



## Clinical Training Supervisor Progress Review Form

### DESCRIPTION

This form is used during a Registrar's end of Training Period progress review with their Clinical Training Supervisor (CTS). A separate review and form must be completed for every CTS a Registrar has.

The CTS progress review must be conducted in a meeting between the Registrar and CTS in person or via videoconference. Prior to the review, the Registrar must populate the relevant sections of the form and provide to their CTS before meeting. The Registrar's Annual Training Plan (ATP) and online portfolio should be provided to the CTS. During the review, the CTS completes the relevant sections and discusses the Registrar's progress during the specified Training Period.

This form must be uploaded to the Registrar's online portfolio by 14 July for Training Period 1 and 14 January for Training Period 2 and discussed with the Registrar's Zone Training Coordinator (ZTC) during the ZTC 6-month progress review.

### REGISTRAR DETAILS

Registrar name		Year	
Stage of training		Training period	
Full-time or part-time		Loading	

### CTS AND PRACTICE DETAILS

CTS name			
Practice name and location			
<b>Loading with this CTS</b> <i>If the Registrar worked at more than one practice or with more than one CTS at this practice, what was the loading with this CTS at this practice?</i>		<b>Patient loading</b> <i>On average, how many patients did the Registrar see a week at this practice?</i>	



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## TRAINING HOURS ALLOCATION

Registrars and CTSs should refer to the latest Training Manual and the Registrar's ATP to match expected hours for the Training Program and project hours in the Registrar's ATP.

Training hours allocation		Completed by Registrar <i>On average, how many hours per week did you work at this Practice and with this CTS?</i>	Completed by CTS <i>Are you satisfied that the Registrar has successfully met their minimum/maximum Training Program hours?</i>
Clinical Training Time <i>Excluding time spent on non-Training Time activities (events/teams, research, modules etc.)</i>	With CTS - Level 1 supervision		
	With CTS - Level 2 supervision		
	College tutorials		
	TOTAL		
	Leave <i>Weeks of leave taken by the Registrar during this Training Period</i>		
	Commentary		
Discuss and document <i>Any major wins or challenges faced by the Registrar during the Training Period</i>			



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**TRAINING PROGRAM PROGRESS**

Registrars and CTSs should reflect on Training Program progress in this Training Period.

Requirements completed under CTS supervision	Completed by Registrar <i>Registrar to document progress</i>	Completed by CTS <i>CTS to verify they are satisfied with progress</i>
Training Logbook	<input type="checkbox"/> Logbook kept and sufficient	<input type="checkbox"/> Logbook sighted and sufficient
Logbook of Procedures	<input type="checkbox"/> Logbook of Procedures kept and progressed	<input type="checkbox"/> Logbook of Procedures sighted and sufficient
College tutorials	<input type="checkbox"/> Minimum 85% met	<input type="checkbox"/> Minimum 85% met
<b>EPA Progress</b> <i>Completing WBAs and other requirements for EPAs required for the Registrar's current stage of training</i>	Stage 1 EPAs progressed: <input type="checkbox"/> EPA 1 <input type="checkbox"/> EPA 2 <input type="checkbox"/> EPA 3	<input type="checkbox"/> EPA documents and WBA documents required for the Registrar's stage sighted and sufficient
	Stage 2 EPAs progressed: <input type="checkbox"/> EPA 4 <input type="checkbox"/> EPA 5 <input type="checkbox"/> EPA 6 <input type="checkbox"/> EPA 7 <input type="checkbox"/> EPA 8 <input type="checkbox"/> EPA 9	
	Stage 3 EPAs progressed: <input type="checkbox"/> EPA 10 <input type="checkbox"/> EPA 11	
Commentary on EPA progress		



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Other requirements completed <i>May not have occurred under CTS supervision, but the CTS should be aware of their progress</i>	Completed by Registrar <i>Registrar to document progress</i>	Completed by CTS <i>CTS to provide feedback that may be of assistance</i>
Event and team coverage		
Academic modules		
Research Based Activity		
Other requirements <i>E.g., Courses, education modules, conference attendance, presentations</i>		

REFLECTION ON PERFORMANCE

The CTS must rate the Registrar on their performance during the Training Period.

Area of reflection	Unsatisfactory			Satisfactory			Above satisfactory			N/A
	1	2	3	4	5	6	7	8	9	
General sports medicine knowledge										
General internal medicine knowledge										
Patient assessment and investigations										
Preventive and therapeutic interventions										
Communication with patients (oral and written)										
Communication with colleagues (oral and written)										
Working in team environment (both healthcare and sport)										



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Managing time and resources effectively				
Identifying opportunities for health advocacy				
Integrating new learning into practice				
Exhibiting professional behaviours in practice				
<b>Discuss and document</b> <i>Registrar strength and development areas</i>	Strength areas			
	Development areas			
<b>Discuss and document</b> <i>Registrar planning for the coming Training Period and year e.g., what must be completed and when, and where they plan to work in the coming year</i>	Planning for the coming Training Period and year			
	Intended work location for the coming year			

## TRAINING PERIOD PROGRESS OUTCOME

The CTS must determine their satisfaction with the Registrar's progress during the Training Period.

Training Program progress	<input type="checkbox"/> Satisfactory	<input type="checkbox"/> Unsatisfactory
Registrar performance progress	<input type="checkbox"/> Satisfactory	<input type="checkbox"/> Unsatisfactory
Overall progress	<input type="checkbox"/> Satisfactory	<input type="checkbox"/> Unsatisfactory



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To be completed if overall progress  
unsatisfactory

*Action plan to achieve satisfactory progress*

**SIGNOFF**

Registrar name		Signature	
Date			
CTS name		Signature	
Date			