview
8 Feb, 2022 0:00	Obstetric and Gynaecological Ultrasound	-	-	-	Preview

Research

Critically Appraised Topics (CATs)

Two Critically Appraised Topics (CATs) must be completed by the end of Phase 2.

Critically Appraised Topics (CATS) Report

This report will be stored inside this event with the results as at the time of submission.

Download PDF

Date Critically Appraised Topics (CATs) Status Supervisor - First Supervisor - Second Comments Preview

There are no data for the given criteria

Update report

Comments

Please provide any relevant feedback.

Research Project The trainee must demonstrate progress toward completion of the research project. Please indicate aspects of the research project the trainee has completed. Research Project Report Generate report Ethics approval Yes $\overline{\mathbf{w}}$ **Data Collection** Yes Data analysis No Writing up No Submitted for publication Accepted for publication Presentation Comments Please provide any relevant feedback on progress made and plans.

Phase 2 Examinations
Phase 2 Clinical Radiology Examination Report
Generate report
Comments
Please discuss plans for next attempt, if appropriate, and provide any relevant feedback.
Phase 2 Case Reporting Examination Report
Generate report
Comments
Please discuss plans for next attempt, if appropriate, and provide any relevant feedback.
Phase 2 Pathology Examination Report
Generate report
Comments
Please discuss plans for next attempt, if appropriate, and provide any relevant feedback.
Phase 2 OSCER Examination Report
Generate report
Provide any further comments for the trainee. Comment on the trainee's readiness to proceed to the OSCER (if applicable).
Please discuss plans for next attempt, if appropriate, and provide any relevant feedback.

Operand Foodback	
General Feedback	
Comments on Phase 2 progress	
Please provide any relevant feedback regarding progress in Phase 2. Comment on trainee strengths.	
Comments on any specific areas the trainee should focus on in the next review period	
Comment on any specific areas the trainee should focus on in the next review period.	
Development of an Action Plan – Performance and Progression Policy	
	▼
Development of a Remediation Plan - Remediation Policy	
✓	▼
- n/a -	
Required	

The next section of this form will be filled in by Anna Strenger Fill in on the same device **Trainee Comments** File attachments are not mandatory for this assessment. Attach files

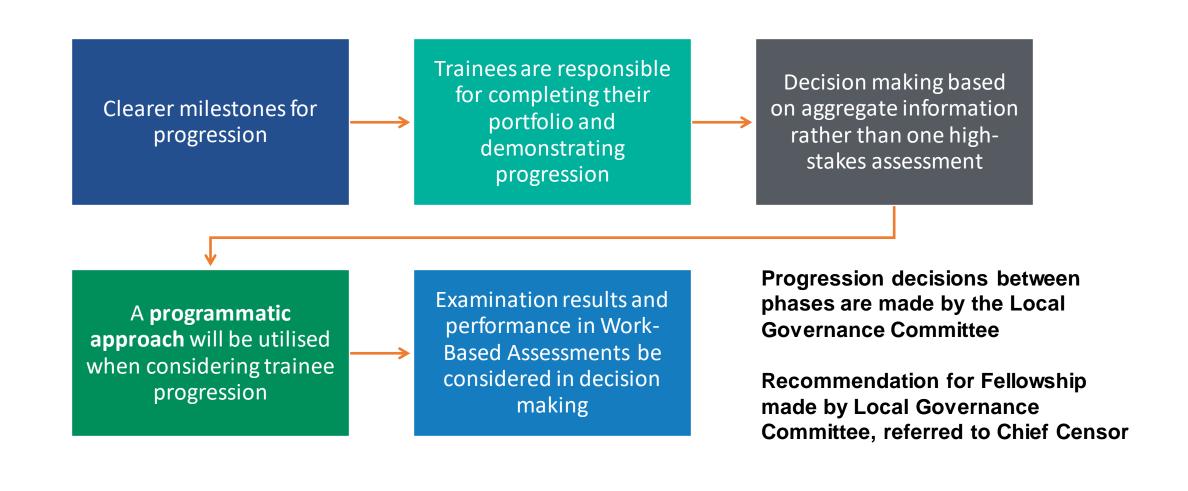
ACTION PLANS

- May be required when:
 - A trainee's performance is not as expected
 - Progress is slower than expected
 - Additional monitoring and support is needed to keep the trainee on track.
- Action plan is prepared with the trainee, generally for 3 months.
- Action plans can be extended but the maximum is 6 months
- If action plan has not been achieved in 6 months ... remediation.

REMEDIATION PLANS

- Usually initiated after a trainee has not achieved the goals of an action plan
- Remediation plan duration is a minimum of 6 months
- Training time is suspended during a period of remediation (and trainees are unable to request a portfolio review for progression
- Plan must be approved by the Chief Censor
- Outcomes
 - Another period of remediation
 - Consideration for withdrawal
- Two unsuccessful consecutive or three non-consecutive remediation periods leads to consideration for withdrawal

PROGRESSION RULES



SUMMARY

- Learning Outcomes
- Information
 - Training Program Handbook
 - RANZCR website
- Training Requirements
- ePortfolio
 - Completing WBAs
 - Conducting DoT Reviews
- Action Plans and Remediation Plans
- Progression through Phases to Fellowship



We are here to support you

Visit the TAR webpage at www.ranzcr.com/trainees

Email us at:

CRtraining@ranzcr.edu.au

Support for DoTs and CSs: julie.denaro@ranzcr.edu.au

