



The Royal Australian
and New Zealand
College of Radiologists®

RANZCR CLINICAL RADIOLOGY TRAINING PROGRAM 2022

The Royal Australian and New Zealand College of Radiologists



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.



LEADERSHIP TEAM

Dr Meredith Thomas

CHIEF CENSOR

Dr Barry Soans

DEPUTY CHIEF CENSOR, CHAIR CREAC

Dr Jash Agraval

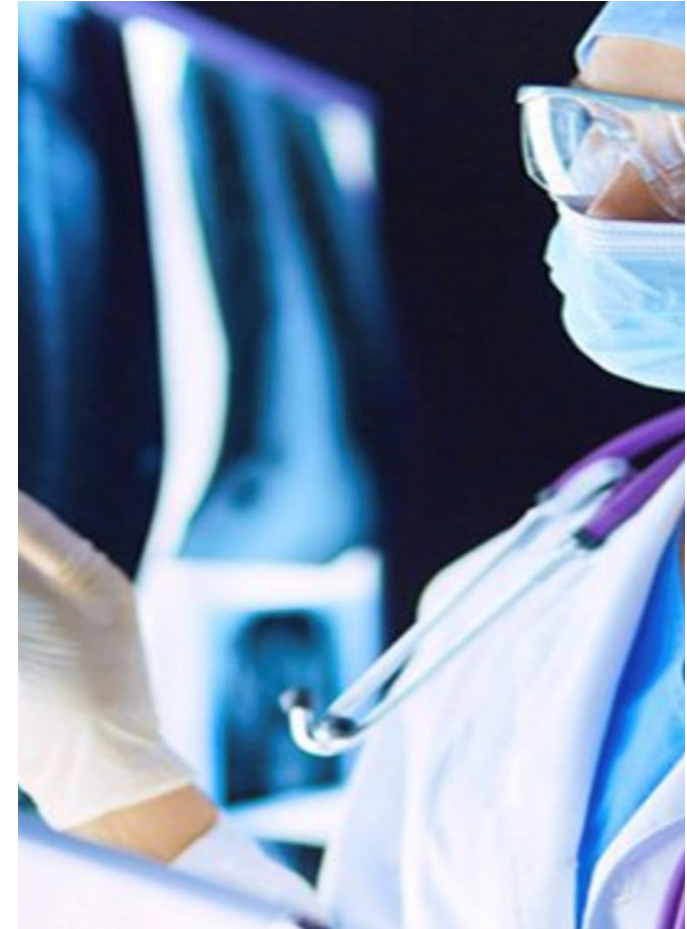
DEPUTY CHIEF CENSOR, CHAIR CRCAC

Dr Mike Bynevelt

CHIEF ACCREDITATION OFFICER, CHAIR CTRAWG

Dr Kwang Chin

CHAIR IMG COMMITTEE



WEBINARS

Date	Webinars
July-August	Session 1: Overview of the new training program, transition scenarios (recording available)
September	Session 2: Work-Based Assessments
October	Session 3: e-Portfolio System
November	Session 4: Examination changes
December	Session 5: Progression

Webinar schedules, recorded webinars and additional information including Q&As is available on the College website:

www.ranzcr.com/tar/webinars



OVERVIEW

This session will cover:

Learning Outcomes

Evidence-Based Best Practice

Medical Education Principles

Application to Assessment in Enhanced Program

Two different Types of Assessment

Work-based Assessment

Examinations

The Clinical Radiology Training Program is Changing

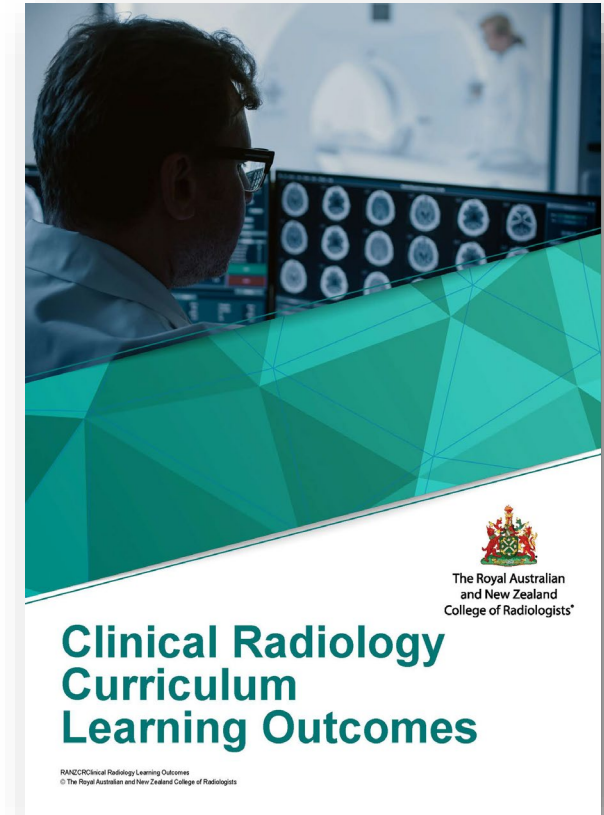
**February 2022 for all Australian, New Zealand
and Singapore Trainees**



The Royal Australian
and New Zealand
College of Radiologists®

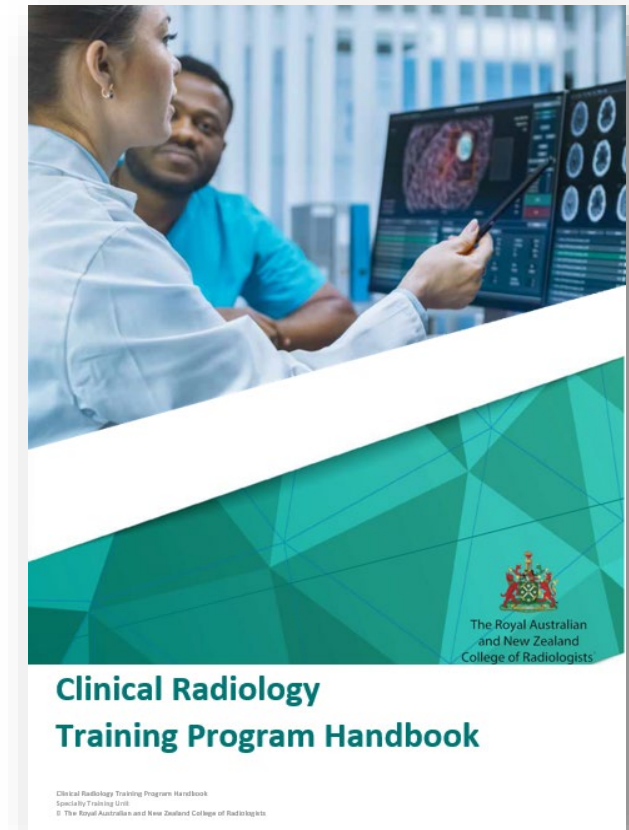
LEARNING OUTCOMES

- The 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
- Available ONLINE!



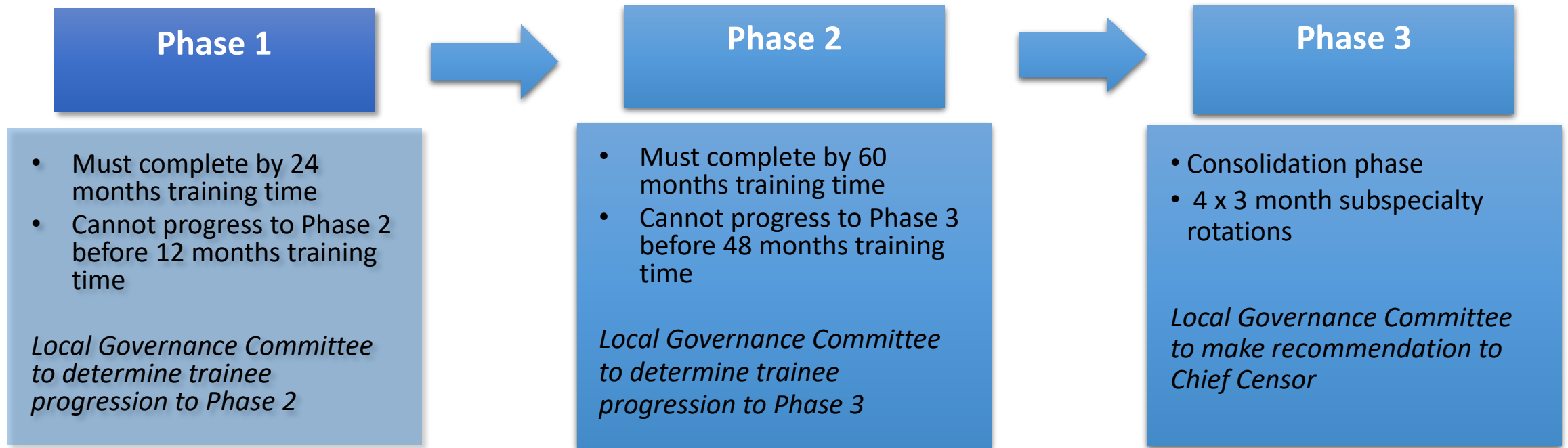
THE TRAINING PROGRAM HANDBOOK

- The draft Training Program Handbook for Clinical Radiology has been developed and the draft form is **CURRENTLY ONLINE!**
- The handbook will serve as a comprehensive guide for trainees that will encompass every element of the new training program from assessment tools and instructions, to policies and guidelines



OVERVIEW OF THE TRAINING PROGRAM

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



EVIDENCE-BASED BEST PRACTICE

Medical Education Principles

- Assessment methods 'fit for purpose' and more direct observation
- Assessment tools that are aligned to the curriculum learning outcomes
- Programmatic assessment
- Use of entrustment scales
- Using technology to monitor and review trainee performance



EXTRACT – S6 – Diagnostic Radiology

Image Interpretation

- 6.1.20 Synthesise any relevant patient information from multiple sources (including previous imaging or medical records) to establish a better understanding of their current imaging.
- 6.1.21 Conduct a quality assessment of the images.
- 6.1.22 Perform a thorough and systematic review of the imaging examination and perceive abnormalities.
- 6.1.23 Recognise and correctly interpret artefacts associated with all imaging modalities.
- 6.1.24 Apply knowledge of anatomy ([refer to Anatomy](#)) and pathology ([refer to Pathology](#)) and identify abnormalities, taking into consideration:
 - The range of normal variants (especially those that mimic disease)
 - Changing appearance with age
 - Physiological states
 - Morphological changes of pathological tissues.
- 6.1.25 Integrate a broader knowledge of clinical presentations, imaging appearances and pathology to form an appropriate diagnosis and/or differential diagnosis.
- 6.1.26 Recognise findings that constitute a medical emergency to expedite and implement local management protocols.
- 6.1.27 Communicate relevant findings to referrers and patients when appropriate, including diagnoses and their implications.
- 6.1.28 Directly communicate with the referrer in cases that have urgent clinical priority, findings of malignancy requiring treatment, or diagnoses that have the potential to harm others.
- 6.1.29 Communicate unexpected or significant findings in a timely and appropriate manner, according to clinical urgency, and confirming receipt of the findings.

Reporting Assessment on the e-Portfolio

One (1) Reporting Assessment must be completed for each of the studies from the twenty (20) sessions required every six (6) months period. Please complete the form below for one study only, and create another one for a different study.

Findings

- Perception
- Interpretation.

Findings



- n/a -

Detects all relevant findings

Detects majority of relevant findings safe for practice

Fails to detect relevant findings

Detects non-existent findings

Diagnosis

Management

- Management
- Communication
- Report structure.

Management



- n/a -

Recommends appropriate management

Recommends inappropriate management and/or unsafe management, and/or fails to recommend appropriate

Please select the appropriate level based on a global assessment of the trainee's performance in the Reporting Assessment.

Key

- **Level 1 - Constant Direct Supervision:** Conditions reported in conjunction with consultant.
- **Level 2 - Direct Supervision:** Consultant is on site, study and reports reviewed within 4 hours.
- **Level 3 - Minimal Direct Supervision:** Direct and timely access to a consultant, study and reports reviewed within 24 hours.
- **Level 4 - Direct Supervision Not Required:** Consultant is available if needed, study and reports are reviewed within 24 hours.

Entrustability Level

EVIDENCE-BASED BEST PRACTICE

Medical Education Principles

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Programmatic assessment

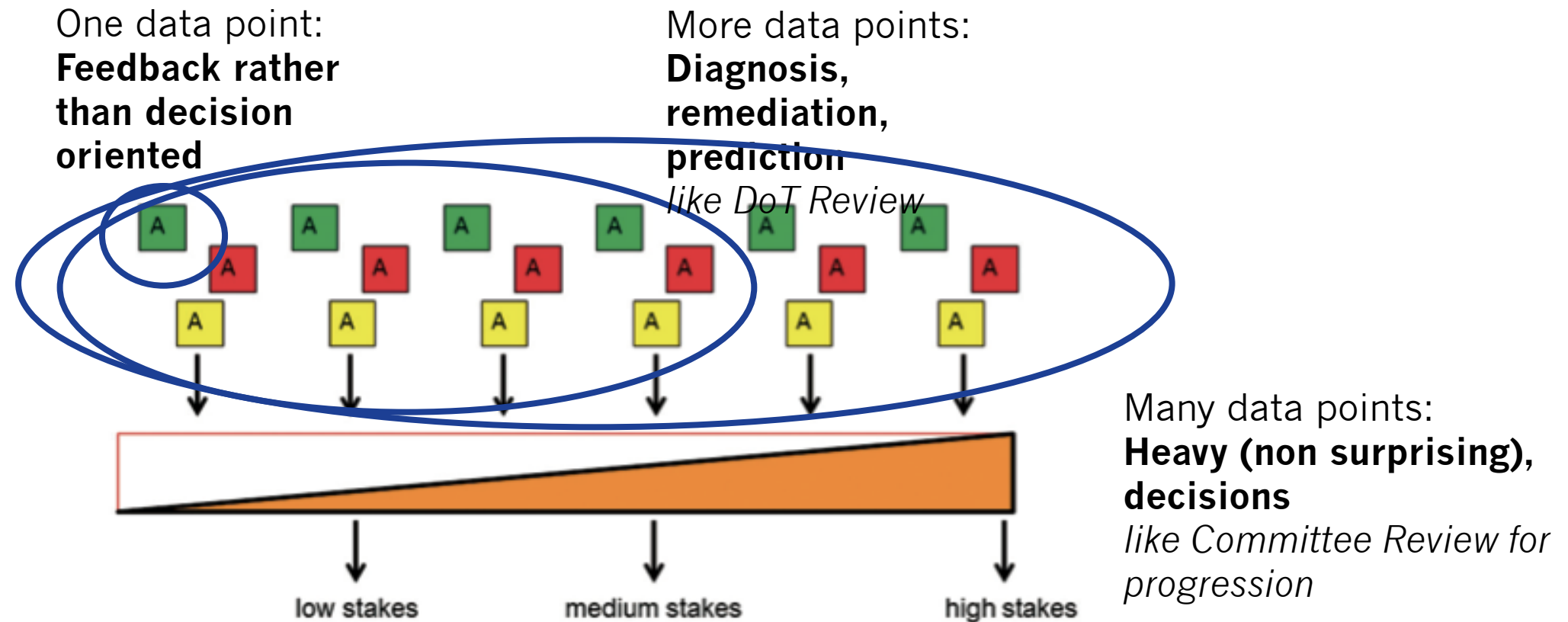


Figure 1. Not every assessment moment needs to be a decision moment on programmatic assessment.

More data!



EVIDENCE-BASED BEST PRACTICE

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Entrustability scale

Rating relies on the supervisor's clinical judgement – progress is most important

LEVEL 1	LEVEL 2	LEVEL 3	LEVEL 4
<u>Constant Direct Supervision</u> Study is reported in conjunction with consultant. Procedure or ultrasound is performed in conjunction with the consultant/sonographer.	<u>Substantial Guidance</u> Consultant is on site. Study and report are reviewed within 4 hours. Consultant/sonographer observes trainee performing the procedure or ultrasound.	<u>Some Guidance</u> Direct and timely access to a consultant or sonographer. Study and report are reviewed within 24 hours. Trainee performs procedure or ultrasound.	<u>Competent</u> Consultant or sonographer is available if needed. Study and report are reviewed within 24 hours. Trainee performs procedure of ultrasound.

EVIDENCE-BASED BEST PRACTICE

Medical Education Principles

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e-Portfolio – Trainee view

Competencies of Early Training

This goal is **IN PROGRESS**

100% progress against this goal. 2/2 targets completed.



Created as part of UAT Clinical Radiology - Competencies of Early Training

Due date: **31 Aug, 2021**

Period: To be completed within the first six months of Phase I

Monitoring and Review



e-Portfolio Reports will collate all necessary information and data

- Clinical Supervisor Feedback
 - Focus on day-to day activity and implementing feedback
 - More 'granular'
- Director of Training Review
 - Every 6 months
 - Review progress for phase of training
 - Assist to remove barriers to completion

ASSESSMENT – TWO TYPES

- Formative
- Summative

– Formative Assessment

Assessment FOR learning

Main purpose is to provide trainees with feedback to improve performance

Work-based assessment

- Authentic – assessment with real patients in the clinical setting
- No pass or fail for individual assessments
- Demonstrating progress most important
- Reliability achieved via multiple assessments with multiple assessors

- Summative Assessment

Assessment OF learning

Main purpose is to determine whether the trainee has met the expected competencies

Phase 1 and 2 Examinations

- Standard-setting process, secure administration, consistent, reproducible

Portfolio Review for progression to Phase 2, Phase 3 and Eligibility for Fellowship

- Many data points required for high stakes decision-making

WORK-BASED ASSESSMENT (WBA)

- Assessment of trainees completing activities with actual patients in the clinical setting
- Assessment *for* learning
 - Assessments can be repeated as many times as necessary
 - Focus is on identifying gaps and helping trainees to improve
- Feedback from a variety of consultants
- Tools focus on medical expertise as well as other competencies (communication, advocacy etc.)



WORK-BASED ASSESSMENTS



Better alignment with learning outcomes



Quick and easy to complete on mobile friendly **electronic platforms**



Better reflection of day-to-day practice



Enable **timely and constructive feedback** between trainees and assessors



Allow tracking of trainee progression using the **Entrustability Scale**

WORK BASED ASSESSMENTS

Work-Based Assessments include the following:

- **Key Conditions Assessment**
- **Reporting Assessment**
- **Performed Ultrasound Assessment**
- **Fluoroscopic Procedures Assessment**
- **Procedural Radiology Assessment**
- **Multidisciplinary/Clinical Radiology Meetings Assessment**

The onus is on trainees to initiate Work-Based Assessments with Clinical Supervisors.

Competency-based training acknowledges that each trainee may take a variable amount of time to develop and demonstrate certain abilities or all expected competencies to the required standard.



KEY CONDITIONS ASSESSMENT

- An assessment of competence in radiological diagnosis of clinical conditions which may be life threatening if undiagnosed over a period of 12 hours.
- A standardised tool for assessing trainee readiness
- Clear benchmark for measuring trainee progression in Year 1 of training.

This assessment is usually undertaken between four and six months after the commencement of training.

Trainees cannot be assessed at fewer than four months into training.

KEY CONDITIONS ASSESSMENT

The assessment is to be conducted locally, preferably at the training site where the trainee will first start after hours or on call duties. The assessment should therefore reflect the case mix and conditions of the after-hours environment that the trainee will experience.

Clinical Supervisors (CSs) and/or DoTs select a case from each of the key condition categories (listed below), and then additional cases which reflect the training site case-mix and modality usage to create a 'mock list'. A minimum of 16 cases should be presented to the trainee for a valid assessment.

The key conditions categories are as follows:

- Brain
- Head and Neck
- Spine
- Cardiothoracic
- Abdomen and Pelvis
- Musculoskeletal System
- Obstetrics and Gynaecology
- Paediatric

REPORTING ASSESSMENT

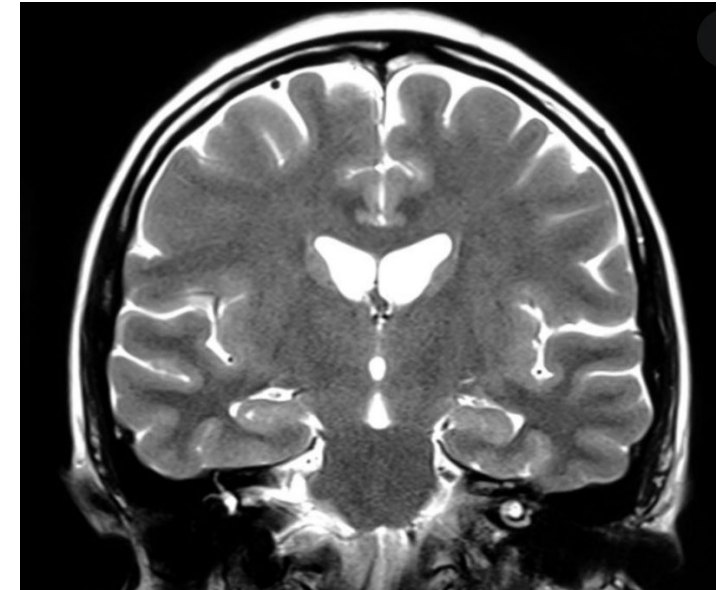
20 sessions per 6-month period (approx. 1 per week)

The Clinical Supervisor reviews the studies reported by a trainee in a “session” (4 hours).

The number of studies assessed in the session will be variable, depending on the seniority of the trainee, the modality and the complexity of studies.

Across the training program, the collated Reporting Assessments should include a wide variety of studies and a variety of assessors.

*CS will have a greater role in assessments, DoT will have oversight over assessment processes



REPORTING ASSESSMENT

Expected level of independence (based on the entrustability level)

	Phase 1	Phase 2	Phase 3
General X-Ray	<i>Progress toward required entrustability levels for the various modalities</i>		Level 4
Computed Tomography (CT)			Level 4
			Level 2 for CTC and CTCA
Magnetic Resonance Imaging (MRI)			Level 4
			Level 2 for fetal, cardiac and breast MRI
Ultrasound			Level 4
Mammography			Level 4
Nuclear Medicine			Level 2
Bone Mineral Density (BMD)			Level 2

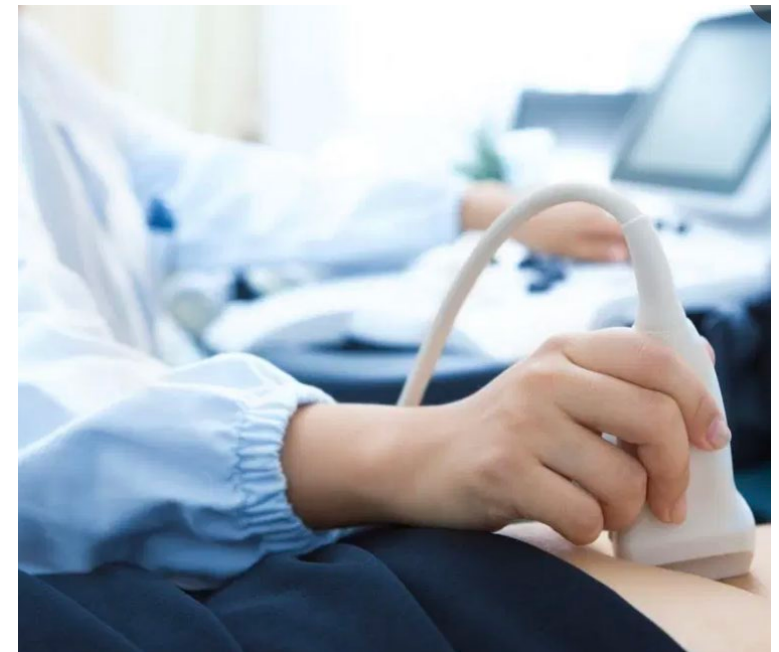
PERFORMED ULTRASOUND ASSESSMENT

Trainees are required to perform and record:

- **50 general ultrasound scans by the end of Phase 1 of training**
- **50 additional paediatric ultrasound scans, including 10 neonatal heads by the end of Phase 3 of training**
- **50 additional obstetric and gynaecological ultrasound scans by the end of Phase 3 of training**

Trainees must undertake the full ultrasound examination and record a diagnosis and findings.

The sonographer uses the entrustability scale to rate the trainee's performance according to how much supervision the trainee requires to perform the ultrasound.



PERFORMED ULTRASOUND ASSESSMENT

	Phase 1	Phase 2	Phase 3
General Ultrasound including: • Neck • Abdomen • Renal • Doppler • Venous • Musculoskeletal • Scrotal	Level 4		
Paediatric Ultrasound, including cranial ultrasound	<i>Progress toward required entrustability levels</i>		Level 3
Obstetrics and Gynaecology Ultrasound including: • Pelvic scans (minimum 10) • First trimester scans (minimum 10) • 2nd and 3rd trimester scans - fetal biometry (minimum 10)			Level 4

FLUOROSCOPIC PROCEDURES ASSESSMENT

Trainees are required to perform and record:

- **50 general fluoroscopic procedures by the end of Phase 3 of training**
- **20 additional paediatric fluoroscopic procedures by the end of Phase 3 of training**

In assigning a rating the CS should consider both knowledge and skills-based competencies, as well as intrinsic roles, including:

- Appropriate communication with other health professionals
- Appropriate case selection
- Informed consent
- Identification of relevant anatomical structures
- Image guided intervention
- Safe sedation
- Infection control
- Appropriate post-procedural care including provision of clear documentation and management of post-procedural complications

FLUOROSCOPIC PROCEDURES ASSESSMENT

	Phase 1	Phase 2	Phase 3
General Fluoroscopy	<i>Progress toward required entrustability levels</i>		Level 4
Paediatric Fluoroscopy			Level 3

PROCEDURAL RADIOLOGY ASSESSMENT

Trainees are required to perform and record 100 interventional procedures under radiological guidance across the three phases of training.

At least 15 of each of the following core skills is required:

- **Injection**
- **Drainage**
- **Biopsy**
- **Vascular access**



PROCEDURAL RADIOLOGY ASSESSMENT

To meet progress requirements, the trainee needs to demonstrate satisfactory progress towards demonstrating Level 4 on interventional procedures, across the four core skills, by the end of Phase 3.

	Phase 1	Phase 2	Phase 3
Injection	<i>Progress toward required entrustability levels</i>		Level 4
Drainage			Level 4
Biopsy			Level 4
Vascular access			Level 4



MULTIDISCIPLINARY/CLINICAL MEETINGS ASSESSMENT

Clinical radiology trainees are expected to develop skills required to become valuable members of such meetings.

Trainees are required to attend and participate in 100 meetings over the 3 phases of training, 50 of which must be MDMs with a pathologist present to meet progression requirements.

In clinical radiology meetings and MDMs, trainees are expected to present radiological findings and work collaboratively with other team members correlating clinical, radiological and pathological findings to optimise patient care.

An assessment can only be recorded if the trainee primarily assists in the preparation or presents at meetings.

WORK-BASED ASSESSMENTS

How DoTs/CS approve a WBA a trainees' device

- When a trainee completes a WBA form, at the bottom is a **Fill in** on same device slider option.
- Slide No to Yes, then the DoT/Clinical Supervisor sections such as Entrustability can be completed on the trainee's device.
- The *Who would you like to fill in the next section of this form* must be a RANZCR user with the DoT or Clinical Supervisor user role.
- Once the DoT/Clinical Supervisor fills out the Entrustability score on the trainee's device, they need to approve the assessment on their own e-Portfolio account.
- The next slide demonstrates how to fill in the Entrustability information on the same device as the trainee.







Mocha Joe

View profile

Current information

Current Site - Faculty of Clinical Radiology
Royal North Shore Hospital
1 Jan, 2021 - 31 Dec, 2021 (View)
24 Feb, 0202 - 24 Feb, 2022 (View)

RO Training Phase
Phase I
1 Jan, 2021 - 31 Dec, 2022 (View)

Previous information

Future information

UAT Trainee - Au / CR

Basic Information

UAT Username
465

Auditlog

Collapse

Expand

Expand

Inbox

There are no published announcements for you at the moment.

Create a new event

Create

To do list

⚠ There are no items available



Welcome to your new Training Profile on RANZCR ePortfolio

On this dashboard, you will find links to the various event forms and reports you require for your Clinical Radiology Training Program, as well as links to a detailed user guide and FAQs.

My Connections

Overview of Goal -Competencies of Early Training

Overview of Goal - Work Based Assessment

Reporting Assessment	29%
Performed Ultrasound Assessment	22%
Fluoroscopic Procedures Assessment	8
Procedural Radiology Assessment	9
Multidisciplinary Meeting Assessment	15
Reporting Assessment	27%
Performed Ultrasound Assessment	19%
Fluoroscopic Procedures Assessment	43%
Procedural Radiology Assessment	8
Multidisciplinary Meeting Assessment	3

Overview of Goal to be completed by the end of Phase 2 - Structured Learning Experiences

Attachments	86%
Experiential Training Requirements	82%
Experiential Training Requirements - CT - Additional Criteria	100%

Specialty Training User Guide

Specialty Training user guide **[PDF]**
Creating a Work Based Assessment report and exporting as a PDF document **[Video]**
Export a saved report as a PDF document **[Video]**
Add the RANZCR ePortfolio to your mobile device **[PDF]**
Clinical Radiology Training Program Overview **[PDF]**
Clinical Radiology Curriculum **[PDF]**
Clinical Radiology Examinations Overview **[Link]**
Training FAQs

Contact Us

If you have any questions about using the Specialty Training program functionality in RANZCR ePortfolio, email the Specialty Training team: **radtaa@ranzcr.edu.au**

Want to help make Kaizen better?

Trainee Dashboard View



MJ

Mocha Joe

View profile

Current information Collapse

Current Site - Faculty of Clinical Radiology
Royal North Shore Hospital
1 Jan, 2021 - 31 Dec, 2021 (View)
24 Feb, 0202 - 24 Feb, 2022 (View)

Training Phase
Phase I
1 Jan, 2021 - 31 Dec, 2022 (View)

Previous information Expand
Future information Expand

UAT Trainee - Au / CR

Basic Information
UAT Username
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Auditlog Expand

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⚠ There are no items available

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Reporting Assessment	27%
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Fluoroscopic Procedures Assessment	42%
Procedural Radiology Assessment	8
Multidisciplinary Meeting Assessment	3

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Clinical Radiology Director of Training Dashboard ▾



Susie Greene

View profile

Current information

Current Site - Faculty of Clinical Radiology

Royal North Shore Hospital

1 Jan, 2021 - 31 Dec, 2021 (View)

Collapse

Previous information

UAT Director of Training - CR, UAT Clinical Supervisor - CR

Expand

Basic Information

UAT Username

343

Expand

Auditlog

Expand

Create a new event ▾

First, select who you want to create this for:

MySelf

Someone else

An overview of all your goals ▾

No goals have yet been created

To do list ▾

TCR WBA Fluoroscopic Procedures Assessment for Mocha Joe 🧠

CREATED ON: 30 JUL, 2021

Awaiting your action

⋮

TCR WBA Procedural Radiology Assessment for Mocha Joe 🧠

CREATED ON: 30 JUL, 2021

Awaiting your approval

⋮

1 - 2 of 2

Inbox ▾

There are no published announcements for you at the moment.

My Connections ▾

MJ

Mocha Joe

SG

Susie Greene

1 - 2 of 2

View all users

WORK-BASED ASSESSMENTS

Work-Based Assessments (WBA)

- How trainees fill out a form
- How trainees elect a DoT/Clinical Supervisor to approve assessments
- How to approve a WBA on the trainee's device
- Sonographer approval

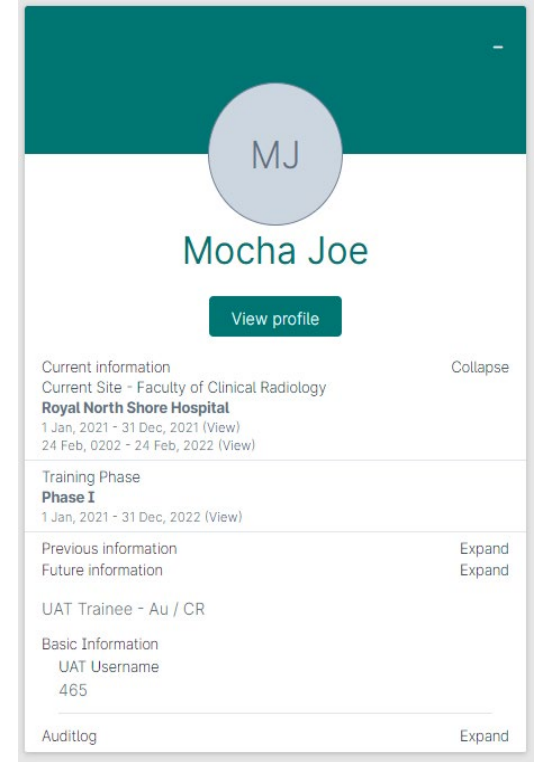


WORK-BASED ASSESSMENTS

How Trainees Fill Out a Form

- Trainees fill out forms by selecting the **Create** button on their dashboard.
- This opens a list of all assessment events available.
- When an assessment is selected, the form loads with the required fields.
- Each form has fields with drop down pre-filled options, as well as free text fields.
- At the bottom of the page trainees select an assessor to review the assessment.
- The assessor must have the role of DoT or Clinical Supervisor to review the assessment.

The next slide demonstrates how a trainee creates an assessment event.



The screenshot shows a user profile for 'Mocha Joe' (MJ). The profile includes a 'View profile' button and several sections of information:

- Current information** (with a 'Collapse' link):
 - Current Site - Faculty of Clinical Radiology
 - Royal North Shore Hospital**
 - 1 Jan, 2021 - 31 Dec, 2021 (View)
 - 24 Feb, 0202 - 24 Feb, 2022 (View)
- Training Phase** (with an 'Expand' link):
 - Phase I**
 - 1 Jan, 2021 - 31 Dec, 2022 (View)
- Previous information** (with an 'Expand' link):
 - Future information
 - UAT Trainee - Au / CR
- Basic Information** (with an 'Expand' link):
 - UAT Username
 - 465
- Auditlog** (with an 'Expand' link)





MJ

Mocha Joe

View profile

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Phase I
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Future information

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Auditlog

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Expand

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Create a new event

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To do list

⚠ There are no items available

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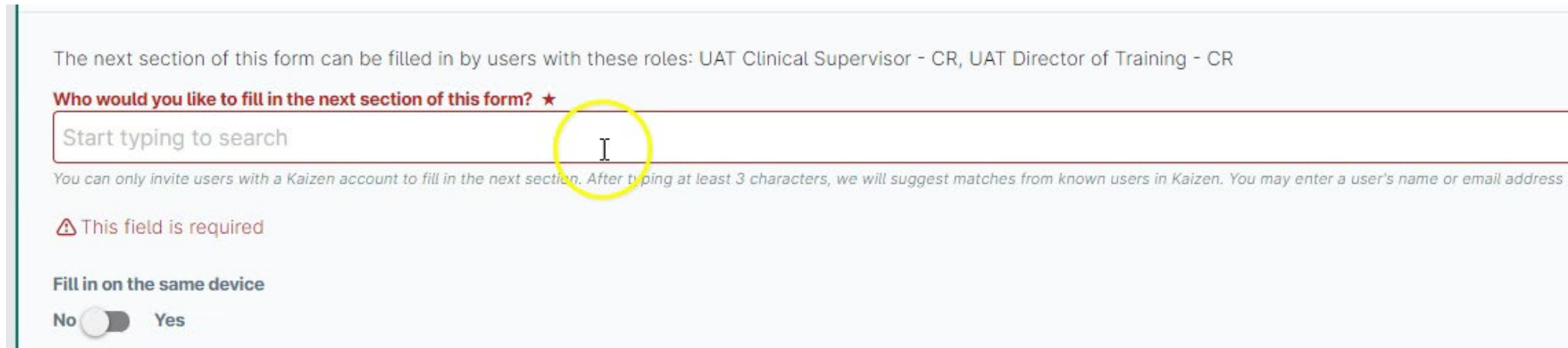
Want to help make Kaizen better?

WORK-BASED ASSESSMENTS

How trainees elect a DoT/Clinical Supervisor to approve WBAs

The form will ask the trainee to elect a Clinical Supervisor or a DoT to approve the next section.

The WBA can only be assigned to a user with an e-Portfolio account, any names typed in the search box with no e-Portfolio account, or if the name does not have the required role, “No results were found” will be shown.



The next section of this form can be filled in by users with these roles: UAT Clinical Supervisor - CR, UAT Director of Training - CR

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

Start typing to search

You can only invite users with 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

⚠ This field is required

Fill in on the same device

No ☐ Yes ☒

Detailed description: This is a screenshot of a web form. At the top, a light blue box contains the text 'The next section of this form can be filled in by users with these roles: UAT Clinical Supervisor - CR, UAT Director of Training - CR'. Below this is a red heading 'Who would you like to fill in the next section of this form? ★'. Under the heading is a search input field with the placeholder text 'Start typing to search'. A yellow circle highlights the cursor in the search field. Below the search field is a line of italicized text: 'You can only invite users with 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'. Below this is a red warning icon and the text 'This field is required'. At the bottom, there is a section titled 'Fill in on the same device' with two radio buttons: 'No' and 'Yes'. The 'Yes' radio button is selected.

WORK-BASED ASSESSMENTS

Director of Training To-Do List

- Trainee's Assessments that require DoT approval are listed.
- **Green Light** approval steps. This shows which stage the event is in.
- In this example, the **Amber Light** circle beneath the assessment indicates the assessment is awaiting DoT approval.
- Selecting the list option on the right-hand side will show the assessment form in a pop-up rather than opening a new page.

The next slides demonstrate how DoTs interact with the To Do List, to view an assessment and provide approval.

To do list	
TCR WBA Multi Disciplinary/Clinical Radiology Meetings Assessment (MDM) for Mocha Joe ● ● CREATED ON: 30 JUL, 2021 Awaiting your action	☰
TCR WBA Reporting Assessment for Mocha Joe ● ● CREATED ON: 30 JUL, 2021 Awaiting your action	☰
TCR WBA Fluoroscopic Procedures Assessment for Mocha Joe ● ● CREATED ON: 30 JUL, 2021 Awaiting your action	☰
TCR WBA Procedural Radiology Assessment for Mocha Joe ● ● CREATED ON: 30 JUL, 2021 Awaiting your approval	☰
1 - 4 of 4	



Clinical Radiology Director of Training Dashboard ▾

SG

Susie Greene

View profile

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1 Jan, 2021 - 31 Dec, 2021 (View)

Collapse

Previous information

UAT Director of Training - CR, UAT Clinical Supervisor - CR

Expand

Basic Information

UAT Username
343

Auditlog

Expand

My Connections

LB

 Leon Black

MJ

 Mocha Joe

RL

 Richard Lewis

SG

 Susie Greene

Create a new event

First, select who you want to create this for:

MySelf

Someone else

An overview of all your goals

No goals have yet been created



To do list

TCR WBA Fluoroscopic Procedures Assessment for Mocha Joe

CREATED ON: 2 AUG, 2021

Awaiting your approval

TCR WBA Multi Disciplinary/Clinical Radiology Meetings Assessment (MDM) for Mocha Joe

CREATED ON: 2 AUG, 2021

Awaiting your action

TCR WBA Multi Disciplinary/Clinical Radiology Meetings Assessment (MDM) for Mocha Joe

CREATED ON: 2 AUG, 2021

Awaiting your action

TCR WBA Fluoroscopic Procedures Assessment for Mocha Joe

CREATED ON: 2 AUG, 2021

Awaiting your action

1 - 4 of 4

Inbox

There are no published announcements for you at the moment.

WORK-BASED ASSESSMENTS

How DoTs/CS approve a WBA a trainees' device

- When a trainee completes a WBA form, at the bottom is a **Fill in** on same device slider option.
- Slide No to Yes, then the DoT/Clinical Supervisor sections such as Entrustability can be completed on the trainee's device.
- The *Who would you like to fill in the next section of this form* must be a RANZCR user with the DoT or Clinical Supervisor user role.
- Once the DoT/Clinical Supervisor fills out the Entrustability score on the trainee's device, they need to approve the assessment on their own e-Portfolio account.
- The next slide demonstrates how to fill in the Entrustability information on the same device as the trainee.







Mocha Joe

View profile

Current information

Current Site - Faculty of Clinical Radiology
Royal North Shore Hospital
1 Jan, 2021 - 31 Dec, 2021 (View)
24 Feb, 0202 - 24 Feb, 2022 (View)

RO Training Phase
Phase I
1 Jan, 2021 - 31 Dec, 2022 (View)

Previous information

Future information

UAT Trainee - Au / CR

Basic Information

UAT Username
465

Auditlog

Collapse

Expand

Expand

Inbox

There are no published announcements for you at the moment.

Create a new event

Create

To do list

⚠ There are no items available



Welcome to your new Training Profile on RANZCR ePortfolio

On this dashboard, you will find links to the various event forms and reports you require for your Clinical Radiology Training Program, as well as links to a detailed user guide and FAQs.

My Connections

Overview of Goal -Competencies of Early Training

🔄 -

Overview of Goal - Work Based Assessment

🔄 -

Reporting Assessment	29%
Performed Ultrasound Assessment	22%
Fluoroscopic Procedures Assessment	8
Procedural Radiology Assessment	9
Multidisciplinary Meeting Assessment	15
Reporting Assessment	27%
Performed Ultrasound Assessment	19%
Fluoroscopic Procedures Assessment	43%
Procedural Radiology Assessment	8
Multidisciplinary Meeting Assessment	3

Overview of Goal to be completed by the end of Phase 2 - Structured Learning Experiences

🔄 -

Attachments	86%
Experiential Training Requirements	82%
Experiential Training Requirements - CT - Additional Criteria	100%

Specialty Training User Guide

-

Specialty Training user guide [PDF]

Creating a Work Based Assessment report and exporting as a PDF document [Video]

Export a saved report as a PDF document [Video]

Add the RANZCR ePortfolio to your mobile device [PDF]

Clinical Radiology Training Program Overview [PDF]

Clinical Radiology Curriculum [PDF]

Clinical Radiology Examinations Overview [Link]

Training FAQs

Contact Us

-

If you have any questions about using the Specialty Training program functionality in RANZCR ePortfolio, email the Specialty Training team: **radtaa@ranzcr.edu.au**

Want to help make Kaizen better?

DIRECTOR OF TRAINING REVIEW

DoT Review (Development in Progress)

- To initiate the DoT Review assessment, DoTs must select **Create** on the trainee's dashboard.
- Then choose the **DoT Review assessment**.
- The DoT Review assessment is to be completed every 6 months per trainee.
- For each assessment, the DoT can generate a report which will show both tabular data for that assessment as well as graphs showcasing the trainee's Entrustability scores completed in the 6-month period.
- To view a particular assessment event, click "**Preview**" on that assessment's row in the table.
- This will show the fields filled in by the trainee, the fields filled in by the DoT upon approval, and the trainee's response to the DoT's comments during approval.

The next slide demonstrates creation of the DoT Review and the report generated for an assessment.





Clinical Radiology Director of Training Dashboard ▾

SG

Susie Greene

View profile

Current information

Current Site - Faculty of Clinical Radiology

Royal North Shore Hospital

1 Jan, 2021 - 31 Dec, 2021 (View)

Collapse

Previous information

UAT Director of Training - CR, UAT Clinical Supervisor - CR

Expand

Basic Information

UAT Username

343

Expand

Auditlog

Expand

My Connections

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Create a new event ▾

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To do list ▾

TCR WBA Multi Disciplinary/Clinical Radiology Meetings Assessment (MDM) for Mocha Joe

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Awaiting your action

⋮

TCR WBA Fluoroscopic Procedures Assessment for Mocha Joe

● ●

CREATED ON: 2 AUG, 2021

Awaiting your action

⋮

1 - 2 of 2

Inbox ▾

There are no published announcements for you at the moment.

WHAT NEEDS TO BE DONE

- Trainees to complete assessments and learning experiences in timely manner as per current training requirements.
- Trainees to keep all information and records up-to-date in TIMS, to ensure data being transferred to the e-Portfolio is as accurate as possible.
- Trainees to meet with DoT to determine and document all completed ETRs and training experiences.
- To read information regarding the transition provided through College communication channels and keep abreast of change.



SUMMARY

- The enhanced training program starts from February 2022
- Evidence-based best practice is the foundation of the revised program
- A combination of formative assessment and summative assessment will be used to determine trainee progress and competence
- Phase 1 and Phase 2 Examinations eligibility is a hybrid



WEBINARS

Date	Webinars
July-August	Session 1: Overview of the new training program, transition scenarios (recording available)
September	Session 2: Work-Based Assessments
October	Session 3: e-Portfolio System
November	Session 4: Examination changes
December	Session 5: Progression

Webinar schedules, recorded webinars and additional information including Q&As is available on the College website:

www.ranzcr.com/tar/webinars

FOR MORE INFORMATION

Visit the TAR webpage at
www.ranzcr.com/college/tar

Webinar schedule available:
www.ranzcr.com/college/tar/webinars

Email us at:
CRtraining@ranzcr.edu.au



The Royal Australian
and New Zealand
College of Radiologists®