

# Subspecialties Training and Assessment Documentation Policy and Procedure

## Purpose and Scope

This policy outlines the Royal Australian and New Zealand College of Obstetricians and Gynaecologists (RANZCOG/ College) policy and procedures for assessment and training documents concerning the RANZCOG Subspecialty training program. This policy applies to trainees on the pathway to certification in a RANZCOG Subspecialty.

# **Policy**

Persons undertaking a RANZCOG Subspecialist training program, CREI, CMFM, CU, CGO, COGU, or the subspecialist SIMG pathway may be required to undertake assessments to be eligible to be awarded a RANZCOG qualification. All information regarding program requirements can be found in the applicable sections of the RANZCOG Regulation

This policy covers the following assessments and training documents:

- Training Assessment Record (TAR)
  - o Logbook
  - o Six-Monthly Summative Assessment Reports
- Three-Monthly Formative Appraisal
- In-Hospital Clinical Ultrasound Assessment/Examination

## Procedure

## 1 Training Assessment Documentation (TAR)

## 1.1 Training Assessment Record

Trainees must maintain an up-to-date record of all training and assessment documentation required by the relevant subspecialty training program. This information must be submitted to RANZCOG with each Six-monthly Summative Assessment Report. Trainees who fail to submit this record will not receive credit for any training undertaken in the relevant training period.

On commencement of a new training post, trainees must submit an up-to-date training record to their new Training Supervisor. Trainees who fail or refuse to submit an up-to-date training record will not gain credit for any training undertaken and/or assessment or other component of subspecialty training attempted and/or completed during the period in which the training record was not made available to the Training Supervisor.

## 1.2 Logbook

Trainees are required to keep a Logbook (Daily Training Record) of their daily training for each year of training. The contents of the Logbook must be reviewed, initialled and dated by the Training Supervisor as per logbook instructions.



#### 1.2.1 Review and Approval of Training Assessment Records

The Chair of the relevant subspecialty committee must review and approve a trainee's final cumulative log of clinical training before the Certificate of Satisfactory Completion can be completed.

#### 1.2.2. Certificate of Completion of Subspecialty Training

The Certificate of Satisfactory Completion of the applicable subspecialty training program must be completed and signed by the Chair of the relevant Subspecialty Committee before certification in the subspecialty can occur.

### 1.3 Six-Monthly Summative Assessment Reports

#### 1.3.1 Submission and Approval Six-Monthly Summative Assessment Reports

The reports must be completed by the Training Supervisor, discussed with the trainee and signed by the relevant Subspecialty Committee Chair. This documentation must be forwarded to RANZCOG six (6) weeks of the end of the relevant training period to which a Six-monthly Summative Assessment Report relates.

Once completed, Six-monthly Summative Assessment Reports will be assessed by Training Supervisors as either 'Satisfactory' or 'Referred for Review'.

Any Six-monthly Summative Assessment Report which is 'Referred for Review' must be forwarded to the Chair of the relevant Subspecialty Committee for further consideration and action by that committee. The report must be accompanied by a written suggested Learning Development Plan (LDP) for the trainee.

#### 1.3.2 Six-monthly Summative Assessment Reports and 'Referred for Review'

All Six-monthly Summative Assessment Reports 'Referred for Review' will be considered by the relevant Subspecialty Committee at the next meeting following the conclusion of the relevant six-month training period. The Committee, after discussion, will decide if the trainee's assessment is to be deemed 'Satisfactory' or 'Not Satisfactory'. In making their decision, the Committee will discuss the trainee's report with the relevant Training Supervisor and/or Program Director. Previous reports and progress should also be reviewed and specific areas of concern identified and noted.

The trainee should ensure the assessment is initiated and lodged with the College.

#### 1.3.3 Outcome for 'Referred for review'

If the Six-monthly Summative Assessment Report is assessed by the relevant Subspecialty Committee as 'Satisfactory', the Chair will write to the trainee informing them of the Committee's decision.

If the Committee's view is that there are still areas of concern in relation to the trainee's performance and progress, this must be communicated to the trainee in the same letter. Copies of the letter should be sent to the relevant Training Supervisor and Program Director (if applicable). The Chair must also indicate the Committee's decision on the report and sign and date it. A copy of the report will then be sent to the trainee.

The Learning Development Plan, with any revisions considered necessary by the relevant Subspecialty Committee, submitted with the Six-monthly Summative Assessment Report must be implemented as soon as possible following consideration of the report by the relevant Subspecialty Committee.



If the Six-monthly Summative Assessment Report assessed by the relevant Subspecialty Committee is deemed by the Committee to be 'Not Satisfactory', the Chair will write to the trainee notifying them of the decision and of the fact that the relevant six-month period will not be credited.

The letter should advise the trainee of the reasons for the Committee's decision and make recommendations for improvements in performance and progress, including appropriate supervision and mentoring. The letter should also remind the trainee that three (3) 'Not Satisfactory' Six-monthly Summative Assessment Reports in the course of the training program will result in a recommendation for removal from the training program. Copies of the letter should be sent to the relevant Training Supervisor and Program Director (if applicable).

A (written) Learning Development Plan for the trainee, with any revisions considered by the relevant Subspecialty Committee, submitted with the Six-monthly Summative Assessment Report must be implemented as soon as possible. A copy of this plan should be retained in the trainee's file at RANZCOG.

#### 1.3.4 Failure to Submit Training Documentation

If a trainee fails to submit a Six-monthly Summative Assessment Report and Clinical Training Summary within six (6) weeks of the end of the relevant training period, the relevant six- month training period will automatically be assessed as 'Not Satisfactory'. The trainee will be advised of this by the relevant Subspecialty Committee. Should there be a second failure to submit a Six-monthly Summative Assessment Report and Clinical Training Summary within the stipulated timeframe, they will be recommended for removal from the training program. No further warnings will be provided.

## 2. Three-Monthly Formative Appraisals

Completion of regular Three-monthly Formative Appraisals and Six-monthly Summative Assessment Reports for each trainee are compulsory and will be undertaken at dates determined by the relevant Subspecialty Committee.

#### 2.1 Submission and Approval of Three-Monthly Formative Appraisal

The reports must be completed by the Training Supervisor, discussed with the trainee and signed by the relevant Subspecialty Committee Chair. This documentation must be forwarded to RANZCOG within four (4) weeks of the end of the relevant training period to which a Three-monthly Formative Appraisal relates.

In the event that there are concerns about a trainee's performance and progress it is essential that this is indicated to the trainee and recorded at the time of the Three-monthly Formative Appraisal.

## 2.2 Failure to Submit Training Documentation

If a trainee fails to submit a Three-monthly Formative Appraisal by the stipulated deadline, the relevant three-month training period will not be credited.

#### 3. In-Hospital Clinical Ultrasound Assessment/Examination

#### 3.1 Ultrasound Modules

CMFM trainees must complete the Diploma of Diagnostic Ultrasound (DDU) Part 1 and the In-Hospital Clinical Ultrasound Examination (IHCE).

COGU trainees must complete the In-hospital Clinical Ultrasound Assessment (IHCA).



#### 3.2 Attempts

The IHCA/IHCE may be repeated as a summative assessment as many times as is necessary, but not within four (4) weeks of an unsuccessful attempt.

#### 3.3 Eligibility

CMFM trainees must complete the DDU Part 1 before the IHCE is attempted.

CMFM trainees may undertake the required IHCE after completion of 69 weeks FTE of satisfactory prospectively approved subspecialty training.

#### 3.4. Assessors

All assessors/examiners must be selected in accordance with the requirements of the relevant subspecialty

## 4 Related RANZCOG documents

- RANZCOG Regulation
- Exceptional Circumstances and Special Consideration Policy and Procedure
- Reconsideration, Review and Appeal of Decisions Policy
- Certification in Gynaecological Oncology (CGO) Training Program Handbook
- Certification in Maternal Fetal Medicine (CMFM) Training Program Handbook
- Certification in Obstetrical and Gynaecological Ultrasound (COGU) Training Program Handbook
- Certification in Reproductive Endocrinology and Infertility (CREI) Training Program Handbook
- Certification in Urogynaecology (CU) Training Program Handbook

Version	Date of Version	Pages revised / Brief Explanation of Revision
v1	November 2022	Extraction from Regulation

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