Stage C – Written Communications Portfolio

• The final stage of AFOEM training.

• Introduced as part of wider changes to the training program structure.

• Difficult to assess these skills in a written exam.
**Stage C - Written Communications Portfolio**

**WHY?**

- “Demonstrate the ability to *organise and prioritise* information”
- “Communicate in an *effective, concise and conventional* way”

We are judged for our written communication frequently as an Occupational Physician, by:

- Colleagues
- Clients (organisations or individuals)
- Legal profession
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**WHAT?**

- “real life” situations - actual work of trainee
- Clearly defined purpose outlined in cover letter
- Quality report - would you be happy to pay for this?
- Aimed at the “intelligent non-expert”
- Reference to legal framework and considerations where relevant
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HOW?

- Take advantage of opportunities in your training to conduct Medicolegal and Worksite Assessment reports under supervision.

- Consider scenarios that may be appropriate in the 12 months prior to submission.

- Review cases and adapt to assessment requirements (see “WCP writing guidelines”, “WCP assessment criteria” - RACP AFOEM training portal)

- Ensure you are familiar with marking guidelines (see “WCP assessment criteria”)

- Use illustrations where useful (particularly in Workplace Assessment)
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ASSESSMENT:

- Two examiners review reports individually, then discuss to determine agreement in overall assessment
- Focus on basics and requirements clearly outlined in written material
- “meets standards” or “does not meet standards”
- Resubmission required if standard not met, constructive and detailed feedback provided by examiners
- If standard not met on resubmission, new reports in 12 months
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PITFALLS:

• Not adequately editing or formatting a “real life” case to meet the WCP assessment style and needs
• Misinterpreting the Workplace Assessment report as a medicolegal or clinical report
• Lack of clarity in the cover letter in regards to purpose of the report (including limitations where relevant)
• Not involving your supervisor in the review of your work prior to submission
• Omitting to “proof” the report prior to submission
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**WORKPLACE ASSESSMENT CHECKLIST: Have I?**

- Included a personal visit to the workplace (rather than a description of it)?
- Analyzed and confirmed that tasks identified are part of the inherent requirement of the role?
- Utilized objective findings (ie. on examination or in the workplace) for recommendations rather than relying solely on subjective descriptions.
- If work restrictions have been advised, are they available, realistic and easy to follow?
- Considered relevant legislation or known industry standards?
- Reviewed that any photos & references quoted are clear, useful and relevant?
- Ensured consistency throughout the report with conclusions that address the hazards/risks identified in other sections of the report.
- Explained why the recommendations will help (evidence base)?
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MEDICOLEGAL ASSESSMENT CHECKLIST: Have I?

- Included a personal assessment of the individual (rather than a 3rd party file review)?
- Analyzed and confirmed that tasks identified are part of the inherent requirement of the role?
- Utilized objective findings (ie. on examination) and level of function information for recommendations.
- Considered if any advised work restrictions are available, realistic and easy to follow?
- Considered relevant legislation or known industry standards?
- Reviewed that any references quoted are clear, useful and relevant?
- Ensured consistency throughout the report with conclusions that address the findings observed in other sections of the report.
- Explained why the recommendations will help (evidence base)?
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SUMMARY POINTS:

• Although this may be the final assessment task for AFOEM training, don't leave thinking about it or planning suitable cases to the last minute!

• Ensure you submit a suitable, relevant, "fit for purpose" report for the assessment, reviewing the requirements and recommendations available on the training tab of the website beforehand.

• Involve your supervisor to ensure that the report is appropriate and has been "proof read" prior to submission. Report assessment includes attention to details such as spelling, grammar and formatting.

• Remember, we are judged often on the quality of our written communication in day to day specialist Occupational Medicine practice.