

**FORM TP3.4 Zone Training Coordinator - Progress Reflection**

Once you have completed your Progress Reviews with your Clinical Training Supervisor and, if necessary, your Clinical Training Instructor, you will undertake a Progress Reflection with your Zone Training Coordinator (ZTC).

Please reflect on your placement and training during the past 6 months and to consider areas done well and areas requiring further development. Your review also offers a chance to discuss your plans for future work and placements. If you are experiencing any issues with your current placement or Learning Program, please raise with your ZTC.

Prior to the Review, please populate this first page and email to your ZTC. The Progress Reflection is then conducted (may be in person or via video conferencing) and your ZTC will complete the form. Please ensure you email completed ZTC forms to registrars@acsep.org.au by the end of each training period to ensure they are included in your portfolio records.

SECTION 1: TRAINING PERIOD BEING REVIEWED & CURRENT PLACEMENTS

Registrar's Name:	
Zone Training Coordinator's Name:	

SECTION 2: TRAINING PERIOD BEING REVIEWED & CURRENT PLACEMENTS

Training Program Year: <i>As per Full Time Equivalent</i>		Training Period:		Year of Training:	
Full Time or Part Time:			Program Loading:		
	Placement #1		Placement #2		Placement #3
Clinical Practice/s:					
Clinical Training Supervisor/s:					
Has ZTC seen CTS's Progress Review?	YES	NO	YES	NO	YES NO
Clinical Training Instructor <i>Optional</i>					
Has ZTC seen CTI's Progress Review?	YES	NO	YES	NO	YES NO
Mentor/s					
Team / Events					



FORM TP3.4 Zone Training Coordinator - Progress Reflection

SECTION 3: DISCUSS & DOCUMENT - CTS, TEAM/EVENTS & CTI PROGRESS REFLECTION

Discuss and list the Registrar's working practices with these people/groups, such as: Does the Registrar feel supported? Do they have enough patients to see? Any issues with their CTS/CTI?

WORKING WITH CTS	WORKING WITH TEAM/EVENTS	WORKING WITH CTI

SECTION 4: TRAINING PROGRAM REFLECTION

TASKS COMPLETED	ZONE TRAINING COORDINATOR COMMENTARY As per Registrar's Supervisor & Instructor Progress Reviews, are you satisfied that the Registrar has successfully met their minimum requirements?
1.4 Training Diary & 1.5 Log of Procedural Skills	
4.1 College Tutorials ~22 a Training Period, 85% attendance rate	
2.1 - 2.3 Work Based Assessments Mini-CEX, DOPS & CbD Min 3 per Training Period	
3.1 - 3.5 Team & Event Categories	
5.1 - 5.6 Academic Modules At least 1 completed per year	
6.1 - 6.4 Research (also see final page)	
Other Tasks Eg, Conference Attendance, Conference Presentations, MOST Course	



FORM TP3.4 Zone Training Coordinator - Progress Reflection

SECTION 5: DISCUSS & DOCUMENT - TRAINING PROGRAM REFLECTION

Discuss and list the Registrar's strengths and areas of improvement, such as: Discuss what was mentioned within the CTS/CTI Progress Review and reflect on these. What have they done well this Training Period? Which deliverables have they completed successfully? Which deliverables are falling behind/not completed? Which areas could the Registrar concentrate on to improve during the next Training Period? How does the Registrar feel they are progressing within their Training Program?

STRENGTHS	IMPROVEMENTS

SECTION 6: NEXT YEAR'S TRAINING PROGRAM & PLACEMENTS

For the Registrar to complete where they anticipate where they will be working next year.

Training Program Year: <i>As per Full Time Equivalent</i>		Year of Training:	
Full Time or Part Time: Part Time Placements MUST be submitted to the Training Committee for Review/Approval		Program Loading:	
	Placement #1	Placement #2	Placement #3
Clinical Practice/s:			
Clinical Training Supervisor/s:			
Clinical Training Instructor Optional			
Mentor/s			
Team / Events			



FORM TP3.4 Zone Training Coordinator - Progress Reflection

SECTION 7: ANY OTHER GENERAL COMMENTS

SECTION 8: TRAINING PERIOD OUTCOME

PROGRESS REVIEW OUTCOME:	Satisfactory Progress – Training Period & Training Time Endorsed Unsatisfactory Progress – Training Period & Training Time is not sufficient and a review by the Training Committee is required	
<p>If “Unsatisfactory Progress”, what is the Progress Action Plan?</p> <p>It is advisable that the Registrar’s Annual Training Plan be updated to address this Plan.</p> <p>Communication with other ACSEP boards/ committees may be required</p>		
	Date for Review:	

	Signature	Date
Registrar’s Signature:		
Zone Training Coordinator’s Signature:		

Please upload the completed, signed form to your LMS and email to registrars@acsep.org.au.



FORM TP3.4 Zone Training Coordinator - Progress Reflection

RESEARCH REQUIREMENTS UPDATE FOR REVIEWED TRAINING PERIOD

RESEARCH	Research 10 points must be completed before Clinical Exams & Application of Fellowship. *Registrar must provide document evidence uploaded to folders & sighted	
Mandatory RBA = 5 points	Documents must be uploaded to Training Profile Research Progress - Year Research Activity - Record	Sighted 'Yes' <input checked="" type="checkbox"/> or date Research Requirement proposed to be completed
1. Research Methodology Module (2 points)	1. Module Certificate *(or RPL Approval Letter)	<input type="checkbox"/> OR Date Expected:
2. RS4.2 Research Proposal Submitted & RC Approved (2 points)	1. Copy of RS4.2 Research Proposal 2. Copy of Letter of Approval *(or RPL Approval Letter)	<input type="checkbox"/> OR Date Expected:
3. Presentation ACSEP Main Conference (1 point) *No RPL	1. Proof of Abstract Acceptance / Proof of presentation	<input type="checkbox"/> OR Date Expected:
CHOICE of RBA Total must = 5 points	Documents must be uploaded to Training Profile Research Progress - Year Research Activity - Record	Sighted 'Yes' <input checked="" type="checkbox"/> or date Research Requirement proposed to be completed
1. Original Research Publication - Scimago Quartile 2 Journal (5 points)	1. Copy of RS5.1 submission 2. Copy of Letter of Approval 3. Copy of manuscript (PDF) *(or RPL Approval Letter)	<input type="checkbox"/> OR Date Expected:
2. Original Research Publication - Lower Rank/Peer Reviewed Journal (3 points)	1. Copy of RS5.2 submission 2. Copy of Letter of Approval 3. Copy of manuscript (PDF) *(or RPL Approval Letter)	<input type="checkbox"/> OR Date Expected:
3. Completion of Original Research Competencies - Unpublished (1 or 2 points) *No RPL	1. Copy of RS5.3 submission 2. Copy of Letter of Approval	<input type="checkbox"/> OR Date Expected:
4. Co-author in Ongoing or Published Research (1 point) *No RPL	1. Copy of RS5.4 submission 2. Copy of Letter of Approval 3. Copy of manuscript (PDF)	<input type="checkbox"/> OR Date Expected:
5. First Author in Other Publication (1 point)	1. Copy of RS5.5 submission/ 2. Copy of Letter of Approval 3. Copy of manuscript (PDF) *(or RPL Approval Letter)	<input type="checkbox"/> OR Date Expected:
6. Presentation (Verbal) at a Nat/Inter Conf. (Non-ACSEP) (1 point) *No RPL	1. Copy of RS5.6 submission 2. Copy of Letter of Approval	<input type="checkbox"/> OR Date Expected:
7. Presentation (Poster) at a Nat/Inter Conf (Non-ACSEP) (1 point) *No RPL	1. Copy of RS5.7 submission 2. Copy of Letter of Approval	<input type="checkbox"/> OR Date Expected:
8. Evidence of impact / translation of research findings (1 point) *No RPL	1. Copy of RS5.8 submission Copy of Letter of Approval	<input type="checkbox"/> OR Date Expected: