

SUPERVISOR OF TRAINING INFORMATION MANUAL

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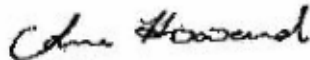
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FOREWORD

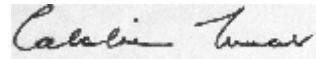
This information package has been developed to assist Supervisors of Training to carry out their role in the College's training program. It includes a summary of key elements of the program as well as a copy of the Training Program Handbook which gives detailed information about all aspects of training.

Information is correct as at February 2006. However, some information will change over time, and the package should be seen as an evolving document. It is bound in a loose-leaf binder so that as new or revised sections are sent to you, they can be inserted and the package can remain a current resource on all aspects of your role.

College appreciates the crucial role that Supervisors of Training play in the education and development of dermatology trainees, and is committed to providing you with the support you need to carry out this valuable role. We welcome your feedback on any aspect of training.



Anne Howard
PRESIDENT



Caroline Mercer
CHIEF CENSOR

February 2006

TRAINING YEAR CALENDAR 2006

January
February
March <ul style="list-style-type: none">▪ Formative In-Training Assessments▪ Biennial Training Conference, 25 – 26 March, Sydney
April
May <ul style="list-style-type: none">▪ “Teaching on the Run” Supervisor Training Workshop, 13 May▪ Annual Scientific Meeting, 14-17 May, Melbourne
June <ul style="list-style-type: none">▪ Clinical Sciences and Pharmacology Examinations , 6 June▪ Fellowship Written Examination, 6 & 7 June▪ Summative In-Training Assessments
July
August <ul style="list-style-type: none">▪ Fellowship Clinical Examination, 4 & 5 August, Brisbane
September <ul style="list-style-type: none">▪ Formative In-Training Assessments
October <ul style="list-style-type: none">▪ ACD Biennial Surgical Meeting, 13 – 15 October, Barossa Valley
November <ul style="list-style-type: none">▪ Clinical Sciences and Pharmacology Examinations, 13 November
December <ul style="list-style-type: none">▪ Summative In-Training Assessments

STRUCTURE OF THE TRAINING PROGRAM

The training program requires a minimum of four years full-time (or equivalent) training. Trainees who do not satisfy all the requirements of the training program, including a pass in both the written and clinical Fellowship examinations, in their fourth year of training must complete an additional year of supervised training. This may be undertaken in a teaching hospital or a private practice or a combination of both.

Trainees pass through two defined stages during the course of their training program. These stages are designed to facilitate the progressive and cumulative acquisition of knowledge and skills. Each stage must be completed satisfactorily before the trainee can move on to the next.

1. Basic Training (years 1 & 2)

The purpose of basic training is to build on existing skills so that trainees acquire broad knowledge of the theory and practice of dermatological medicine and the basic sciences underpinning them. It is designed to give the basic trainee a sound base from which to further develop their skills in later years of the program. To be eligible to proceed to advanced training, trainees must pass the Clinical Sciences Examination and the Pharmacology Examination within the first 18 months of training and perform satisfactorily in the workplace.

2. Advanced Training (years 3, 4 & 5)

During advanced training, trainees acquire skills in the treatment of more complex dermatological conditions and are given increased responsibility for patient management. Trainees are eligible to apply to sit the Fellowship examinations in their fourth year of training. Those who pass both the written and clinical Fellowship Examinations and satisfy all other requirements of the training program in their fourth year of training are not required to undertake a fifth year of training. Trainees undertaking a fifth year of training who plan to spend all or part of this year in a position other than an accredited training program must apply in advance to the Board of Censors for accreditation of their fifth year program.

DUTIES OF SUPERVISORS OF TRAINING

Each Australian training institution has a designated Supervisor of Training who is a Fellow of the Australasian College of Dermatologists. In many cases, the Head of Department will also act as the Supervisor of Training. The Supervisor of Training is involved in teaching and supervising trainees as well as providing a path of communication between clinical supervisors, trainees, the Head of Department and the Director of Training. In addition, the Supervisor of Training has a key role in the formative and summative in-training assessment of trainees and in counselling trainees who are performing below specified standards.

Duties of Supervisors of Training are to:

- Be familiar with the objectives, curriculum and procedures of the training program.
- Regularly observe trainees with patients, peers and other medical staff.
- Provide constructive feedback to the trainee on his/her performance in both clinical and non-clinical aspects of practice.
- Discuss the trainee's performance with the Head of Department or Director of Training if required.
- Discuss strategies to overcome any weaknesses in performance with the trainee concerned.
- Be responsible for completing trainee formative in-training assessment, in conjunction with each trainee they supervise.
- Be responsible for completing twice-yearly summative in-training assessment forms, and ensuring that these assessment forms are also completed by two clinical supervisors, for each trainee under their supervision.
- Provide an initial orientation to the training program to first year trainees at their institution.

You should also have a broad understanding of the roles of other Fellows in the training program:

Director of Training

A Director of Training is appointed by each State Faculty for an initial term of three years, with the possibility of reappointment for a further three years. The Director of Training has a key role in overseeing the training program in his/her state and is a line of communication between trainees and the College through the Board of Censors¹.

Specifically, for his or her state, the duties of the Director of Training are to:

- Be involved in the selection and appointment of trainees.
- Be familiar with the objectives, curriculum and procedures of the training program.
- Monitor the performance of all trainees.

¹ In 2006 the College implemented changes to its governance structures. The line of communication between the DOTs and College is now through the Director responsible for implementation of the training program. More information about the changes to the governance structures is in Section 1.1 and Attachment 1 of this submission.

- Liaise with Supervisors of Training and Heads of Department regarding trainee performance.
- Ensure that an adequate rotation scheme operates so that all trainees are exposed to all the various aspects of dermatology as outlined in the curriculum.
- Ensure that all requirements of the curriculum are met for trainees in his/her state.
- Ensure that each trainee is assessed by an appropriately qualified dermatologist who is a member of the Australasian College of Dermatologists as being competent to perform those procedures outlined in the procedural dermatology curriculum.
- Notify the Chief Censor of any trainees who are not performing satisfactorily in any aspect of their training.
- At the request of a Head of Department, be involved in remedial action for a trainee who is not performing satisfactorily in any aspect of their training.
- Facilitate feedback and communication between trainees, supervisors, Heads of Departments and the Board of Censors.
- Ensure that Supervisors of Training and Clinical Supervisors meet their responsibilities for in-training assessment of trainees.
- Review each trainees' Training Program Record Book annually.
- Act as an independent advisor on issues those trainees may not feel comfortable discussing with their Head of Department and/or Supervisors.

Head of Department

Each training post has a designated Head of Department. The Head of Department has specified duties as part of his or her employment in the hospital or other institution and these are not discussed in this document. The following outlines the position only as it relates to the ACD training program.

The Head of Department should:

- Be familiar with the objectives, curriculum and procedures of the training program.
- Ensure that Supervisors of Training and Clinical Supervisors are aware of their role in the training and assessment of trainees.
- Advise College of trainees employed in his/her department.
- Advise College of the Supervisor of Training in his/her department.
- If necessary, liaise with the Supervisor of Training and/or State Director of Training to manage any poorly performing trainees.
- If necessary, provide constructive feedback to the trainee on his/her performance in the clinical setting.
- Advise the trainee on any administrative issues related to their employment in the training institution.

Clinical Supervisors

All Fellows of the ACD who teach and/or supervise trainees in the workplace are known as Clinical Supervisors. The primary role of the Clinical Supervisor is to provide on the job teaching and feedback to trainees.

In general, Clinical Supervisors should:

- Be familiar with the objectives, curriculum and procedures of the training program.
- Regularly observe trainees with patients, peers and other medical staff.

- Provide constructive feedback to the trainee on his/her performance in the clinical setting.
- Discuss strategies to overcome any weaknesses in performance with the trainee concerned.
- Be responsible for completing summative in-training assessment forms if requested to do so.
- Discuss the trainee's performance with the Supervisor of Training if necessary.

Board of Censors

The Board of Censors consists of the Chief Censor who is appointed for a term of three years and six censors who are each appointed for a term of five years. Specifically, the duties of Censors are to:

- Evaluate and review the trainee selection process
- Review the Training Program Handbook annually
- Develop, evaluate and review the training program curriculum
- Develop, evaluate and review assessment methods and procedures for trainees
- Oversee the formative assessment of trainees.
- Oversee the summative assessment of trainees.

This includes:

- assessing eligibility of trainees to sit for the CSE and Fellowship Examinations
- developing exam questions, cases and scenarios
- organising and coordinating the examinations
- acting as examiners for the oral fellowship examinations
- training additional examiners as needed for the oral fellowship examinations
- marking both written and oral examinations
- giving feedback to trainees who fail any of the summative assessments required in the training program.
- Periodically carry out inspections of training programs to determine if they meet the requirements of the curriculum and make recommendations to Council based on these inspections.
- Develop, organise and evaluate the Biennial Training Conference.
- Attend Board of Censors meetings and teleconferences as required.
- Ensure that the training program meets the requirements for AMC accreditation.
- Contribute to the preparation of documentation required for ongoing accreditation with the AMC.

In addition to the above duties, the Chief Censor should:

- Coordinate the activities of Board of Censors, including meetings, workloads and responsibilities of individual Censors.
- Submit written reports to the Board of Directors as required.
- Be a member of College Executive and attend Executive meetings and teleconferences as required².

² In 2006 the College implemented changes to its governance structures and there is no longer a College Executive. The duties of the College Executive are now performed by the Board of Directors. More information about the changes to the governance structures is in Section 1.1 and Attachment 1 of this submission.

- Attend other meetings related to the training program as required.
- Communicate the outcomes of any meetings attended in his/her capacity as Chief Censor, to the Board of Censors.
- Liaise with State Directors of Training to obtain information on trainee concerns and performance.
- Monitor the progress of those trainees who have been brought to the Chief Censor's attention by the state Director of Training as performing unsatisfactorily in any aspect of their training.
- Be the chairman of the interview panel for consideration of the qualifications of overseas trained specialists.

OVERVIEW OF ASSESSMENT IN THE TRAINING PROGRAM

Trainees are assessed using a broad range of complementary assessment methods. The full range of competencies required by a specialist dermatologist are assessed, including communication skills, professionalism and ethics as well as the theory and practice of dermatology.

Why is assessment important?

Assessment can have a range of functions. In medical colleges it has traditionally been a means of ensuring certain minimum standards are met by trainees before they can proceed to Fellowship. However, assessment can and should play a broader role. Assessment can also be used to:

- monitor trainee progress
- drive learning
- provide feedback to trainees and supervisors and
- evaluate the extent to which the program is achieving its objectives.

As part of their review of the College's education and training programs, the Australian Medical Council (AMC) will scrutinise our assessment processes. College must be able to demonstrate that it employs appropriate reliable and valid forms of both summative and formative assessment.

What are Formative and Summative Assessment?

It is important that supervisors understand the distinction between formative and summative assessment.

Formative assessments are those which occur throughout, and contribute to, the learning process. They are educational and developmental rather than judgmental. The aim of formative assessment is to enable trainees to become aware of the strengths and weaknesses in their performance, identify their learning needs, and with the assistance of their supervisors, to take steps to address those needs. Confidential and non-threatening feedback is a crucial element of formative assessment. Feedback given as part of formative assessment helps trainees become aware of any gaps that exist between desired standards of performance and their current knowledge, skills and abilities. It encourages trainees to focus their attention on areas requiring improvement.

A formal process of Formative In-Training Assessment is conducted regularly throughout the ACD training program. Full details are given in the *Guide to Formative In-Training Assessment*.

Summative assessment, on the other hand, is a judgment about someone's performance at a particular point in time against defined criteria. Summative assessment can include a formative element (for example, trainees who fail the fellowship examination may be given feedback about their performance which they can use to guide their learning for their next attempt at the examination) but formative assessments cannot also be summative.

A range of summative assessments are employed in the ACD training program:

Summative In-Training Assessment. Summative in-training assessment aims to assess whether trainee performance has met required standards, relative to level of training, during the preceding 6 months. Trainees are required to perform satisfactorily in these assessments in order to progress through the training program. Supervisors of Training and two clinical supervisors are asked to complete the summative in training assessment forms for each trainee twice yearly (in June and December). Full details are given in the *Guide to Summative In-Training Assessment*.

Clinical Sciences and Pharmacology Examinations. These written examinations must be passed within the first 18 months of training. Holders of the Basic Sciences or Part 1 Examination are exempt from the Clinical Sciences Examination but must pass the Pharmacology Examination.

Fellowship examinations. The Fellowship examinations are conducted in two parts. A written examination is held in June of each year in major Australian centres. Clinical examinations, for those candidates successful in the written examination, are held approximately six weeks later in one major Australian centre.

Assessment of Competence. Trainees' performance in essential surgical procedures and procedures involving other essential treatment modalities is assessed on an ongoing basis throughout their training. Trainees progress from observation through to supervised performance of such procedures. When supervisors believe that a trainee is competent to perform a particular procedure unsupervised they undergo an "assessment of competence" in this procedure. Successful assessment indicates that they are competent to perform the procedure/treatment modality unsupervised, and must be recorded in the Assessment of Competence section of the trainee's Training Program Record Book. To be eligible to sit for the Fellowship Examination, trainees must have been assessed competent in all essential procedures/treatment modalities listed in the Training Program Record Book.

Other Training Requirements

Publication Requirements. Trainees must prepare and have published (or at least accepted for publication) two papers of a significant nature on a dermatological subject. At least one of these papers must be published in The Australasian Journal of Dermatology (AJD) and the other may be published in a peer reviewed journal acceptable to the Board of Censors. The trainee must be the primary author. The minimum requirement is for a case report with a full literature review or equivalent, however, papers with original work are encouraged.

Presentation Requirements. Trainees are required to present at least one paper in the Registrars' Forum or other session, or submit a poster presentation, at the Annual Scientific Meeting (ASM) of the ACD. The subject of this presentation can overlap with that of their publications. Trainees commencing from 2005 are also required to present a second paper or poster. This may be at either the ACD ASM, the Australasian Dermatopathology conference, the Australian Society of Dermatology Research meeting, or another meeting of stature, subject to approval in advance from the Board of Censors.

Training Program Record Book. The Training Program Record Book is designed to assist trainees to monitor their progress and to enable trainees to document that they have satisfied the requirements of the training program. It also helps Supervisors and Directors of Training to monitor trainees' progress. Record Books must be reviewed by the Supervisor of Training at the commencement of each rotation, and reviewed and signed by Directors of Training annually.

All forms of assessment are discussed in detail in the Training Program Handbook.

OUTLINE OF IN-TRAINING ASSESSMENT PROCESSES

There are two separate processes. Whilst each assesses trainee workplace performance, they have different objectives and formats. The name of each assessment reflects its purpose. The two assessments are:

1. Formative in-training assessment (FITA)
2. Summative in-training assessment (SITA).

The table below provides a very brief overview and a more detailed description follows in the enclosed *Guide to Formative In-Training Assessment* and *Guide to Summative In-Training Assessment*.

March	Formative in-training Assessment (FITA)	<ul style="list-style-type: none"> ▪ Completed by trainee and Supervisor of Training ▪ Purely educational ▪ Confidential between the trainee and Supervisor of Training ▪ Does not affect progression through the training program ▪ Gives trainee opportunity to address issues prior to summative in-training assessments ▪ Trainee and Supervisor must sign FITA log in Training Program Record Book
June	Summative in-training Assessment (SITA)	<ul style="list-style-type: none"> ▪ Completed by the Supervisor of Training and two Clinical Supervisors ▪ Assesses whether trainee performance has met required standards (relative to level of training) during preceding 6 months ▪ Provides a process to apprise trainees who are not meeting required standards that their performance needs to improve, and for these trainees, determines specific areas where performance should be improved ▪ Provides a formal mechanism for documenting unsatisfactory performance ▪ Can impact on progression through the training program ▪ Trainee must submit signed form to College.
September	Formative in-training Assessment (FITA)	As for March assessment.
December	Summative in-training Assessment (SITA)	As for June assessment.

GUIDE TO FORMATIVE IN-TRAINING ASSESSMENT (FITA)

The formative in-training assessment process aims to assist trainees in their learning. It is a purely educational process which will not affect trainees' progression through the training program.

Objectives

The objectives of formative in-training assessment are to:

- Provide feedback to trainees about their performance
- Encourage trainees to take an active role in planning their learning
- Assist trainees to develop plans for future learning (particularly for remediation of any weaknesses identified through the assessment)
- Provide trainees with the opportunity to address aspects of their performance prior to the six monthly summative assessment.

Format

A short form is completed by the trainee and his/her Supervisor of Training (after consultation with Clinical Supervisors). The form provides a starting point for the trainee to consider their performance and their future learning needs, and to stimulate discussion between the Supervisor of Training and trainee.

Procedure:

1. The trainee completes required sections of form and forwards it to Supervisor of Training who completes the designated sections.
2. The trainee and Supervisor of Training meet to discuss progress and learning goals.
3. Trainee and supervisor sign formative in-training assessment log in Training Program Record Book to confirm that the assessment has taken place.

TRAINEE FORMATIVE IN-TRAINING ASSESSMENT FORM

What is formative assessment?

Formative assessments are those which occur throughout, and contribute to, the learning process. They are educational and developmental rather than judgemental.

What are the objectives of this assessment?

Trainee formative assessment aims to provide a mechanism for trainees to receive feedback about their performance, to reflect on their learning needs, and with the assistance of their supervisors, to develop strategies to meet their learning needs. *It is a purely formative assessment – it does not affect trainees' progression in the program or impact on their final results.* However, trainees and Supervisors of Training must sign the formative in-training assessment log in the Training Program Record Book, to confirm that the assessment has taken place.

Instructions for trainees:

Complete sections A & B of the attached form.

When considering your responses to section B, you may reflect on your:

Responsibility, initiative and punctuality in the workplace; reliability regarding patient care; rapport and communication with patients and their families; relationship with other health professionals; contribution to educational meetings; dermatological knowledge; clinical judgement; skills in morphological examination and history taking; skills in cryosurgery, minor dermatological surgery, phototherapy, excisional dermatological surgery and laser surgery; and acceptance of criticism.

As an adult learner it is essential that you take responsibility for your learning. It is important to be honest about both your strengths and areas where you think you need to improve. This process is about helping you to perform as well as you can to assist you on your path to Fellowship of the College. It is in your interest to identify areas in which you require improvement early in your training so that your supervisors may help you to devise and implement strategies for improvement.

After completing sections A & B you should pass the form on to your Supervisor of Training who will fill out Section C and arrange a time to meet to discuss your performance. At this meeting you and your Supervisor of Training should agree on learning goals for the coming 3 months (Section D) and agree on how you will achieve these (Section E). You should retain the form for your records. Both you and your Supervisor of Training must sign the formative in-training assessment log in your Training Program Record Book to confirm that the assessment has taken place.

It is your responsibility to ensure that your formative in-training assessment log is signed following each assessment. It is open to College not to recognise a period of training time not covered by such assessments.

Instructions for Supervisors of Training:

Each trainee under your supervision will give you a copy of the Formative In-Training Assessment Form with sections A and B completed. You should arrange a time to meet with the trainee to discuss their performance.

Prior to the meeting you should talk to Clinical Supervisors within the department to get a picture of the trainee's performance and then complete section C. You might like to consider the trainee's responsibility, initiative and punctuality in the workplace; reliability regarding patient care; rapport and communication with patients and their families; relationship with other health professionals; contribution to educational meetings; dermatological knowledge; clinical judgement; skills in morphological examination and history taking; skills in cryosurgery, minor dermatological surgery, phototherapy, excisional dermatological surgery and laser surgery; and acceptance of criticism. It is essential that you are honest in your feedback. Your comments are for learning purposes only and will not effect trainees' progression. It is in trainees' best interests to be given feedback about both their strengths and areas needing improvement, so that they can be focused in their learning and remedy any areas of weakness as soon as possible in their training.

After completing section C you should meet with the trainee to discuss their performance and agree on learning goals and strategies for the coming 3 months (for advice on how to conduct an appraisal/feedback/performance review refer to your Supervisor of Training Manual). The process is confidential and forms are not sent to College. However, both you the trainee must sign the formative assessment log in the trainee's Training Program Record Book to confirm that the assessment has taken place.

TRAINEE FORMATIVE IN-TRAINING ASSESSMENT FORM

SECTION A. TRAINING DETAILS

Trainee:	Year of Training:	FT/PT
Hospital:	Supervisor of Training:	
Report Period: March/Sept	Head of Department:	

SECTION B. TRAINEE'S SELF-ASSESSMENT OF PROGRESS AND PERFORMANCE

Reflect on your performance over the past 3 months to complete the items below:

Achievements:

My areas of strength:

Areas in which I need to improve:

SECTION C. SUPERVISOR OF TRAINING'S ASSESSMENT OF TRAINEE'S PROGRESS & PERFORMANCE

Reflect on the trainee's performance over the past 3 months to complete the items below:

Achievements:

Areas of strength:

Areas in which improvement is needed:

SECTION D. LEARNING GOALS FOR NEXT 3 MONTHS

SECTION E. HOW LEARNING GOALS CAN BE MET

SAMPLE COMPLETED TRAINEE FORMATIVE IN-TRAINING ASSESSMENT FORM

SECTION A. TRAINING DETAILS

Trainee: *Dr Registrar*

Year of Training: *2*

FT/PT

Hospital: *Royal Sydney*

Supervisor of Training: *Dr Sot*

Report Period: *March/Sept*

Head of Department: *Dr Hod*

SECTION B. TRAINEE'S SELF-ASSESSMENT OF PROGRESS AND PERFORMANCE

Reflect on your performance over the past 3 months to complete the items below:

Achievements:

Have been assessed as competent in cryosurgery. Improved knowledge in pharmacology and passed pharmacology exam. Surgical skills have improved.

My areas of strength:

My general dermatology knowledge is good. Well developed communication skills.

Areas in which I need to improve:

I have not yet had any experience in phototherapy.

SECTION C. SUPERVISOR OF TRAINING'S ASSESSMENT OF TRAINEE'S PROGRESS & PERFORMANCE.

Reflect on the trainee's performance over the past 3 months to complete the items below:

Achievements:

General dermatology knowledge has increased markedly in the past 3 months and surgical skills are progressing well.

Areas of strength:

Very motivated and conscientious. Always willing to ask questions and listen to advice. Good rapport with patients and colleagues.

Areas in which improvement is needed:

Dermatology knowledge has improved but is still somewhat below expected level. Sometimes seems reluctant to contribute in tutorials.

SECTION D. LEARNING GOALS FOR NEXT 3 MONTHS

Continue to improve general dermatology knowledge.

Increase participation in tutorials.

Increase exposure to phototherapy.

SECTION E. HOW CAN LEARNING GOALS BE MET

Private study based on chapters of Rook suggested by Supervisor of Training.

Will present at least 1 case at tutorials over the next 3 months.

Will organise go to Dr Green's rooms twice over next 3 months as an observer in phototherapy.

GUIDE TO SUMMATIVE IN-TRAINING ASSESSMENT (SITA)

The summative in-training assessment process assesses whether trainees are meeting required standards of performance in the workplace. This assessment may impact on trainees' progression through the program.

Objectives

The objectives of the summative in-training assessment process are to:

- Assess whether trainee performance has met required standards (relative to level of training) during preceding 6 months.
- Determine whether trainee performance needs to be more closely supervised.
- Provide a process to apprise trainees who are not meeting required standards that their performance needs to improve, and for these trainees, determine specific areas where performance should be improved.
- Provide a formal mechanism for documenting unsatisfactory performance.

Format

The Supervisor of Training and two Clinical Supervisors who are best positioned to assess the trainee (mutually agreed upon by the trainee and Supervisor of Training) complete assessment forms, rating the trainee on 12 key attributes. The Supervisor of Training collates these into a summary, which is discussed with the trainee.

Process:

1. Trainee downloads forms from the College website and asks Supervisor of Training and two nominated Clinical Supervisors to complete them.
2. Supervisor of Training summarises each trainee's assessments using the Summary of Ratings Form.
3. Trainee and Supervisor of Training meet to discuss the assessment. All trainees receive feedback (a summative assessment can also have a formative component). Signed summary forms are forwarded to College by the trainee.
4. Trainees whose performance is deemed unsatisfactory according to defined criteria are required to complete a Performance Improvement Form and receive close supervision for the following six months. Unsatisfactory performance in a summative in-training assessment is defined as:
 - Receiving one or more 'does not meet standard' ratings or
 - Receiving 'borderline' ratings from 2 or more supervisors on three or more competency areas.

TRAINEE SUMMATIVE IN-TRAINING ASSESSMENT FORM

1. Responsibility, initiative and punctuality in the workplace	
Standard: The trainee carries his or her share of the workload, is usually available when on duty, is conscientious and responsible, keeps good medical records and is punctual to work and tutorials.	<input type="checkbox"/> Better than expected standard <input type="checkbox"/> Consistent with level of training <input type="checkbox"/> Borderline <input type="checkbox"/> Does not meet standard <input type="checkbox"/> Insufficient opportunity to observe
2. Reliability regarding patient care	
Standard: The trainee is usually reliable and conscientious about patient care, usually recognises his/her limitations and generally initiates adequate follow-up.	<input type="checkbox"/> Better than expected standard <input type="checkbox"/> Consistent with level of training <input type="checkbox"/> Borderline <input type="checkbox"/> Does not meet standard <input type="checkbox"/> Insufficient opportunity to observe
3. Rapport and communication with patients and their families	
Standard: The trainee is generally effective in communicating with patients, shows appropriate rapport, provides adequate information, recognises patients' rights and respects patient confidentiality.	<input type="checkbox"/> Better than expected standard <input type="checkbox"/> Consistent with level of training <input type="checkbox"/> Borderline <input type="checkbox"/> Does not meet standard <input type="checkbox"/> Insufficient opportunity to observe
4. Relationship with other health professionals (dermatologists, fellow registrars, nurses and others)	
Standard: The trainee generally relates well to others and works well in a team.	<input type="checkbox"/> Better than expected standard <input type="checkbox"/> Consistent with level of training <input type="checkbox"/> Borderline <input type="checkbox"/> Does not meet standard <input type="checkbox"/> Insufficient opportunity to observe
5. Contribution to rounds, clinics, educational meetings etc	
Standard: The trainee usually attends hospital clinical meetings and meets his/her teaching responsibility	<input type="checkbox"/> Better than expected standard <input type="checkbox"/> Consistent with level of training <input type="checkbox"/> Borderline <input type="checkbox"/> Does not meet standard <input type="checkbox"/> Insufficient opportunity to observe
6. Knowledge in dermatology	
Standard: The trainee possesses sound knowledge of current dermatological literature and evidence based medicine.	<input type="checkbox"/> Better than expected standard <input type="checkbox"/> Consistent with level of training <input type="checkbox"/> Borderline <input type="checkbox"/> Does not meet standard <input type="checkbox"/> Insufficient opportunity to observe
7. Diagnostic skills in morphological examination	
Standard: The trainee is usually able to recognise most signs, identify the disease and make an adequate differential diagnosis.	<input type="checkbox"/> Better than expected standard <input type="checkbox"/> Consistent with level of training <input type="checkbox"/> Borderline <input type="checkbox"/> Does not meet standard <input type="checkbox"/> Insufficient opportunity to observe
8. Diagnostic skills in history taking	
The trainee generally takes a good history that sufficiently focuses on important details.	<input type="checkbox"/> Better than expected standard <input type="checkbox"/> Consistent with level of training <input type="checkbox"/> Borderline <input type="checkbox"/> Does not meet standard <input type="checkbox"/> Insufficient opportunity to observe
9. Clinical judgment	
Standard: The trainee usually makes sound decisions about clinical management and checks risks if uncertain about intervention.	<input type="checkbox"/> Better than expected standard <input type="checkbox"/> Consistent with level of training

	<input type="checkbox"/> Borderline <input type="checkbox"/> Does not meet standard <input type="checkbox"/> Insufficient opportunity to observe
10. Skill in cryosurgery, minor dermatological surgery and phototherapy	
Standard: The trainee demonstrates competence in carrying out the above procedures and usually is able to correctly choose the appropriate form of treatment.	<input type="checkbox"/> Better than expected standard <input type="checkbox"/> Consistent with level of training <input type="checkbox"/> Borderline <input type="checkbox"/> Does not meet standard <input type="checkbox"/> Insufficient opportunity to observe
11. Skill in excisional dermatological surgery and laser surgery	
Standard: The trainee demonstrates sound technical skill and an understanding of the procedure and in most cases can choose the appropriate procedure.	<input type="checkbox"/> Better than expected standard <input type="checkbox"/> Consistent with level of training <input type="checkbox"/> Borderline <input type="checkbox"/> Does not meet standard <input type="checkbox"/> Insufficient opportunity to observe
12. Acceptance of criticism	
Standard: The trainee accepts criticism and shows commitment to improvement	<input type="checkbox"/> Better than expected standard <input type="checkbox"/> Consistent with level of training <input type="checkbox"/> Borderline <input type="checkbox"/> Does not meet standard <input type="checkbox"/> Insufficient opportunity to observe

13a. In your opinion what area the main strengths of this trainee's performance?

13b. In your opinion what areas of this trainee's performance are most in need improvement?

The summary table is straightforward. However, an example is given below to ensure that there are no misunderstandings:

*In the **EXAMPLE** below, three supervisors have completed assessment forms for a trainee. For competency number 1, one supervisor gives a 'Better than expected standard' rating; one gives 'Consistent with level of training' rating; one gives a 'Borderline' rating in the competency area of responsibility, initiative and punctuality in the workplace..*

A= Better than expected standard B=Consistent with level of training C=Borderline
 D= Does not meet standard N/A=Insufficient opportunity to observe

COMPETENCY	A	B	C	D	N/A
1. Responsibility, initiative and punctuality in the workplace	1	1	1		

TRAINEE SUMMARY

ATTRIBUTE	A	B	C	D	N/A
1. Responsibility, initiative and punctuality in the workplace					
2. Reliability regarding patient care					
3. Rapport and communication with patients and their families					
4. Relationship with other health professionals					
5. Contribution to rounds, clinics, educational meetings, etc.					
6. Knowledge in dermatology					
7. Diagnostic skills in morphological examination					
8. Diagnostic skills in history taking					
9. Clinical judgement					
10. Skills in cryosurgery, minor dermatological surgery and phototherapy					
11. Skills in excisional dermatological surgery and laser surgery					
12. Acceptance of criticism					

STRENGTHS OF TRAINEE:

AREAS FOR IMPROVEMENT:

Procedure for trainees whose performance is deemed unsatisfactory

1. A Performance Improvement Form is completed by the trainee and Supervisor of Training cooperatively.

The form must:

- detail areas of performance that must be improved.
- specify the extent of the improvement expected and time frame in which this improvement will be achieved.
- detail a plan for how this improvement will be achieved.
- acknowledge that the implications of the process have been discussed and understood.

The form is signed by the Supervisor of Training, trainee and Head of Department and the Supervisor of Training forwards the form to College. College forwards a copy to Director of Training.

The trainees' performance is monitored closely for the ensuing 6 months and feedback on progress is given through formative assessment.

2. If, in the next summative in-training assessment, the trainee's performance is satisfactory, the trainee reverts to regular levels of supervision. If the trainee again meets the defined criteria for unsatisfactory performance, then there must be a meeting between the trainee, Supervisor of Training, Head of Department and Director of Training. An independent dermatologist may attend as an observer if the trainee wishes.

The meeting must discuss:

- The trainee's performance and progress
- The areas in which and extent to which the trainees performance must improve and the time frame in which it must improve
- Strategies the trainee can use to improve performance
- Assistance offered to trainee
- The implications for the trainee if his/her performance does not improve to the specified extent within agreed time frames.

The meeting must be minuted by the Director of Training and signed by all parties, with a copy being sent to College who forward a copy to the Chief Censor.

The trainee's performance continues to be closely monitored.

3. If the trainee's performance meets the defined criteria for unsatisfactory performance in a third successive summative assessment, the matter will be referred to the Chief Censor who will check that all documentation relating to the trainee's performance is in order and that all procedures have been followed correctly. If the Chief Censor is satisfied that this is the case, he/she will arrange a meeting of the Board of Censors plus 1-2 dermatologists with local knowledge of the trainee's performance. This group will make a recommendation as to whether the trainee will:

- continue to have performance closely monitored, with no non-accredited time resulting
- continue to have performance closely monitored and have a period of the preceding 18 months not accredited
- be dismissed from the training program.

4. This recommendation will then be presented to Council for a final decision.

PERFORMANCE IMPROVEMENT FORM

SECTION A. TRAINING DETAILS

Trainee:	Year of Training:	FT/PT
Hospital:	Supervisor of Training:	
Report Period: June/December	Head of Department:	

SECTION B. AREAS REQUIRING IMPROVEMENT

Detail the specific areas in which performance must improve.

SECTION C. EXPECTED STANDARDS OF PERFORMANCE

For the areas of performance listed above, specify the standard of performance that the trainee will be expected to have reached by the time of the next summative in-training assessment.

SECTION D. LEARNING PLAN

Outline steps that will be taken to improve performance eg. specific texts to be studied, external courses, regular meetings.

Signature of Supervisor of Training:
Date:

Signature of Head of Department:
Date:

I understand the areas in which my performance needs to improve. I understand that continuing to not meet specified standards of performance may result in a period of training not being accredited or in dismissal from the training program.

Signature of Trainee:
Date:

SAMPLE COMPLETED PERFORMANCE IMPROVEMENT FORM

SECTION A. TRAINING DETAILS

Trainee: *Dr Reg*
FT/PT

Year of Training: *1*

Hospital: *Prince Harry*

Supervisor of Training: *Dr Sot*

Report Period: *June/December*

Head of Department: *Dr Hod*

SECTION B. AREAS REQUIRING IMPROVEMENT

Detail the specific areas in which performance must improve.

Dermatological knowledge - below standard expected for level of training.

Punctuality in the workplace - frequently late for clinics.

Diagnostic skills in history taking - frequently misses essential information.

SECTION C. EXPECTED STANDARDS OF PERFORMANCE

For the areas of performance listed above, specify the standard of performance that the trainee will be expected to have reached by the time of the next summative in-training assessment.

Knowledge in dermatological medicine as outlined in the training curriculum will show improvement particularly in vascular and lymphatic disorders, STDs and dermatitis.

Dr Reg will be punctual to at least 90% of clinics to which he is rostered over the next 6 months.

At the end of the next six month period Dr Reg's diagnostic skills in history taking will be consistent with his level of training as assessed by the summative assessment form.

SECTION D. LEARNING PLAN

Outline steps that will be taken to improve performance eg. specific texts to be studied, external courses, regular meetings.

Will attend all tutorials plus study group and journal club.

Will observe Dr X and Trainee Y who have excellent history taking skills and regularly ask supervisors for feedback on performance in this area.

Home circumstances will be reorganised to facilitate punctuality to clinics.

Supervisor of Training will help Dr Reg to develop a study plan from Rook and Fitzpatrick and will meet monthly to discuss trainee's progress.

Signature of Supervisor of Training:
Date:

Signature of Head of Department:
Date:

I understand the areas in which my performance needs to improve. I understand that continuing to not meet specified standards of performance may result in a period of training not being accredited or in dismissal from the training program.

Signature of Trainee:

Date:

TIPS FOR CONDUCTING FORMATIVE ASSESSMENT

The Formative In-training Assessment process provides for:

- Reflective self-assessment by the trainee
- Constructive feedback from the supervisor, both positive and negative
- Mutual agreements of the next set of training goals
- A plan for how these goals can be achieved.

For formative assessment to be successful both the trainee and supervisor need to be committed to the process. The trainee needs to have a willingness to participate and an understanding of the benefit to be derived from it. The supervisor should have sufficient commitment to the process to provide encouragement to the trainee and allocate the necessary resources to be proficient at giving feedback. College realises that supervisors are busy and that it is difficult to find time to arrange and prepare for meetings with so many other commitments. However, the provision of regular formative assessment and feedback an important aspect of adult learning and is a requirement for continued accreditation with the Australian Medical Council.

Things to bear in mind when conducting a Formative In-training Assessment meeting:

1. The setting

The formative assessment meeting should be private between the supervisor and trainee and should take place in a comfortable setting at a specified time that has been set in advance. A rushed or impromptu corridor consultation does not set the scene for an effective meeting.

The confidentiality of the meeting should also be emphasised. Whilst the formative assessment form, which is the agreed outcome of the meeting signed by both parties, is not confidential, the discussion leading to the agreed outcome *is* confidential.

2. The content

Feedback and goal-setting are the primary components of the formative in-training assessment meeting.

Feedback

Feedback is an essential element in learning. Without feedback it is difficult for those who are learning to know when they are getting things right or wrong. Feedback should be constructive, with suggestions for help and support for the trainee to address any problems.

Trainees need to be aware that this kind of feedback will help them in their training and ultimately should improve their performance in the Fellowship examinations.

The trainee may have had little experience in receiving formal feedback and may be nervous. It is important for the supervisor to be respectful and encourage the trainee to relax.

Tips for giving constructive feedback:

- Be clear in what you say.
- Always begin with something positive or examples of good performance.
- Try to avoid using judgmental words (eg, good, bad, right, wrong, immature).
- Describe specific instances of observed behaviour to support feedback.
- Use statements that present criticism in a supportive ways, eg “how could you have done that better?” rather than, “you made a mess of that”.
- Listen to the trainee.

Goal setting

The supervisor should help the conversation along while ensuring that the trainee is ultimately responsible for planning their own learning. The skill in formative assessment is to help the trainee recognise, or discover for themselves, what they need to achieve. Trainees should be encouraged to keep their goals realistic and achievable. Goals should be:

Specific

Measurable

Achievable

Realistic and

Time bound.

3. The skill set needed

Conducting a formative assessment is not necessarily easy and requires a professional approach. One of the most important skills for both the supervisor and trainee are listening skills. As the person in a position of power, the supervisor, in particular, needs to listen to the views and concerns of the trainee, reflect these back to show that they have been understood, and then work with the trainee to determine the way forward. The ability of the supervisor to establish rapport, to listen and to empathise is at the heart of a successful formative assessment meeting

To be successful at formative assessment, supervisors need to be able to:

- Relate effectively to the trainee
- Listen actively
- Give feedback
- Support and counsel
- Discuss issues without being judgmental
- Help trainees identify learning needs
- Help the trainee identify realistic objectives
- Assist the trainee to construct an achievable learning plan.

These skills do not necessarily come naturally. For this reason they are taught as part of College’s ‘*Teaching on the Run*’ Workshops for supervisors. All supervisors of training are encouraged to attend this course as soon as practical.