Prevocational Training

Term Assessment Form



Note: This form will be translated into an online version prior to implementation. Most of the details in the form will be prepopulated in the e-portfolio, or entered by the prevocational doctor.

| Prevocational doctor | r details | Term | details | | | | | |
|---|--|-----------|--------------------|---------------------------|-----------------------|--|--|--|
| Name: | | | From (dd/mm/yyyy): | | | | | |
| AHPRA registration no.: | | To (dd | /mm/yyyy): | | | | | |
| Assessment type | | Term r | name: | | | | | |
| Midterm | ☐ End-of-term | PGY: | | Term: of | | | | |
| Prevocational doctor se | elf-assessment (optional) | Organi | sation and Dep | partment / Unit where ter | m undertaken: | | | |
| | | | | | | | | |
| Sources of informati | on used to complete this | s form | | | | | | |
| Consultation with/feedback | from: Nursing staff | | Registrars | Allied he | ealth professionals | | | |
| | Other specialists Other (please specify) | | | | | | | |
| EPAs (as data points a | and as a point of discussion) | | | | | | | |
| PGY1/ PGY2 record of | learning (progress against out | come stat | ements) | | | | | |
| | | | | | | | | |
| Assessments of EPA to date (in online ver | As completed during the sion only) | term | Number | Case complexity | Entrustability rating | | | |
| EPA 1 Clinical assessment | | | | | | | | |
| ☐ EPA 2 Recognition and | d care of the acutely unwell pation | ent | | | | | | |
| ☐ EPA 3 Prescribing | | | | | | | | |
| EPA 4 Team communi | EPA 4 Team communication - documentation, handover and | | | | | | | |

About this form

The purpose of this form is to provide feedback to the prevocational doctor on their performance to support their learning and to support assessment review panel decisions about satisfactory completion of PGY1 (the point of general registration) or PGY2.

The form is to be completed by the term supervisor and by the prevocational doctor (for self-assessment) at the mid-point in any term longer than five weeks and at the end of the term. Other clinical supervisors, including registrars may conduct or contribute to the mid-term and end-of-term assessments with final sign off of the end-of term assessment completed by the term supervisor.

This form has not been designed for recruitment purposes and should not be used for such purposes.

Instructions for prevocational doctors

Complete this form before assessment meetings and discuss it with your supervisor at those meetings. Consider your strengths, areas where you could benefit from additional experience, and the possible ways in which you could gain this experience. Your self-assessment is not for submission and will not be used by the assessment review panel at the end of the year.

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Instructions for supervisors

Complete and discuss the form with the prevocational doctor. Consider the prevocational doctor's self-assessment and the observations of others in the discussion. The supervisor should:

- Identify the observed outcome statements that the assessment of the Domain has been based on by ticking the appropriate boxes.
- Assign a rating for the PGY1 or PGY2 doctor's performance against each Domain, taking into consideration the
 expected performance at the individual's level of training.
- A Domain rating of 3 indicates that all **observed** outcome statements within the Domain would be rated a 3 individually.
- Domain ratings of 1 or 2 will require further information about which specific outcomes were inconsistently met.
- A not observed rating will require further information about which outcomes were not observed and whether supplementary evidence was provided, e.g. attendance at a course.
- Liaise with the Medical Education Unit (MEU) or Director of Clinical Training (DCT) to complete an Improving Performance Action Plan (IPAP) when a prevocational doctor requires remediation or additional support in order to meet the required standard (i.e. when the prevocational doctor is assigned ratings of 1 or 2 for one or more items, or at the supervisor's discretion).
- For the end-of-term assessment, assign a global rating of progress towards completion of PGY1 or PGY2. Review any existing improving performance plan to determine if it has been completed, or if ongoing actions are required.

Relevant documents

The AMC Assessment Requirements (Training and Assessment Requirements Section 3) will assist in completing this form. The form aligns with the Australian Medical Council and Medical Board of Australia's Prevocational Outcome statements (Training and Assessment Requirements Section 2A) and the National Standards and Requirements for Prevocational (PGY1 and PGY2) Training Programs and terms.

| | | Clinical practice ational doctor as practitioner | | | | | | |
|-------------------------|---|--|--|--|--|--|--|--|
| The ass | sess | ment of this Domain is based on the following outcomes: | | | | | | |
| | 1.1 | Patient safety: Place the needs and safety of patients at the centre of the care process, working within statutory and regulatory requirements and guidelines. Demonstrate skills including effective clinical handover, graded assertiveness, delegation and escalation, infection control, and adverse event reporting. | | | | | | |
| | 1.2 | Communication: Communicate sensitively and effectively with patients, their family/carers, and health professionals applying the principles of shared–decision making and informed consent. | | | | | | |
| | 1.3 | Communication - Aboriginal and Torres Strait Islander patients: Demonstrate effective culturally safe interpersonal skills, empathic communication, and respect, within an ethical framework, inclusive of Indigenous knowledges of well-being and health models to support Aboriginal and Torres Strait Islander patient care. | | | | | | |
| | 1.4 | Patient assessment: Perform and document patient assessments, incorporating a problem-focused medical history with a relevant physical examination, and generate a valid differential diagnosis and/or summary of the patients' health and other relevant issues. | | | | | | |
| | 1.5 | Investigations: Request and accurately interpret common and relevant investigations using evidence-informed knowledge and principles of cost-effectiveness. | | | | | | |
| | 1.6 | Procedures: Safely perform a range of common procedural skills required for work as a PGY1 or PGY2 doctor. | | | | | | |
| | 1.7 | Patient management: Make evidence-informed management decisions and referrals using principles of shared decision-making with patients, carers and the health care team. | | | | | | |
| | 1.8 Prescribing: Prescribe therapies and other products including drugs, fluid, electrolytes, and blood products safely, effectively and economically. | | | | | | | |
| | 1.9 Emergency care: Recognise, assess, communicate and escalate as required, and provide immediate management to deteriorating and critically unwell patients. | | | | | | | |
| | 1.10 Utilising and adapting to dynamic systems: Appropriately utilises and adapts to dynamic systems and technology to facilitate practice, including for documentation, communication, information management and supporting decision-making. | | | | | | | |
| | | ove outcomes were NOT observed a matrix table will ask to identify: a) which outcome and b) whether additional ovided in the record of learning against that outcome (e.g. attendance at a course)] | | | | | | |
| | | | | | | | | |
| Domain | 1 r | ating overall | | | | | | |
| 1 [Rarely |] / met | 2 | | | | | | |
| [If a rating | of 1 d | r 2 is selected, this will trigger a drop-down menu to specify which outcome/s were inconsistently or rarely met.] | | | | | | |
| Feedba | ck d | n Domain 1 | | | | | | |
| [Free text relates to.] | | pervisor to provide global feedback about the Domain. Please identify which outcome statements this feedback | | | | | | |

| | | | sionalism and lead doctor as a profession | - | | | |
|---|--|-----------|---|-----------------------------|------------------------------|-------------------------|--|
| The asse | essm | ent of | this Domain is base | d on the following o | utcomes: | | |
| | 2.1 | | sionalism: Demonstrate eareness, empathy; patient | | | integrity; compassion; | |
| | 2.2 | respon | anagement: Identify factor ding to fatigue, and recogn sional practice. | | | | |
| | 2.3 | | lucation: Demonstrate lifel sion and feedback. | ong learning behaviours a | and participate in, and cont | ribute to, teaching and | |
| | 2.4 | | I responsibility: Take incree and involving other profe | | | ing the limits of their | |
| | 2.5 | | rork: Respect the roles and rof an inter-professional te | | professionals, learn and wo | rk collaboratively as a | |
| | 2.6 | profess | orkplace culture: Contributional standards and institutional for themselves and | tional policies and process | | | |
| | 2.7 Culturally safe practice for Aboriginal and Torres Strait Islander patients: Critically evaluate cultural and clinical competencies to improve culturally safe practice and create culturally safe environments for Indigenous communities. Incorporate into the learning plan strategies to address any identified gaps in knowledge, skills, or behaviours that impact Aboriginal and Torres Strait Islander patient care. | | | | | | |
| | 2.8 | | nanagement: Effectively ne workload to manage pati | | | nd show ability to | |
| [If any of the above outcomes were NOT observed a matrix table will ask to identify: a) which outcome and b) whether additional evidence was provided in the record of learning against that outcome (e.g. attendance at a course)] | | | | | | | |
| Domoin | 2 40 | ting o | varall | | | | |
| Domain | _ | ung o | 2 🗆 | 3 🗆 | 4 🗆 | 5 🗆 | |
| | ely me | t | Inconsistently met | Consistently met | Often exceeded | Consistently exceeded | |
| [If a rating of 1 or 2 is selected, this will trigger a drop-down menu to specify which outcome/s were inconsistently or rarely met.] | | | | | | | |
| Feedba | ck o | n Dom | ain 2 | | | | |
| [Free text for relates to.] | or Sup | ervisor t | o provide global feedback | about the Domain. Please | e identify which outcome st | atements this feedback | |

| THE PI | | Health and society ational doctor as a health | ı advocate | | | | |
|----------------------------------|---|--|---|--|-----------------------------|--|--|
| The as | sess | ment of this Domain is ba | sed on the following | outcomes: | | | |
| | 3.1 | Population health: Incorporate surveillance into interactions with conditions, and discuss healthca | n individual patients. Includin | | | | |
| | 3.2 | Whole of person care: Apply w patient's physical, emotional, so Acknowledging that these factor healthcare behaviours and acce | cial, economic, cultural and s s can influence a patient's d | spiritual needs and their g escription of symptoms, p | geographical location. | | |
| | 3.3 | Cultural safety for all commun health practitioner knowledge, sk accessible and responsive health | kills, attitudes, practicing beh | aviours and power different | | | |
| | 3.4 | Understanding biases: Demonimpact on the service delivery focurrent evidence on systemic rac | r Aboriginal and Torres Strai | t Islander peoples. This in | ncludes understanding | | |
| | 3.5 | Understanding impacts of color colonisation, intergenerational translander peoples. | | | | | |
| | 3.6 | Integrated healthcare: Partner interaction with and connection to communicating with caregivers a | o the broader healthcare sys | stem. Where relevant, this | | | |
| learning. feedback assessm | Achievement of outcomes can be assessed by direct observation or through evidence entered in the e-portfolio record of learning. Where an outcome has not been observed, evidence provided should be reviewed to support the assessment and feedback for this Domain. In filling out this assessment, take account of the evidence provided and the context in which the assessment is being made. Evidence may include but is not limited to, attending a relevant educational course, workshop or conference, or completion of an online training module. | | | | | | |
| | | pove outcomes were NOT observe provided in the record of learning a | | | e and b) whether additional | | |
| Domair | 1 3 r | ating overall | | | | | |
| 1 [Rarel | | 2 🔲 | 3 🗆 | 4 🗌 | 5 🗌 | | |
| | y ilici | Inconsistently met | Consistently met | Often exceeded | Consistently exceeded | | |
| | - | Inconsistently met | · · | | | | |
| [If a rating | of 1 (| | · · | | | | |

| Domain 4: Science and scholarship | | | | | | | | | | | | | | | | | |
|---|--|---------------------------|------------------------------------|---------------------------|------------------|---------------------|------------------------|------------------------|----------------------|------------------|-------------------------|-------------------|----------------|-----------------|------------------|----------------------|---------------|
| • | The prevocational doctor as scientist and scholar The assessment of this Domain is based on the following outcomes: | | | | | | | | | | | | | | | | |
| The ass | essr | | | | | | | | | | | | | | | | |
| | 4.1 | | | | | | | | | | aetiolog in a varie | | | | | | ral |
| | 4.2 | | | | | | Access, sional pra | | apprais | e and | apply evi | dence fr | om the | e medi | cal an | d scient | ific |
| | 4.3 | | | | | | | | | | ty improv orting and | | | | as pe | er revie | w of |
| | 4.4 | | | | | | | | | | emonstra | | | | | | ed |
| Achieveme Where an this Domai completion morbidity a | outco in. Ev n of ar | me ha idenc n onlir | as not b e may ir ne trainii | een ol nclude ng mo | bserve but is | d, evide not lim | ence pro ited to, a | ovided sh attending | nould be a releva | reviev ant ed | ved to su ucational | pport the course, | asses works | ssmen hop or | t and f confe | feedbacl rence, c | k for _ or |
| [If any of the evidence was | | | | | | | | | | | | | | and b) | wheth | ner addit | tional |
| | | | | | | | | | | | | | | | | | |
| Domain | 1 4 r | atin | j ove | rall | | | | | | | | | | | | | |
| 1 [Rarely | _ | | Inc | | tently r | met | C | 3 [Consister | | | | 4 □ exceede | ed | Cor | | 5 ☐ ntly exce | eded |
| [If a rating of 1 or 2 is selected, this will trigger a drop-down menu to specify which outcome/s were inconsistently or rarely met.] | | | | | | | | | | | | | | | | | |
| Feedba | ck c | on D | omaiı | n 4 | | | | | | | | | | | | | |
| [Free text relates to.] | | ıpervi | sor to pi | rovide | global | l feedba | ack abou | ut the Do | main. Pi | lease i | identify w | hich oute | come s | statem | ents th | his feedl | back |

Global rating (required only for the end-of-term assessment)

Assign a global rating of progress towards completion of PGY1 or PGY2. In assigning this rating, consider the prevocational doctor's ability to practise safely, work with increasing levels of responsibility, apply existing knowledge and skills, and learn new knowledge and skills during the term.

| Global rating | |
|------------------|---|
| Satisfactory | The prevocational doctor has met or exceeded performance expectations for the level of training during the term. |
| Conditional pass | Further information, assessment and/or remediation will be required before deciding that the prevocational doctor has met performance expectations for the level of training during the term. |
| ☐ Unsatisfactory | The prevocational doctor has not met performance expectations for the level of training during the term. |

Please provide feedback on the following:

| Strengths | | |
|-----------------------|--|--|
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| | | |
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| | | |
| Areas for improvement | | |
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| | | |

Additional support

Please contact the Medical Education Unit (MEU) or Director of Clinical Training (DCT), when a prevocational doctor requires additional support to meet the required standard; refer to the instructions on page 1.

| MEU Contact details | [Details will prepopulate based on data stored in the e-portfolio] |
|---------------------|--|
| DCT Contact details | [Details will prepopulate based on data stored in the e-portfolio] |

| Term Supervisor | Director of Clinical Training |
|--|--|
| Name (print clearly) | Name (print clearly) |
| | Signature |
| Signature | Signature |
| Position | Date Day Month Year |
| Date Day Month Year | Director of Clinical Training feedback |
| Prevocational doctor | |
| I (insert name) confirm that I have discussed the above report with | |
| my Term Supervisor or delegate and know that if I disagree with any points I may respond in writing to the Director of Clinical Training within 14 days. | Return of form (for paper forms) Please forward to (contact person, department): |
| Signature | |
| Date Day Month Year | Relevant documents Relevant documents are available on the AMC website: https://www.amc.org.au/accreditation-and-recognition/assessment-accreditation-prevocational-phase-medical-education/national-framework-for- |

prevocational-medical-training/