# Learning Capture

The purpose of a Learning Capture is to capture your evidence of work-based learning activities that are linked to the learning goals.

## Workflow

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| **Trainee** | |
|  | Complete a learning activity such as undertaking a new procedure, running a family meeting, attending a conference, or reading a journal article. |
|  | Fill out the personal details and learning activity details. |
|  | Attach any de-identified evidence of the learning (optional) |
|  | Send the Learning Capture to an assessor for feedback (optional). |
|  | If feedback is not requested, save a copy of the Learning Capture for your records, and send the saved, completed Learning Capture to [curriculum@racp.edu.au](mailto:curriculum@racp.edu.au) |
| **Assessor (optional)** | |
|  | Review the information entered by the trainee and provide feedback. |
|  | Once the feedback is completed, send the Learning Capture to the Trainee for their records. |
| **Trainee** | |
|  | Review the feedback and comments from the assessor. |
|  | Save a copy of the Learning Capture for your records. |
|  | Send the saved completed Learning Capture to [curriculum@racp.edu.au](mailto:curriculum@racp.edu.au) |
| **RACP staff** | |
|  | Save and upload documentation to Tracc when available. |

Please note that this form is for use at settings that have nominated to use electronic assessment forms in place of Tracc for a period of time. For a list of settings using these forms, including timeframes, please see the [new Basic Training program webpage](https://www.racp.edu.au/trainees/basic-training/curricula-renewal/new-basic-training-program).

If your setting has not elected to use electronic forms, please use Tracc to complete your assessments.

If you have any questions or require additional support using this form, please contact the Basic Training Curricula Renewal team at [curriculum@racp.edu.au](mailto:curriculum@racp.edu.au).

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| **Trainee name and MIN**  *Title, preferred name, surname, MIN* | Click or tap here to enter text. | | |
| **Training information**  *Include in this section, dates of rotation, specialty, and training setting location* | Click or tap here to enter text. | | |
| **Learning capture title** | Click or tap here to enter text. | | |
| **Date of learning activity** | Click or tap here to enter text. | | |
| **Type of learning** | Clinical experiences  Courses, seminars and workshops  Personal reflection  Readings and resources  Other learning experiences: Click or tap here to enter text. | | |
| **Description of activity**  *Short description of what you did* | Click or tap here to enter text. | | |
| **What did you learn?**  *Describe what you learned in this activity* | Click or tap here to enter text. | | |
| **How will you apply this learning in the future?** | Click or tap here to enter text. | | |
| **Select the learning goal(s) to which this experience applies** | Clinical assessment  Communication with patients  Documentation  Prescribing  Transfer of care | | Investigations  Acutely unwell patients  Procedures  Knowledge  Professional behaviours |
| **Attachment(s)**  ***Optional*** *to include deidentified files in the following formats. Attachments should be emailed with this form to* [*curriculum@racp.edu.au*](mailto:curriculum@racp.edu.au) | * Image/JPEG * Application/PDF * Image/PNG | * Audio/MPEG * Video/MPEG * Video/MP4 | |
| **Assessor feedback [optional]** | | | |
| **What did the Trainee do well in this learning experience?** | Click or tap here to enter text. | | |
| **What can they improve upon?** | Click or tap here to enter text. | | |