

Physician Readiness for Expert Practice

# **Advanced Training Neurology**

# 2019-20 Program Requirements Handbook

Adult Medicine Division
Paediatrics & Child Health Division



# About the 2019-20 handbook

This handbook outlines the complete program requirements for the RACP Physician Readiness for Expert Practice (PREP) Advanced Training in Neurology Program.

Satisfactory completion of these requirements is necessary for admission to Fellowship of the College or completion of post-Fellowship training.

The 2019–20 handbook applies to all Australian and New Zealand based trainees registered in a PREP program in 2019 and/or 2020, regardless of the year in which they commenced PREP Advanced Training. A trainee is considered to be in a PREP Advanced Training Program if they first enrolled in that program from 2011 onwards. Where not specified as being particular to either Australia or New Zealand, information applies to trainees and supervisors in both countries.

#### 2019–20 Program requirement updates

Overseeing committees evaluate training requirements every two years (previously annually) to ensure that they are in line with educational best practice. Requirements are published and communicated accordingly. Changes to the training program that may substantially impact a trainee's plan for training will be implemented following an extended period of notice. It is the trainee's responsibility to ensure that they are following the correct handbook.

Changes to program requirements for 2019–20	Rationale for changes
Training Rotations  New time-based requirement for clinical epilepsy and EEG training for Paediatrics trainees.	To ensure trainees are developing adequate basic skills in clinical neurophysiology.
Developmental and Psychosocial Training This requirement can now be satisfied by completing all the requirements of Advanced Training in Neurology.	Advanced Training in Neurology requirements fulfil the goals and required competencies of Developmental and Psychosocial training.
Neurophysiology Requirements Increase in number of EEGs from 150 to 360 for Paediatrics Trainees.	To ensure trainees are developing adequate basic skills in clinical neurophysiology.

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# Neurology

The practice of neurology encompasses the diagnosis and management of diseases affecting the central, peripheral and autonomic nervous systems and muscles.

# **Program overview**

Advanced Training provides a 'depth' of specialty training under supervision to prepare trainees for independent practice as consultants. It builds on the skills developed in preceding training through work-based assessments and learning tools as outlined in this handbook.

Program	Advanced Training in Neurology	
Overseeing committee(s)	Advanced Training Committee in Neurology (ATC)	
Entry requirements	<ul> <li>Completion of RACP Basic Physician Training, including the RACP Written and Clinical Examinations</li> <li>Current medical registration</li> <li>Appointment to an appropriate Advanced Training position</li> </ul>	
Minimum duration	3 years (full-time equivalent (FTE))	
Curricula	<ul> <li>Download the Neurology Advanced Training Curriculum (PDF 1MB)</li> <li>Download the Professional Qualities Curriculum (PDF 1MB)</li> </ul>	
Qualification	Fellowship of the Royal Australasian College of Physicians (FRACP)	

# **Quick links**

- Apply or re-register
- Program requirements overview
- Important dates
- Advanced Training Portal
- Accredited training sites
- Part-time training

- Membership fees (including training fees)
- Supervision
- <u>Download the Advanced Training</u> <u>supervisor amendment form (DOC</u> 153KB)
- <u>Download the Advanced Training</u> interruption of training form (DOC 1.1MB)

# Learning and assessment tool forms

# Logbook

<u>Download the Neurology Neurophysiology Logbook Template (XLSX 40KB)</u>

#### Supervisor's reports

Download the Neurology Supervisor's Report (DOC 320KB)

# Contact us

#### Australia

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# **Apply for Advanced Training**

# **Eligibility**

New trainees can apply for Advanced Training after completing Basic Training, including passing the Divisional Written and Clinical Examinations. They must have current medical registration and appointment to an appropriate Advanced Training position at a suitable training site.

# **Advanced Training positions**

Core training usually needs to be undertaken at <u>accredited training sites</u> that have been accredited by the overseeing committee for Advanced Training in the relevant specialty.

Some specialty groups conduct a coordinated <u>Advanced Trainee Selection and Matching</u> process for appointing trainees to training positions. Details of participating states, regions and specialties are available from June each year.

**Please note** that the College is not responsible for trainee recruitment and has no role in the recruitment process.

#### Approval and certification of training

Once trainees have secured a training position, they must prospectively apply for approval as per the *Progression through Training Policy*.

Approval of training periods will be determined by the overseeing committee. To be approved, a trainee's individual training program must be consistent with the training requirements and appropriate for the stage in training.

Upon completion of each rotation or calendar year of training, the overseeing committee considers each trainee's progress according to the program requirements. If all requirements of training have been satisfactorily completed, the overseeing committee will certify the period of training.

#### Prospective changes to approval of training

Trainees should inform the relevant committee as soon as possible if information outlined in their application changes. Some changes may require a revision of the approval decision and may affect the certification of training.

Changes to applications which require prospective approval may include changes to supervision, sites, dates of rotations and flexible training arrangements.

#### How to apply

Both new and current trainees need to apply for Advanced Training each year.

Trainees must organise the timely submission of all necessary documentation, keep a copy of the application for future reference and pay required <u>fees</u>.

#### Australian Trainees

Apply online for Advanced Training by the due dates below.

Where online registration is not available please download, complete and submit the <u>application</u> form to apply for Advanced Training in Specialty (DOC 472KB).

#### New Zealand Trainees

Download, complete and submit the <u>application form to apply for Advanced Training in Specialty (DOC 475KB)</u> by the due dates below.

## Closing dates for applications in Australia

15 February	Closing date for applications for prospective approval of rotations in the current year
31 August	Closing date for applications for prospective approval of rotations in the second half of the current year

#### Closing dates for applications in New Zealand

31 March	Closing date for applications for prospective approval of April to August rotations
31 May	Closing date for applications for prospective approval of rotations in the second half of the current year
31 October	Closing date for applications for prospective approval of rotations in the first half or whole of the following year

# College training program resources

This handbook should be used alongside the following resources.

#### Curricula

RACP curricula outline the learning objectives and associated knowledge, skills, attitudes and behaviours required of graduates of College training programs across program-specific/clinical and non-program/non-clinical attributes.

- Download the Neurology Advanced Training Curriculum (PDF 1MB)
- Download the Professional Qualities Curriculum (PDF 1MB)

#### **Advanced Training Portal**

Resources for many of the requirements of this training program can be accessed through the Advanced Training Portal. These include:

- detailed information on training rotations, including approval and certification decisions
- information sheets, workflows, rating forms and interactive video tutorials for online tools
- online teaching and learning and formative assessment tools
- past examination results
- summary of training completed and required.

# **Education policies**

Education policies underpin all training requirements.

Key education policies include the following:

- Academic Integrity in Training
- Flexible Training
- Progression through Training
- Recognition of Prior Learning (RPL)
- Special Consideration for Assessments
- Trainee in Difficulty Support (TIDS).

#### Variations in training and flexible training options

Variations in training processes cover dual, joint, conjoint and post-fellowship training.

<u>Flexible training option</u> information covers part-time training, interruptions to training, withdrawing from training and exceptional circumstances.

#### **Trainee responsibilities**

All trainees are adult learners who must understand <u>trainee responsibilities</u> and play a role in teaching and mentoring junior doctors.

The College is committed to supporting trainees who are experiencing difficulty in their training. If trainees or supervisors are experiencing difficulty, they should contact their <u>Education Officer</u> and the <u>Training Support Unit</u>.

The Training Support Unit has <u>Resources</u> for trainees covering topics including learning support and mentoring.

#### Supervisor roles and responsibilities

<u>Supervision</u> in PREP training involves a comprehensive level of educationally-focused support for trainees. The College runs <u>supervisor workshops</u> to help develop required skills for this role.

#### **Accreditation of settings**

Core training is usually conducted in training positions at <u>accredited training sites</u> that have been accredited by the overseeing committee.

# eLearning@RACP

<u>eLearning@RACP</u> is a central, online space which supports College members in their learning. It contains educational resources developed by the RACP or shared by other postgraduate medical colleges. College members can login and access courses and modules designed and developed in collaboration with Fellows, trainees and education committees, on topics including:

- communication
- Indigenous health
- research
- supervisor professional development
- telesupervision.

These courses and modules are optional, and completion is not a program requirement.

## **Admission to Fellowship**

Trainees are eligible to be admitted to Fellowship of the College on the completion of all requirements of training. The College will invite trainees to apply for Fellowship once the overseeing committee has recommended them for admission. The admission process involves completion of an application form, and the payment of a fee.

New Fellows will receive formal notification from the College that they have been admitted to Fellowship. In addition to the award of Fellowship, individuals who complete training are issued a letter confirming the completion of their training. Fellows who complete another training program subsequent to admission to Fellowship receive a letter confirming all of the RACP training programs that they have completed.

All Fellows in Australia, New Zealand and overseas who are in active practice must meet the requirements of a Continuing Professional Development (CPD) program.

# **Program requirements**

Program requirements are the components of a training program that a trainee must complete in order to progress through training. Mandatory program requirements are linked to the certification of training, progression through training and program completion.

Program requirements are made up of formative and summative assessments, teaching and learning activities, the type and duration of rotations, course work and other requirements, such as minimum overall duration of training.

Overseeing committees evaluate training requirements every two years (previously annually) to ensure that they are in line with educational best practice. Requirements are published and communicated accordingly. Changes to the training program that may substantially impact a trainee's plan for training will be implemented following an extended period of notice.

It is the trainee's responsibility to ensure that they are following the correct handbook and are aware of the current program requirements. They must also ensure that they are familiar with current RACP <u>education policies</u> and processes, such as those for <u>dual trainees</u>.

#### **Program requirements overview**

# Core training (minimum 24 months)

Non-core training (maximum 12 months)

#### Content

- Neurology Advanced Training Curriculum (Adult Medicine)
   OR
- Neurology Advanced Training Curriculum (Paediatrics & Child Health)
- Professional Qualities Curriculum

#### Supervision

#### <u>Supervision</u> per rotation:

2 supervisors with FRACP

# Supervision per rotation:

- 1 supervisor with FRACP
- 1 supervisor who may or may not have FRACP

#### Work-based learning and assessment tools

#### Per rotation:

- 2 <u>Learning Needs Analysis</u> (recommended)
- 1 <u>Supervisor's Report</u> (2 for 12-month rotations)

#### Per vear:

- 2 Case-based Discussions
- 3 mini-Clinical Evaluation Exercise
- 2 Professional Qualities Reflection

#### Per rotation:

- 2 <u>Learning Needs Analysis</u> (recommended)
- 1 <u>Supervisor's Report</u> (2 for 12-month rotations)

#### By the end of Advanced Training:

36 months of certified training time consisting of:

- 24 months core training (including 6 months of clinical epilepsy and EEG training for Paediatrics & Child Health trainees)
- 12 months non-core training
- Completion of Neurophysiology Requirements
- 1 Advanced Training Research Project (for trainees commencing training in 2017 onwards)
- Course Attendance
- Developmental and Psychosocial Training (Paediatrics & Child Health trainees only)
- Residency In-Service Training Examination (optional)

# Time-based requirements - Training time and rotations - Adult Medicine

#### **Purpose**

To ensure adequate time for trainees to gain necessary learning experiences across a range of relevant rotations.

## **Total training time**

3 years (36 months FTE)

#### **Training rotations**

- Minimum 24 months core training
- Maximum 12 months non-core training

#### **Core training**

A minimum of 24 months FTE must be spent in accredited core clinical training positions under the supervision of Fellows of the College. Trainees are expected to complete their two years of core training at different hospitals, unless there are exceptional circumstances which prevent this.

Emphasis is given to the management of inpatients, outpatients and on-call emergency neurology, and the exposure to neuropathology, neurophysiology and neuroimaging. Within this period of 24 months, the following **minimum** requirements must be met:

Minimum months experience (FTE)	Area of training
8	Direct responsibility for emergency assessment and inpatient care of general neurology patients
12	On-call for neurological emergencies
12	Neurology consultations within a general hospital
24	Neurology ambulatory care at a minimum of one clinic per week, or the equivalent number over a shorter duration

The following frequency of training and teaching is required per subspecialty:

Subspecialty	Frequency
Neuroimaging	One neuroimaging teaching period per month for two years, or attendance at two neuroimaging teaching courses
Neuropathology	One neuropathology teaching period per month for two years, or attendance at one neuropathology teaching course, e.g. Postgraduate ANZAN/BMRI Neuropathology Course
Neurorehabilitation	One neurorehabilitation period per week for six months, preferably at an approved rehabilitation facility or in rehabilitation activities in a general hospital

# Time-based requirements - Training time and rotations - Adult Medicine

#### Non-core training

A maximum of 12 months of non-core training may be undertaken in an accredited non-core training position. Non-core training need not be directly related to clinical neurology and may consist of a period of neuroscience research. The principal aims are to enable trainees to develop ability for critical appraisal of specific research and publications, and to promote research within the neurosciences by clinicians. Non-core training also allows for development of more experience in a particular specialty area of clinical neurology.

It is recommended that non-core training take place following the completion of core training. This is to ensure that the trainee is able to gain maximum training benefit from the non-core year. The overseeing committee recognises that in some circumstances an earlier non-core year may be beneficial, for example when a person is engaged in neuroscience research.

An Advanced Trainee who commences neurology training with a non-core year and wishes to have the training considered must apply prospectively for provisional approval of this position. Provisional approval of a first non-core year of training does not mean that the trainee has been formally accepted into the Advanced Training in Neurology program. Furthermore, a first non-core year of training will only be certified towards the RACP requirements for Advanced Training in Neurology after the Advanced Trainee has gone through the ANZAN match/interview process, has been matched to an accredited core training position, and has satisfactorily completed a first core year of training. High standards of training are maintained by the accreditation of both training hospitals and individual neurology training positions.

#### Training time in Australia/New Zealand

At least 24 months of Advanced Training in Specialty must be undertaken in Australia and/or New Zealand. This is to ensure that trainees receive adequate exposure to local practices and health services.

#### Other requirements

It is strongly recommended that trainees complete their Advanced Training at more than one training site.

# Time-based requirements - Training time and rotations - Paediatrics & Child Health

#### **Purpose**

To ensure adequate time for trainees to gain necessary learning experiences across a range of relevant rotations.

#### **Total training time**

3 years (36 months FTE)

#### **Training rotations**

- Minimum 24 months core training
- Maximum 12 months non-core training

#### **Core training**

A minimum of 24 months FTE must be spent in accredited core clinical training positions under the supervision of a Fellow of the College.

Core training in paediatric neurology must include experience in the following:

- Direct patient care, both inpatient and outpatient, normally under the supervision of at least two paediatric neurologists in the setting of a busy teaching hospital.
- Regular participation in an after-hours on-call roster. This is a prerequisite for a year to be considered for accreditation as core training.

# Time-based requirements - Training time and rotations – Paediatrics & Child Health

• 6 months (FTE) clinical epilepsy and EEG training (or 72 supervised neurophysiology reporting sessions where this time-based requirement cannot be met) \*. This can be achieved during dedicated epilepsy and EEG rotations or throughout the course of Advanced Training by regularly attending supervised neurophysiology sessions. This training need not be continuous, but should at all levels include adequate supervision and staff interaction, and gradually increasing responsibility for the trainee. The format and time devoted to neurophysiology training in lieu of dedicated epilepsy and EEG rotations needs to be recorded in a log book and should total 72 sessions (equivalent to 3 reporting sessions per week for 6 months).

\*Trainees completing training in 2019 or 2020 can be exempted from completing this requirement at the discretion of the overseeing committee.

# Optional requirements for core training

- Clinical research with the condition that any laboratory research should be no more than half a day per working week.
- Training in the subspecialties of paediatric epileptology or paediatric neuromuscular disease a maximum of six months training may be accredited as core training.

# Procedural skills and training in clinical neurophysiology

At the end of two years of core training, trainees should have:

- Expertise in paediatric EEG interpretation and knowledge of the technical aspects of, and indications for neurophysiological studies as outlined in Neurophysiology Requirements
- Ability to reliably interpret most paediatric neuroradiological studies.
- A working knowledge of neuropathology.

#### Non-core training

A maximum of 12 months of non-core training may be undertaken with the prospective approval of the overseeing committee. Non-core training can be undertaken in any of the subspecialties of paediatric neurology, for example neurorehabilitation, neuroradiology, neurometabolic disease, neurogenetics or neuro-ophthalmology.

For a position to be considered for certification as non-core training in paediatric neurology, the relevance of that position to the field of paediatric neurology must be demonstrated. Accordingly, non-core training can also be obtained in neurophysiology, neuropathology, psychiatry and clinical or basic research, so long as it is related to the neurosciences.

It is recommended that formal training in clinical adult neurology be obtained.

It is recommended that non-core training take place following the completion of core training. This is to ensure that the trainee is able to gain maximum training benefit from the non-core year. The overseeing committee recognises that in some circumstances an earlier non-core year may be beneficial, for example when a person is engaged in neuroscience research.

An Advanced Trainee who commences neurology training with a non-core year and wishes to have the training considered must apply prospectively for provisional approval of this position. Furthermore, a first non-core year of training will only be certified towards the RACP requirements for Advanced Training in Neurology after the Advanced Trainee has satisfactorily completed a first core year of training. High standards of training are maintained by the accreditation of both training hospitals and individual neurology training positions.

# Time-based requirements - Training time and rotations – Paediatrics & Child Health

# Training time in Australia/New Zealand

At least 24 months of Advanced Training in paediatric neurology must be undertaken in Australia and/or New Zealand. This is to ensure that trainees receive adequate exposure to local practices and health services.

#### Other requirements

It is strongly recommended that trainees complete their Advanced Training at more than one training site.

# Supervision requirements

## **Purpose**

To provide trainees with appropriate support and guidance to complete the training program.

#### **Core training**

Per rotation:

2 supervisors with FRACP

#### Non-core training

Per rotation:

- 1 supervisor with FRACP
- 1 supervisor who may or may not have FRACP

Wherever possible, trainees should have two supervisors with FRACP.

#### More information

- Supervision
- Download the Advanced Training supervisor amendment form (DOC 153KB)

# Work-based learning and assessment tools

PREP teaching and learning activities are designed to support reflective practice and self-directed learning. A variety of teaching and learning activities and assessments are used throughout PREP training. These activities cater to a range of learning needs, styles and situations that may arise in workplace training, and aim to facilitate learning and enhance the attainment of desired learning outcomes.

Trainees are required to complete all teaching and learning activities, including formative and summative assessments, throughout training.

Formative assessments focus on assessment for learning through feedback and guidance. The College's formative assessments aid the trainee and supervisor through a formal feedback discussion, prompting areas for discussion highlighted by the trainee's performance. The College's formative assessments are based on existing workplace-based assessment methods and best practice in medical education.

Summative assessments focus on judgements about trainee progression, resulting in pass or fail decisions on a trainee's performance.

# Case-based Discussion (CbD)

#### **Purpose**

To guide the trainee's learning through structured feedback and help the supervisor evaluate the expertise and judgement exercised in clinical cases. This is a formative assessment.

#### Requirement

Two per core training year, one per six-month period, due by 31 January of the following year (or 15 October of the current year for trainees in their final year)

#### More information

- Enter CbD rating form data into the Advanced Training Portal
- Case-based Discussion information sheet, workflow, rating form and other resources

#### **Course Attendance**

#### **Purpose**

Once over entire training period for each workshop

#### Requirement

Trainees must attend each of the following workshops at least once over the course of training:

- EMG Workshop (Adult Medicine trainees only)
- ANZAN/ESA EEG Workshop
- Postgraduate ANZAN/BMRI Neuropathology and Neuroimaging Course (Adult Medicine trainees only)

#### More information

Australian and New Zealand Association of Neurologists website

# Learning Needs Analysis (LNA)

#### **Purpose**

To embed the process of planning and evaluating learning in the trainee's practice.

#### Requirement

One per rotation, early in the rotation due by 31 January of the following year (recommended)

# **Learning Needs Analysis (LNA)**

#### More information

- Complete and submit the LNA via the <u>Advanced Training Portal</u>
- Learning Needs Analysis information sheet, workflow and other resources

# Mini-Clinical Evaluation Exercise (mini-CEX)

#### **Purpose**

For the trainee to receive timely, structured feedback on their performance in real clinical situations. This is a formative assessment.

#### Requirement

Three per core training year one per quarter in first three quarters of the training year, due by 31 January of the following year.

#### **More information**

- Complete and submit the mini-CEX via the Advanced Training Portal
- Mini-Clinical Evaluation Exercise information sheet, workflow, rating form and other resources

# **Neurophysiology Requirements – Adult Medicine**

#### **Purpose**

To equip the trainee with the skills and knowledge required to appropriately request studies and interpret reports as an informed consumer.

#### Requirement

All trainees must maintain a logbook recording the extent of their experience in neurophysiology training over the course of training. The accuracy and currency of the logbook is of the utmost importance. The logbook must be maintained using the prescribed forms and must be available at all times for review, as required by the overseeing committee.

The logbook must be used to complete the neurophysiological section of Supervisor's Reports.

### Summary of numbers to be reported in logbook – Adult Medicine

- 150 EEGs
- 150 EMGs (including 100 hands-on studies by the trainee)

At least 150 EEGs are to be first reported by the trainee and then shown to their supervisor or other teaching staff for correction. Trainees are also expected to cover the EEG syllabus through didactic tutorials provided by the training site.

Trainees must perform, attend or report with the supervisor or other teaching staff at least 150 EMG studies across a range of conditions. At least 100 EMG studies must be done in the room 'hands on' with the trainee placing the electrodes on the patient and performing stimulation under supervision. Studies which are not 'hands on' can include both those observed directly and those where the trainee goes through EMG reports later with a member of the teaching staff. Trainees are also expected to cover the EMG syllabus through didactic tutorials provided by the training site.

# Neurophysiology Requirements - Adult Medicine

# Training in Clinical Neurophysiology – Adult Medicine

Level 1 EEG & EMG Training in EEG and EMG is conducted as part of Advanced Training in Neurology and must be completed during the two years of core training to meet the criteria for FRACP. It is possible to carry this over to the non-core elective year if the requirements are not met by the end of core training. It is not regarded as sufficient training for a neurologist to perform or report EEG or EMG in clinical practice. By the end of training, the trainee must have satisfied their supervisors in clinical neurophysiology that the skills and knowledge they have acquired meet the Level 1 EMG & EEG training requirements for Adult Medicine trainees or Paediatrics & Child Health trainees.

Level 2 and Level 3 EEG & EMG training is seen as the prerequisite for those neurologists who wish to perform electrophysiological investigations in clinical practice. However, these higher levels of training are optional and the RACP does not provide certification of these higher levels of training. Level 2 and Level 3 training is administered by the ANZAN EEG and Clinical Neurophysiology Committee. It is not a requirement that this be completed during Advanced Training in Neurology.

#### More information

Learning and assessment tool forms

# Neurophysiology Requirements - Paediatrics & Child Health

#### **Purpose**

To equip the trainee with the skills and knowledge required to read, interpret and report diagnostic EEG studies, to be able to then supervise and teach trainees to read, interpret and report diagnostic EEG studies, and to appropriately request NCS/EMG and diagnostic video-EEG studies, and interpret reports of those studies as an informed consumer. Further details of the goals of neurophysiology training, supervision of trainees and competencies to be gained are to be found in the neurophysiology syllabus.

#### Requirement

All trainees must maintain a logbook recording the extent of their experience in neurophysiology training over the course of training. The accuracy and currency of the logbook is of the utmost importance. The logbook must be maintained using the prescribed forms and must be available at all times for review, as required by the overseeing committee. The logbook must be used to complete the neurophysiological section of Supervisor's Reports. A final logbook copy, signed each year by the EEG and EMG supervisors, is to be sent to the ATC as a training requirement.

#### Summary of numbers to be reported in logbook - Paediatrics & Child Health

- 360 EEGs\*
- 25 EMGs (including 10 hands-on studies performed by the trainee)
- 72 neurophysiology reporting sessions (if not undertaking a 6-month full-time clinical epilepsy and EEG fellowship)

At least 360 EEGs are to be first reported by the trainee and then shown to their supervisor or other teaching staff for correction. Trainees are also expected to cover the EEG syllabus through didactic tutorials provided by the training site.

Trainees must perform, attend or report with the supervisor or other teaching staff at least 25 EMG studies across a range of conditions. At least 10 EMG studies must be done in the room 'hands on' with the trainee placing the electrodes on the patient and performing stimulation under supervision. Studies which are not 'hands on' can include both those observed directly

# Neurophysiology Requirements - Paediatrics & Child Health

and those where the trainee goes through EMG reports later with a member of the teaching staff. Trainees are also expected to cover the EMG syllabus through didactic tutorials provided by the training site.

\*Paediatric & Child Health trainees completing training in 2019 or 2020 can be exempted from completing this requirement at the discretion of the overseeing committee, but all trainees must complete at least 150 EEGs.

#### More information

Learning and assessment tool forms

#### **Professional Qualities Reflection (PQR)**

#### **Purpose**

To help trainees to articulate and formalise ideas and insights about their professional development through the process of reflection.

#### Requirement

Two per year core training year due January 31 of the following year due by 31 January of the following year (or 15 October of the current year for trainees in their final year)

#### More information

- Complete and submit the PQR via the <u>Advanced Training Portal</u>
- Professional Qualities Reflection information sheet and workflow

# **Residency In-Service Training Exam**

#### **Purpose**

The American Academy of Neurology (AAN) Residency In-Service Training Exam (RITE) is a self-assessment tool designed to gauge knowledge of neurology and neuroscience, identify areas for potential growth, and provide references and discussions for each.

#### Requirement

Optional for all trainees, but it is recommended that those trainees who choose to take the RITE exam do so between the first and second year of core training.

The aim of the RITE is to provide the trainee and supervisor (who are the only people who receive the results) an indication of strengths and weaknesses in the trainee's neurological knowledge. The RITE is not designed to be a summative, certifying or qualifying examination, and its use in that manner is vigorously discouraged by the AAN and Australian and New Zealand Association of Neurologists (ANZAN).

#### More information

Australian and New Zealand Association of Neurologists website

# **Supervisor's Reports**

#### **Purpose**

To evaluate and provide feedback on the trainee's progress, which informs the certification of training decision. This is a summative assessment.

# **Supervisor's Reports**

#### Requirement

One Supervisor's Report is due per rotation, two per rotation for 12-month rotations For Advanced Trainees in 12-month positions:

- One Supervisor's Report is to be submitted by 15 July for the first six months of the calendar year.
- One Supervisor's Report is to be submitted by 31 January of the following year covering the final six months of the calendar year.

For Advanced Trainees in positions of six months or less with separate supervisors, or at separate sites:

 One Supervisor's Report should be completed for each rotation and submitted to the College by 15 July (for first half of the year) and 31 January the following year (for the second half of the year).

Advanced Trainees approaching the end of their training should submit a report that covers the whole second half of the year by 15 October.

The Supervisor's Report must be completed by supervisors who have directly supervised the trainee. If the supervisor has not directly supervised the trainee throughout the whole rotation, the supervisor should obtain individual reports from those who have directly supervised the trainee and provide a composite report.

Supervisors should discuss the report with the trainee prior to both parties signing the report, and trainees should be provided with a copy of each report.

It is the trainee's responsibility to ensure that all supervisors receive a copy of the Supervisor's Report. Failure to do this may result in delays or non-certification of a period of training.

Progression to the next year of training is dependent upon the College receiving satisfactory Supervisor's Report(s) covering the full year/period of training completed.

Trainees must provide copies of previous Supervisor's Report(s) to the next year's/rotation's supervisor. The College may provide subsequent supervisors with copies of past reports (and any other documents deemed relevant to the trainee's training).

#### More information

- More information on Supervisor's Reports
- Learning and assessment tool forms
- Progression Through Training Policy

# Other requirements

#### **Developmental and Psychosocial Training**

NB: Completion of the Developmental and Psychosocial component of paediatric training by neurology trainees can be satisfied by completing all the requirements of Advanced Training in Neurology. However, undertaking only a part of Advanced Training in Neurology will not satisfy this requirement.

#### **Purpose**

To assist trainees to develop a sophisticated understanding of child development, encompassing physical, cognitive, emotional, behavioural and social areas, which should be gained from the perspective of the child within the family and in the context of the community.

#### Requirement

This is a requirement for Paediatrics & Child Health trainees only.

**Australia:** Once over entire training period (Basic Training and Advanced Training) for six months due by the end of Advanced Training

**New Zealand:** Once over entire training period (Basic Training and Advanced Training) for three months due by the end of Advanced Training

# **More information**

- More information on Developmental and Psychosocial Training
- Learning and assessment tool forms

# **Research requirements**

# Advanced Training Research Project (for trainees commencing training in 2017 onwards)

#### **Purpose**

To enable trainees to gain experience in research methods; in interpretation of research literature; in participation in research at some stage of their career; and to develop quality improvement skills. Submission of a research project provides evidence of the skills of considering and defining research problems; the systematic acquisition, analysis, synthesis and interpretation of data; and effective written communication.

# Requirement

#### For trainees commencing training in 2017 onwards:

One over the course of training. The research project must be marked as satisfactory prior to admission to Fellowship. It is recommended that trainees submit their research project by 15 September in their penultimate year of training to allow time for marking and resubmission of research projects initially marked 'Resubmit'. The final submission deadline for the research project is 15 September in the final year of Advanced Training.

#### For trainees who commenced training before 2017:

Not required.

#### More information

- More information on Research Projects
- Research Projects eLearning@RACP module
- Education policies

# **Important dates**

#### January-March

## 15 February

• Applications for Approval of Advanced Training due

#### April-June

Activities to be completed this quarter

- Mini-Clinical Evaluation Exercise
- Case-based Discussion
- Professional Qualities Reflection

#### July-September

# 15 July

• Supervisor's Report due for all trainees

#### 31 August

- Applications for Approval of Advanced Training for the second half of the year due Other activities to be completed this quarter
- Mini-Clinical Evaluation Exercise

#### 15 September

• Advanced Training Research Project due for trainees eligible for December Fellowship

#### October-December

#### 15 October

 Supervisor's Report and all PREP tools due for trainees eligible for Fellowship in December

#### **January**

#### 31 January

 Previous year's Supervisor's Report and all PREP tools due for trainees not applying for Fellowship in December

# More information

# **RACP** policies

- Education policies
- Privacy Policy for Personal Information
- Code of Conduct and Working Together Policy

#### **RACP** initiatives

- <u>Curated Collections</u> are learning resource guides based on the contributions and peer review of RACP Fellows and other experts.
- <u>Evolve</u> is a physician-led initiative to ensure the highest quality patient care through the identification and reduction of low-value practices and interventions.
- <u>Pomegranate Health Podcasts</u> (Pomcast) is a monthly medical podcast created by physicians, for physicians.

#### **Useful contacts**

Contact the College	
Member Services Contact Centre	Australia
First point of contact for general enquiries.	Email: racp@racp.edu.au
	Phone: 1300 MyRACP
	1300 69 7227
	New Zealand
	Email: racp@racp.org.nz
	Phone: 0508 MyRACP
	0508 69 7227

Other College contacts	
Education Officers  Education Officers administer the training program and can respond to training-related enquiries.	Australia Email: Neurology@racp.edu.au Phone: +61 2 8247 6217
Training Support The Training Support Unit supports trainees and supervisors of trainees who are experiencing difficulties in their training.	Australia Email: trainingsupport@racp.edu.au Phone: +61 2 9256 5457 New Zealand Email: trainingsupport@racp.org.nz Phone: +64 4 472 6713
Supervisor Support The Supervisor Learning Support Unit provides and coordinates supervisor skills training.	Email: supervisor@racp.edu.au Phone: +61 2 8076 6300
College Trainees' Committee The College Trainees' Committee (CTC) reports to the College Board and represents and advocates on behalf of trainees.	Email: traineescommittee@racp.edu.au
New Zealand Trainees' Committee The New Zealand Trainees' Committee represents and advocates on behalf of trainees.	Email: traineescommittee@racp.org.nz

#### Other contacts

#### **Specialty Societies**

Specialty societies are medical/scientific societies that bring together research and clinical scientists and physicians who are actively involved in an area of medical practice, e.g. cardiology, geriatric medicine. The specialty societies are independent organisations that contribute to physician education through their members' involvement in College education committees and activities.

#### The Australian and New Zealand Association of Neurologists

<u>The Australian and New Zealand Association of Neurologists</u> is the peak professional body representing Neurologists in Australia and New Zealand.

#### The Australia and New Zealand Child Neurology Society

The Australia and New Zealand Child Neurology Society is a collaborative group of medical professionals working in the field of Paediatric Neurology or in allied neurosciences who are working to advance the science of Paediatric Neurology and advocate for improved care for young people with neurological disorders.

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