# Phase Progress Report

## The purpose of the Phase Progress Report is to assess your progress over a phase of training.

## Workflow

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| **RACP staff** | |
|  | Fill out sections of the progress report related to previous assessments. |
|  | Sends package of all assessments completed by Trainee throughout the phase and partially pre-filled progress report to Trainee. |
| **Trainee** | |
|  | Ensure all the assessments completed in the phase are available to the Education Supervisor for review. |
|  | Review any completed captures, learning opportunities and plans. |
|  | Self-assess your progress against your learning goals across the phase. |
| **Education Supervisor** | |
|  | Review and assess the Trainee's progress against each of the learning goals. |
|  | Reflect on the Trainee's progress and provide comments. |
|  | Provide a recommendation to the Trainee's Director of Physician/Paediatric Education. |
| **Trainee** | |
|  | Save a copy of the Phase Progress Report for your records. |
|  | Send the saved and completed Phase Progress Report to [curriculum@racp.edu.au](mailto:curriculum@racp.edu.au) |
| **BTCR Team** | |
|  | 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. | | | |
| **Rotation 1** | | | |
| *Include dates of rotation, specialties, and training setting location*  Click or tap here to enter text. | **Rotation Supervisor(s)**  Click or tap here to enter text. | **Learning captures completed**  Choose an item. | **Observation captures completed**  Choose an item. |
| **Leave taken**  Click or tap here to enter text. | | **Rotation report recommendation**  Choose an item. | |
| **Rotation 2** | | | |
| *Include dates of rotation, specialties and training setting location*  Click or tap here to enter text. | **Rotation Supervisor(s)**  Click or tap here to enter text. | **Learning captures completed**  Choose an item. | **Observation captures completed**  Choose an item. |
| **Leave taken**  Click or tap here to enter text. | | **Rotation report recommendation**  Choose an item. | |
| **Rotation 3** | | | |
| *Include dates of rotation, specialties, and training setting location*  Click or tap here to enter text. | **Rotation Supervisor(s)**  Click or tap here to enter text. | **Learning captures completed**  Choose an item. | **Observation captures completed**  Choose an item. |
| **Leave taken**  Click or tap here to enter text. | | **Rotation report recommendation**  Choose an item. | |
| **Rotation 4** | | | |
| *Include dates of rotation, specialties, and training setting location*  Click or tap here to enter text. | **Rotation Supervisor(s)**  Click or tap here to enter text. | **Learning captures completed**  Choose an item. | **Observation captures completed**  Choose an item. |
| **Leave taken**  Click or tap here to enter text. | | **Rotation report recommendation\***  Choose an item. | |
| **Rotation 5** | | | |
| *Include dates of rotation, specialties, and training setting location*  Click or tap here to enter text. | **Rotation Supervisor(s)**  Click or tap here to enter text. | **Learning captures completed**  Choose an item. | **Observation captures completed**  Choose an item. |
| **Leave taken**  Click or tap here to enter text. | | **Rotation report recommendation\***  Choose an item. | |
| **Add any comments about learning captures and observation captures across the phase.**  Click or tap here to enter text. | | | |
| **Trainee comments**  *Reflect on the progress report and learning plan, think about if you met your learning goal targets as set out in the learning plan. Add any comments that you would like to share with your Education Supervisor. They will have the option to review and comment on your learning plan.* | | Click or tap here to enter text. | |

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| **Learning goal assessment section** | | | | | |
| **Learning goals** *The 2021 Basic Training Handbook outlines the learning goals in greater detail,* [*https://elearning.racp.edu.au/login/index.php*](https://elearning.racp.edu.au/login/index.php)  *Learning goal targets were set in your phase learning plan. If available, these should be reviewed prior to making assessments on your progress against the learning goals.* | **Trainee Assessment** | | **Education Supervisor Assessment** | | |
| *This section is for the Trainee to fill out, assessing their performance across the phase.* | | *This section is for the Education Supervisor to fill out assessing the Trainees performance across the phase.* | | |
| *Select the most appropriate response based on your progress at the time of completing this self-assessment.*  I am… | *Add any supplementary comments for your supervisor’s consideration.* | *Select the most appropriate assessment based on your observation of the trainee.*  The trainee is… | | *Add any comments and goal-specific feedback for this trainee.* |
| **1 Clinical assessment** | Choose an item. | Click or tap here to enter text. | Choose an item. | | Click or tap here to enter text. |
| **2 Communication with patients** | Choose an item. | Click or tap here to enter text. | Choose an item. | | Click or tap here to enter text. |
| **3 Documentation** | Choose an item. | Click or tap here to enter text. | Choose an item. | | Click or tap here to enter text. |
| **4 Prescribing** | Choose an item. | Click or tap here to enter text. | Choose an item. | | Click or tap here to enter text. |
| **5 Transfer of care** | Choose an item. | Click or tap here to enter text. | Choose an item. | | Click or tap here to enter text. |
| **6 Investigations** | Choose an item. | Click or tap here to enter text. | Choose an item. | | Click or tap here to enter text. |
| **7 Acutely unwell patients** | Choose an item. | Click or tap here to enter text. | Choose an item. | | Click or tap here to enter text. |
| **8 Procedures** | Choose an item. | Click or tap here to enter text. | Choose an item. | | Click or tap here to enter text. |
| **9 Professional behaviours** | Choose an item. | Click or tap here to enter text. | Choose an item. | | Click or tap here to enter text. |
| **10 Knowledge** | Choose an item. | Click or tap here to enter text. | Choose an item. | | Click or tap here to enter text. |
| **Education Supervisor** | | | | | |
| **Education Supervisor comments** *Provide any comments that you think will benefit and guide the Trainees learning over the next phase of training.* | **What did the trainee do well during this phase?**  Click or tap here to enter text. | | | **What could they improve on in the next phase?**  Click or tap here to enter text. | |
| **Progression recommendation**  Choose an item. | **Comments on recommendation**  Click or tap here to enter text. | | | **Date report completed**  Click or tap to enter a date. | |