Queensland Branch Training Committee

RANZCP Supervisor Accreditation

Process endorsed by QBTC: 30/08/2019

Contents

Appendices

Overview

Queensland Branch Training Committee's (QBTC's) Supervisor Accreditation Process ensures new and established supervisors have the knowledge and skills required to supervise trainees within the framework of the training regulations of the RANZCP Competency Based Fellowship Program (CBFP) (RANZCP, 2018). This process adopts a blended learning approach with a view to engaging participants and to provide opportunities to apply knowledge in common supervision scenarios. Participants are required to complete selected eModules from the RANZCP's LearnIt platform to acquire core knowledge, and where relevant will be given opportunities to explore more advanced concepts. The facilitated workshop focuses on the supervisory process and application of knowledge, and provides opportunities for participants to learn from each other.

Changes to the accreditation process

The accreditation process has been revised in July 2019 to replace a largely didactic program with a blended learning approach. The content learning components have been replaced with selected eModules from the RANZCP website. The revised workshop now focuses exclusively on process and the application of knowledge.

The principles underlying the program revision are:

1. Increasing the engagement of learners with content learning and the workshop component through:
   - Replacing didactic learning of content with self-paced eModules presenting information in multiple modalities and incorporating interactive elements
   - Increasing opportunities for interaction and application of knowledge during the workshop component using interactive polling and group activities.

2. Maximizing consistency between content knowledge and the RANZCP 2012 CBFP training regulations using educational resources developed by and/or endorsed by the RANZCP

3. Ensuring minimum expectations are met with regards to content knowledge:
   - eModules include an assessment of knowledge prior to certification to ensure core content is understood.

4. Acknowledging the diverse learning needs of the participant group comprised of new and experienced supervisors through:
   - Availability of advanced eModule content to more experienced supervisors
   - Drawing on the expertise within the group during the facilitated workshops.

PART 1:   Content knowledge

Background

Part 1 of the accreditation process ensures that supervisors will have the necessary core knowledge to provide supervision under the 2012 CBFP Training regulations. Opportunities are also provided for more experienced supervisors to attain more advanced knowledge about aspects training program, including the centrally administered summative assessments. Participation in the facilitated workshop (Part 2) is conditional on the supervisor demonstrating completion of the minimum requirements associated with Part 1.

Learning objectives

After Part 1 all supervisors will know about:

1. The InTrain environment where the majority of supervisor related training forms are completed
2. Minimum requirements for supervision under the RANZCP CBPF
3. Formative and summative assessments requirements completed during training terms, and the standards against which these are assessed
4. Models and frameworks for providing effective feedback in clinical supervision.

Additionally, renewing supervisors will have been provided opportunities to further develop knowledge about:

1. Centrally administered summative assessments – with a view to increasing their ability to support trainees in preparation for these
2. Approaches to managing complex communication issues including conflict in the context of supervision
3. Strategies to improved teaching outcomes in supervision and medical education.

Relationship to previous accreditation process

This component replaces Parts 1 (pre-reading) and 2 (initial workshop), and most of the content previously delivered in Part 3 (advanced workshop) of the previous accreditation process.

Expected prior knowledge

It is expected that all participants will be aware of the InTrain system used for the completion of all workplace-based assessment forms requiring supervisor input. Any

participant who is unfamiliar with this system should complete the following eModule (and associated webinars) on LearnIT:

Module	Duration	Description
Introduction to InTrain	30 minutes	Overview of InTrain including links to trainee and supervisor webinars

Minimum requirements for the completion of Part 1

For new supervisors Part 1 will take 3-hours to complete, for renewing supervisors a minimum of 1-hour of advanced learning must be demonstrated if all mandatory modules have been completed.

Mandatory and extension eModules

All supervisors must demonstrate completion of the mandatory eModules via LearnIT prior to participating in the facilitated workshop (Part 2). If a supervisor has already completed these eModules an additional 1 hour of relevant CPD activity from the 'Optional and extension eModules' list must be completed prior to workshop enrolment.

Accessing the eModules

Supervisors will need to first log in to their account on the RANZCP website. All eModules are in the LearnIt platform on this website. For many browser and operating system combinations you will be able to find the modules by clicking on the hyperlinks embedded within this document. If this does not work, you will need to search for the individual modules on LearnIt.

Documenting eModule completion

When you apply for Part 2 of the accreditation process (workshop) you will need to provide a copy of your CPD record documenting completion of the mandatory (and if needed extension) eModules. Click on the 'Course completion report' tab in LearnIT to print or save a PDF copy of your learning record.

Completion of the mandatory 'Giving feedback to trainees' eModule does not register in your course completion record. You will need to print / save a PDF copy of the course completion certificate for this module separately.

Mandatory eModules for all supervisors

Module	Duration	Description and notes
Training Program - In-Training Assessments	30 minutes	▪ Overview of formative and summative assessments completed within a training term ▪ Note that Course Feedback must be completed for the course to be registered as completed. ▪ LINK: https://learnit.ranzcp.org/User/Course/Details/687
Training Program - Observed Clinical Activity	30 minutes	▪ Covers the purpose of the OCA and approaches to providing feedback.
Giving feedback to trainees*	1 hour	▪ SET-GO approach to providing effective feedback ▪ Please generate a certificate and print on conclusion.
Communication: Performance feedback for positive change – Part 1	30 minutes	▪ Resources developed by the Royal Australian and New Zealand College of Radiologists that covers the roles of managers and supervisors, and two models for providing effective feedback. ▪ Roles of supervisors / managers ▪ Note that the course feedback needs to be completed for course completion to be registered
Communication: Performance feedback for positive change – Part 2	30 minutes	

* Please print/save the certificate of completion after the quiz for these modules as completion is not recorded in LearnIT

Optional and extension eModules list

Supervisors seeking to renew their accreditation status who have already completed all the mandatory eModules must demonstrate an additional 1-hour of CPD activity from the following list. These optional eModules cover centrally administered summative assessment items and communication skills of relevance to the supervisor role.

	Module	Duration
Assessments	Training Program – Psychotherapy Written Case	30 minutes
	Training Program – Scholarly Project	30 minutes
	Clinical audit in mental health practice: CCQI module 1	1 hour
Management	Conflict management - Conflict management – part 1	30 minutes
	Conflict management - Conflict management – part 2	30 minutes
	Managing others	30 minutes
Teaching	Learner-centred teaching: Part 1 – modifying the current approach*	1 hour
	Learner-centred teaching: Part 2 – problem-based learning*	1 hour

* Please print/save the certificate of completion after the quiz for these modules as completion is not recorded in LearnIT

Additional relevant resources

Topic	Resource*	Description
Assessing learning needs	Miller, G. E. (1990). The assessment of clinical skills/competence/performance. *Academic Medicine, 65*(9), S63-7.	Introduces Miller's pyramid which provides a framework for understanding the development of competence in clinical practice.
	Flynn E. (2019) Medical Education. In: Loh E., Long P., Spurgeon P. (eds) Textbook of Medical Administration and Leadership. Springer, Singapore	Describes 'Miller's prism' an elaboration of Miller's pyramid that includes emphasis on attitudes, knowledge and skills.
	Halpern, H. (2009). Supervision and the Johari Window: A Framework for Asking Questions. *Education for Primary Care, 20*(1), 10-14.	Discusses the application of the Johari Window in clinical supervision contexts.
CBFP	RANZCP Fellowship Program: Regulations, policies and procedures	Full regulations relating to all aspects of the RANZCP CBFP.
	Developmental Descriptors	This document outlines the behavioural expectations of trainees under the RANZCP CBFP at each stage of training.
	Learning outcomes	Outcomes the learning outcomes expected under each CanMEDS domain for Stages 1,2&3.
	2012 Fellowship Program: supervisor resources	Additional resources for supervisors available on the RANZCP website.
Feedback	Von Bergen CW, Bressler MS, Campbell K. The sandwich feedback method: Not very tasty. Journal of Behavioral Studies in business. 2014 Sep 7;7.	Article exploring some of the limits and problems associated with reliance on the 'feedback sandwich' technique.
	Ramani, S., & Krackov, S. (2012). Twelve tips for giving feedback effectively in the clinical environment. *Medical Teacher, 34*(10), 787-791.	Article providing broad guidance about strategies to provide effective feedback in clinical supervision. Concepts and models covered include: the Deliberate practice model; Pendleton's four-step process; and the ECO (emotions, content and outcome) model.
InTrain	Navigating InTrain for supervisors	Practical guide to navigating the InTrain system prepared by Dr Felicity Plunkett (DoT Auckland).
WBAs	Workplace Based Assessments	Link to RANZCP page providing information about the various types of WBAs available.

* If you are aware of resources that you think should be added to this list please email: PGT.PAH@health.qld.gov.au

PART 2:   Workshop

Background

Part 2 of the accreditation process ensures all supervisors can demonstrate the application of core knowledge to address common activities and issues arising in supervision under the CBFP. This is delivered as an interactive workshop that takes three hours to complete.

Learning objectives

After Part 2 all supervisors will be able to demonstrate the ability to:

1. Assist a trainee to plan a rotation, including awareness of the challenges that can arise in meeting training requirements in Stage 2
2. Apply the developmental descriptors in assessing trainee performance for the purposes of entrustment
3. Plan the approach to supervision with a trainee where challenges have been identified.

Relationship to previous accreditation process

This component replaces the interactive component of Part 3 (advanced workshop) of the previous accreditation process.

Expected prior knowledge

Part 2 applies the core content knowledge acquired in Part 1, and provides opportunities to apply this in simulated supervision scenarios. Enrolment in the workshop is conditional on meeting the minimum requirements associated with the completion of Part 1.

Minimum requirements for the completion of Part 2

Participants are expected to be participate fully in the workshop either in person or via videoconferencing. Brisbane-based participants are encouraged to attend the workshop in-person as this will enable optimization of numbers for the group activities.

Activity 1:   Participant orientation (15-minutes)

Overview

This section will provide participants with a brief orientation to housekeeping issues and the workshop group. Participants will also be oriented to the use of the PollEverywhere interactive polling system which will be used in the subsequent activities. Understanding the diverse experiences of participants will be important to drawing on the expertise of the group to learn from each other during completion of the workshop activities.

Activity schedule

	Time	Orientation focus	Detail
1	5-min	Housekeeping	- Fire evacuation process, bathrooms, etc - Video-conferencing etiquette - Orientation to PollEverywhere (see - Appendix 3)
2	8-min	Workshop group	- Completion of live polling questions using PollEverywhere (listed in Appendix 4)
3	2-min	Workshop activities	- Division of participants into 3 groups: video-conference participants (Group A); and in-person participants (Groups B & C) - Coverage of activities and timeframes.

Participant resources

- None, all content is embedded within workshop PowerPoint slides.

Facilitator resources

- [Workshop PowerPoint slides]
- Appendix 3   Accessing PollEverywhere
- Appendix 4   Part 2 – Activity 1: PollEverywhere participant question orientation

Activity 2:   Helping a training to plan their rotation (30-minutes)

Overview

Participants will work in groups to apply knowledge about the CBFP requirements to help a fictional trainee to plan their rotation. The scenarios used focus on issues impacting Stage 2, where trainees can often run into difficulties meeting the Entrusted Professional Activity (EPA) requirements. The goal is to ensure that supervisors can assist trainees to plan a rotation with consideration of their individual learning needs, personal preferences, and the opportunities available in the planned term.

Learning objectives

Though completion of the activity participants will demonstrate:

1. Knowledge of:
    - the minimum requirements associated with training terms, including adaptations for part-time training
    - common roadblocks to progression that can emerge in Stage 2
    - compulsory EPAs associated with specific training terms
    - EPA opportunities associated with various areas of practice

2. The ability to apply key learning to assist trainees in planning a specific training term.

Activity overview

Participant groups will work to identify the relevant issues to be addressed in planning the EPAs with this trainees in the current rotation across three scenarious. The three scenarios relate to a trainees undertaking Stage 2 training terms. In responding to these scenarios, participants are encouraged to consider:

1. How many EPAs should the trainee attempt?
2. What are the mandatory EPAs that <u>must </u>be completed?
3. What opportunities are available to undertake other mandatory EPAs?
4. What WBAs might be relevant to the current term and EPA goals?
5. How can the trainees preferences be accommodated?

The scenarios are designed to demonstrate how decisions made early in Stage 2 can impact the training demands arising later during this stage.

Activity schedule

	Time	Task focus		Detail
1	5-min	Concept revision		- Completion of live polling quiz on PollEverywhere to ensure all participants know the core concepts (see Appendix 5)
2	15-min	Group discussion*	Group A	- Planning a rotation for a trainee commencing Stage 2 in an Child and Adolescent Psychiatry term
			Group B	- Planning a rotation for a Stage 2 (18-months FTE total) commencing a Consultation-Liaison Psychiatry term
			Group C	- Planning a rotation for a Stage 2 (24-months FTE total) commencing in an Early Psychosis team.
3	10-min	Feedback		- A representative of each group to present the key issues and the initial plan - Workshop discusses and explores issues further
* Option of independent task completion to be made available to VC participants (Group A)				

Participant resources

- Trainee Trajectory Pathway annotated with scenario information (A/B/C)
- Stage 2 EPA checklist with scenario information included (A/B/C)

Facilitator resources

- [Workshop PowerPoint slides]
- Appendix 5   Activity 2 - Revision of EPA and OCA requirements

Activity 3:   Applying the developmental descriptors (30-45 minutes)

Overview

This task provides opportunities for participants to practice, and receive feedback on, their assessment of trainees completing WBAs.

Learning objectives

Participants will be able to demonstrate:

1. Awareness of the differential performance expectations across Stages 1 to 3 with reference to the Developmental Descriptors
2. Application of knowledge of the developmental descriptors to complete WBA ratings in a consistent manner and to understand the requirements of entrustment
3. The ability to provide feedback that is specific and actionable (e.g. SMART goals).

Activity overview

Participants will individually rate videos of simulated trainee performances in various WBAs with reference to the Developmental Desciptors. Feedback will be provided to the group using live polling to identify variations in rating patterns. The goal of this feedback is to improve inter-rater reliability and establishing consistent expected standards amonst the supervisor group.

For each scenario participants will be prompted to:

> Please complete the WBA form including the provision of written feedback about what was done well and areas for improvement. Also, consider whether the trainees performance raises significant concerns.

> Discuss your ratings within your group and elect a spokesperson who can provide feedback to the other groups.

Prior to each group providing feedback all participants will complete a global rating of the simulated trainees level of functioning with reference to the Stages of Training (see Appendix 6).

Activity schedule

	Time	Task focus		Detail
1	5-min	Task orientation		- Orientation to task requirements
2	3-min	CbD#1	Video	- CbD WBA focusing on risk assessment in the acute setting
	3-min		WBA form	
	5-min		Group discussion	- Group A = Stage 1
	2-min		Global rating	- Group B = Stage 2
	7-min		Discussion	- Group C = Stage 3
				- Word cloud on PollEverywhere during discussion to maximise opportunity for audience participation
3	3-min	CEX#1	Video	- Mini-CeX of assessment of medication side-effects associated with a SSRI
	3-min		WBA form	
	5-min		Group discussion	- Group A = Stage 3
	2-min		Global rating	- Group B = Stage 1
	7-min		Discussion	- Group C = Stage 2
				- Word cloud on PollEverywhere during discussion to maximise opportunity for audience participation
Optional	3-min	CEX#2	Video	- Mini-CEX involving provision of psychoeducation to a family about psychosis
	3-min		WBA form	
	5-min		Group discussion	- Group A = Stage 2
	2-min		Global rating	- Group B = Stage 3
	7-min		Discussion	- Group C = Stage 1
				- Word cloud on PollEverywhere during discussion to maximise opportunity for audience participation

Participant resources

- WBA form pack (Group A/B/C)
- Developmental Descriptors table
- Response cue (see each task)

Facilitator resources

- [Workshop PowerPoint slides]
- Appendix 6   Activity 3: WBA ratings – Assessing level of competence
- Video links (videos are embedded in slides):
    - CbD#1 (https://vimeo.com/288295215/a2703b8bc9)
    - Mini-CEX#1 (https://vimeo.com/288295448/053c6f93f5)
    - Mini-CEX#2 (https://vimeo.com/288295500/907348a589).

Discussion prompts

Video	Aspect	
CbD#1	Perfomance	▪ At the expected level for a Stage 1 trainee
	Stage 1	▪ Appropriate level for early Stage 1, below standard for end of stage
	Stage 2	▪ Below standard for end of stage (moderate concern)
	Stage 3	▪ Below standard for end of stage (high level of concern)
	Feedback	▪ Lack of structure to the presentation ▪ Lack of skills and understanding of risk assessment ▪ Inadequate formulation ▪ Lack of identification of key issues
CEX#1	Perfomance	▪ Meets the standard expected for the end of Stage 2 (Stage 3 entry)*
	Stage 1	▪ Exceeds expectation
	Stage 2	▪ Meeting expectation
	Stage 3	▪ Inconsistently meets expectation, no major concern
	Feedback	▪ Sets up the interview well, including orientation ▪ Structured and systematic approach, covers broad range of relevant SE concerns (with some omissions) ▪ Good mix of open and closed questions, patient focused interviewing style ▪ Able to ask sensitive questions appropriately
CEX#2	Perfomance	▪ At the expected level for a Stage 1 trainee*
	Stage 1	▪ Appropriate for early Stage 1, inconsistency met, not ready to transition to Stage 2
	Stage 2	▪ Not meeting expectation (moderate concern)
	Stage 3	▪ Not meeting expectation, concerns (high level of concern)
	Feedback	▪ Inappropriate interview set up: seated on table above family, inadequate introduction ▪ Lack of consideration of family/carer concerns: nil agenda established, nil opportunity for questions ▪ Inadequate description and use of jargon, psychoeducation not provided ▪ Paternalistic stance

Activity 4:   Working through challenges arising in supervision (30-minutes)

Overview

This task provides opportunities for participants to explore different perspectives and approaches to problem solving around common challenges that can arise in supervision.

Learning objectives:

Participants will be able to demonstrate:

1. Awareness of common challenges that can arise in supervision, such as:
   - Non/late-attendance for duties
   - Meeting the educational needs of high functioning trainees
   - Unrealistic expectations around completion of in training assessments
   - Avoidance of supervision and assessments
   - Obsessionality
   - Transition to the consultant role
   - Accommodating disability.

2. Awareness of different approaches to problem solving around these challenges, such as:
   - Clearly establishing expectations and boundaries associated with supervision
   - Use of feedback frameworks
   - Use of learner centred teaching principles
   - Use of WBAs as a tool to facilitate structured feedback
   - The use of mid-term ITAs and Supportive Plans
   - Involvement of the Chief Training Supervisor and Director of Training
   - Support services including the Trainee Welfare Line, Employee Assistance Service, and Doctor's Health Advisory Service.

Activity overview

This activity involves group-based discussion of at least two scenarios describing common challenges that can arise in supervision. For each scenario participants are provided with the following prompts will guide the facilitated discussion:

1. What issues do you need to consider?
2. What problems might emerge?
3. How would you approach supervision with this trainee?

The facilitator(s) will actively work to encourage participation from VC participants.

Activity schedule:

	Time	Task focus		Detail
1	2-min	Task orientation		- Orientation to task requirements
	3-min	Concept revision		- Completion of live polling quiz on PollEverywhere to ensure all participants understand core concepts (see Appendix 5)
2	2-min	*Scenario 1 **	Scenario	- Read scenario
	3-min		Prompt 1	- Facilitate discussion based on the prompts allowing 3-minutes per prompt
	3-min		Prompt 2	
	3-min		Prompt 3	- Word cloud on PollEverywhere to maximise opportunity for audience participation
2	2-min	*Scenario 2 **	Scenario	- Read scenario
	3-min		Prompt 1	- Facilitate discussion based on the prompts allowing 3-minutes per prompt
	3-min		Prompt 2	
	3-min		Prompt 3	- Word cloud on PollEverywhere to maximise opportunity for audience participation
* Choose scenarios from the available set in Appendix 8				

Participant resources:

▪ None

Facilitator resources:

▪ [Workshop PowerPoint slides]
▪ Appendix 7   Working through Challenges in supervision – Core knowledge

Discussion prompts:

Prompt 1   What issues do you need to consider?
Prompt 2   What problems might emerge?
Prompt 3   How would you approach supervision with this trainee?

Activity 5: Workshop feedback (5-minutes).

Overview

Workshop feedback will be used to adapt the program in the future.

Presentation feedback

1. How did you participate in the workshop today?

2. I am confident in my understanding of the expectations of a RANZCP supervisor

3. This supervisor accreditation workshop was better than previous workshops I have attended

4. How would you rate the content?

5. How would you rate the facilitator(s)?

6. Use of live polling improved the learning experience

7. What did you like most about this session?

8. How would you improve this session?

Appendix 1   Finding the eModules on LearnIT

Step #1:

Login to the RANZCP website

Step #2:

Click on LearnIT to enter the learning portal

Step #3:

Access the eModules either by clicking on the hypertext links in this document or by searching within LearnIT

Step #4:

Don't forget to access your course completion record or to print the certificate of completion.

Step #5:

Print your course completion reco

Appendix 2   Documenting eModule completion

Mandatory eModules	Completion		
	Date	CPD record attached	Certificate attached
Training Program - In-Training Assessments			■
Training Program - Observed Clinical Activity			■
Giving feedback to trainees*			■
Communication: Performance feedback for positive change – Part 1		■	
Communication: Performance feedback for positive change – Part 2		■	

Optional eModules	Completion		
	Date	CPD record attached	Certificate attached
Training Program – Psychotherapy Written Case			■
Training Program – Scholarly Project			■
Clinical audit in mental health practice: CCQI module 1			■
Conflict management - Conflict management – part 1			■
Conflict management - Conflict management – part 2			■
Managing others		■	
Learner-centred teaching: Part 1 – modifying the current approach*		■	
Learner-centred teaching: Part 2 – problem-based learning*		■	

You will need these details on the day to log into the interactive polling

Getting started on PollEverywhere

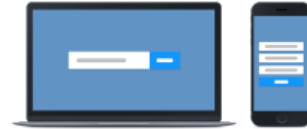- Use your smartphone, tablet or laptop and go to the following URL:

    PollEv.com
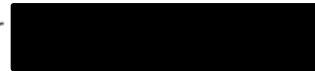
- Join presentation:

    stephenparke422

- Enter your initials

Web

1 Go to **PollEv.com**

2 Enter ▮▮▮▮▮▮▮▮▮▮

Appendix 4   Activity 1: PollEverywhere participant questions

Q1   Years of experience as a RANZCP supervisor:
a. <12 months
b. < 3 years
c. < 5 years
d. < 10 years
e. < 20 years
f. 20+ years

Q2   Current area of practice:
a. Adult psychiatry (acute/community/rehabilitation)
b. Child and adolescent psychiatry
c. Consultation-Liaison psychiatry
d. Forensic psychiatry
e. Psychotherapy
f. Psychiatry of Old Age
g. Other

Q3   Trainee stage predominantly supervised:
a. Stage 1
b. Stage 2
c. Stage 3
d. Fellows in training

Q4   I am confident in my understanding of the expectations of a RANZCP supervisor:
a. Strongly disagree
b. Disagree
c. Neutral
d. Agree
e. Strongly agree.

Q5   Supervision requirements of the 2012 Fellowship program are well tailored to meet the educational needs of trainees:
a. Strongly disagree
b. Disagree
c. Neutral
d. Agree
e. Strongly agree.

Appendix 5   Activity 2: Revision of EPA and OCA requirements

Q1   For each 6-months FTE of training the minimum number of EPAs a trainee must complete is:

   a.   0 – Trainees must complete a minimum of 6 WBAs
   b.   1 – Unless they are in the first 6-months of Stage 1
   c.   2 – Unless they are in the first 6-months of Stage 1
   d.   3 – Unless they are in the first 6-months of Stage 1

Q2   Stage 1 trainees can complete:

   a.   Stage 1 EPAs
   b.   Stage 1 EPAs and Stage 2 General Psychiatry EPAs
   c.   Stage 1 EPAs and Stage 2 General Psychiatry & Psychotherapy EPAs
   d.   Stage 1 and Stage 2 EPAs
   e.   Any EPAs provided competence is demonstrated

Q3   Only meeting the minimum EPA requirement will always create a barrier to progression in:

   a.   Stage 1 only
   b.   Stage 2 only
   c.   Stage 3 only
   d.   All stages
   e.   No stages

Q4   For each 6-months FTE of training the minimum OCA requirement is:

   a.   1x OCA that cannot be also counted towards an EPA
   b.   1x OCA that can also be countered towards an EPA
   c.   1x OCA completed at a passing standard
   d.   1x OCA completed at a passing standard that can also be counted towards an EPA

Q5   Part-time trainees undertaking more than 2-months FTE of training in a 6-month period must complete:

   a.   EPA and OCA requirements on a pro-rata basis
   b.   1x EPAs and 1x OCA
   c.   1x EPA and ensure 1x OCA is completed per 6-months FTE of training
   d.   Complete 2x EPAs and 1x OCA

Appendix 6   Activity 3: WBA ratings – Assessing level of competence

CbD#1   Based on the current assessment at what level do you think the trainee is functioning at:

    a. Below the expected level for entry to training
    b. At the expected level for a Stage 1 trainee*
    c. Meets the standard expected for the end of Stage 1 (Stage 2 entry)
    d. Meets the standard expected for the end of Stage 2 (Stage 3 entry)
    e. Meets the standard expected for the end of Stage 3 (Junior Consultant level)

Mini-CEX#1   Based on the current assessment at what level do you think the trainee is functioning at:

    a. Below the expected level for entry to training
    b. At the expected level for a Stage 1 trainee
    c. Meets the standard expected for the end of Stage 1 (Stage 2 entry)
    d. Meets the standard expected for the end of Stage 2 (Stage 3 entry)*
    e. Meets the standard expected for the end of Stage 3 (Junior Consultant level)

Mini-CEX#2   Based on the current assessment at what level do you think the trainee is functioning at:

    a. Below the expected level for entry to training
    b. At the expected level for a Stage 1 trainee*
    c. Meets the standard expected for the end of Stage 1 (Stage 2 entry)
    d. Meets the standard expected for the end of Stage 2 (Stage 3 entry)
    e. Meets the standard expected for the end of Stage 3 (Junior Consultant level)

Q1   If during the first few weeks of the rotation a supervisor becomes concerned that a trainee may meet the expected standard by the end of term:

   a. Sufficient time needs to be provided for the trainee to improve their performance prior to the completion of the mid-term ITA
   b. **A mid-term ITA should be initiated with a view to developing a Supportive Plan**
   c. The supervisor should make the trainee aware of these concerns and discuss how performance can be improved prior to the mid-term ITA.

Q2   How often should a mid-term ITA should be completed:

   a. Once, no more than 3-months into the 6-month term
   b. Once, as soon as performance related concerns emerge
   c. **As often as necessary, and as soon as performance related concerns emerge.**

Q2   Before finalizing a Supportive Plan with a trainee the supervisor must:

   a. Discuss their concerns with the trainee and the DOT or delegate (eg CTS)
   b. Try to identify factors affecting the trainee's performance
   c. Commit to reviewing progress towards the identified goals with the trainee within 3 months or prior to the end of the rotation, whichever comes first
   d. **All of the above.**

Dr A	• Dr A is a Stage 1 trainee who has previously worked as a GP Registrar. • He has only been in the community term 1 week but already the staff and you are noticing a pattern of late arrivals at work and turning up late for his clinics • You are about to have your first supervision session with Dr A
Dr B	• Dr B is a Stage 2 trainee who is described to you as a 'star' registrar by her previous supervisor • You have been told she is functioning at a level of a Stage 3, and can work autonomously without requiring 'helicopter' supervision • She is keen to have her first supervision session with you, and has already emailed you a list of the 6 EPAs she is expecting you to support her to complete this term.
Dr C	• Dr C is a late Stage 3 trainee who is described as being very good with patients and thinks deeply about her work • Previous supervisors have identified that she seems to have an anxious avoidance about the transition to being a consultant • She has not started on her scholarly project and has not written up the psychotherapy case. Last term she did not submit his ITA by the deadline
Dr D	• Dr D is a Stage 2 trainee who seems to be struggling in his first community term (Adult). No concerns arose during Stage 1 while he worked in inpatient settings • The team have noticed that he often defers making clinical decisions without seeking advice from the consultant and/or the hospital pharmacist. • During observed interviews he struggles with time management, but defensively explains this as a consequence of being observed
Dr E	• Dr E commenced with working with you in inpatient setting this week. He is a 5th year trainee and the only exam he has passed so far is the MCQ. • You received feedback from his previous supervisor that he is 'generally passable but not a high flyer'. • At your first supervision session he informs you he was recently diagnosed with a dyslexia which means he cannot be expected to write extensive notes or reports due to the high demands of the inpatient setting. • He also tells you that he is expecting you will help him to get over the line in the Essay Style Exam which he has failed twice.
Dr F	• Dr F is completing an Adult Community term. • Team members have reported to you that his manner is abrupt and dismissive towards them, and paternalistic towards patients. • On completion of the mid-term ITA you tick many boxes as 'inconsistently met'. You raise concerns about the possibility of him not passing the term. • He is dismissive of your feedback, indicates that you have been unfair, and states his intention to lodge a formal complaint.

Dr G	- Dr F is new to the service. They have recently moved here from another state. They are currently part-way through Stage 2 training. - To your (and the trainee's) knowledge, they have had no prior unsatisfactory terms and from what you have heard they came with positive references. - You notice early in the term that the trainee seems to lack some core knowledge and clinical experience that you would have expected of a trainee at this stage of training.