

This form must be signed by the person who directly supervises the trainee, after reviewing the Trainee's portfolio and logbook.

Name of Trainee (please print)

RCPA ID no.

Name of organisation

Year of training **1 2 3 4 5 5 + If >5, specify**

Training period - provide full, accurate dates for accreditation of training **to**

☐ **Full Time** or ☐ **Part Time** **Specify hours per week employed**

Leave (taken or planned within this training period)

<input type="checkbox"/> Annualweeks ordays
<input type="checkbox"/> Study leaveweeks ordays
<input type="checkbox"/> Sick leaveweeks ordays
<input type="checkbox"/> Parental/maternityweeks ordays

Is this a pre-examination report? ☐ No ☐ Yes **Part I Part II**

Name of supervisor (please print) **Supervisor RCPA ID no.**

Leave taken by supervisor during this training period ____ weeks **Arrangements made for supervision of training during period of leave**

Please inspect the Trainee's portfolio and use the Table below to record the number of forms that indicate satisfactory performance.

Please also check that the portfolio includes the de-identified laboratory reports that correspond to the forms (remove/obscure the patient name and medical record number).

Forms and laboratory reports in the portfolio					For information	
		Previous total	Number in current year or rotation	Cumulative Total	Minimum prior to Part I	Minimum for Part II pre-exam Supervisor's report
Autopsies performed	Adult				Not mandatory	
	Paediatric				Not mandatory	
	Perinatal				Not mandatory	
Autopsy assessment					Not mandatory	
Cut-up Complexity levels - see Appendix 8	Complexity 2-3				4 in Year 1 2 in Year 2 1 in Year 3	1 in Year 4 1 in Year 5
	Complexity 4					
	Complexity 5-7					
Histochemical stains					No minimum	4
Surgical cases	Complexity < 5				No minimum	20
	Complexity = or >5				No minimum	20
Synoptic reports					5	Total 10 (incl. for Part 1)
Frozen sections					5 per year	Total 50 (incl for Part I)
Cytology	Specimens				No minimum	50 gynae & 50 non-gynae incl. 10 FNA
	Period spent				No minimum	3 months
Clinical meetings					10 per year	Total of 50 (incl those for Part I)
Safety checklist					1 only	
Previous supervisor reports					All	All

Please inspect the Trainee's logbook and use the Table below to record the number of cases logged.

Cases recorded in the logbook					
	Previous total	Number in current year or rotation	Cumulative Total	Minimum for Part I pre-exam Supervisor's report	Minimum for Part II pre-exam Supervisor's report
Surgical cases				No minimum	3000
Immunohistochemistry				No minimum	No minimum
EM				No minimum	No minimum
Molecular techniques				No minimum	No minimum

Professional Qualities: e-Learning Modules				
	Completed previously	OR	Date completed RCPA Module	Date completed workplace training
Quality Management				N/A
Laboratory Safety				N/A
Ethics, Professionalism and Confidentiality				N/A
Cultural Safety				OR

Please inspect the Trainee's portfolio use the Table below to record completion of the required number/type of items providing evidence of personal professional development (PPD).

Personal professional development					
	Previous total	Number in current year or rotation	Cumulative Total	Minimum for Part I pre-exam Supervisor's report	Minimum for Part II pre-exam Supervisor's report
A TOTAL OF EIGHT (8) ITEMS MUST BE SUPPLIED					
Category A					
Published article or accepted manuscript				No minimum	Minimum 2 items but up to eight (8) can be included, of which only one (1) can be a research proposal
Oral paper – national or international meeting					
Poster - national or international meeting					
Formal research proposal					
Category B – only required if fewer than eight (8) Category A items					
Oral presentation at hospital or regional meeting				No minimum	Maximum 2
Written report of audit activity				No minimum	Maximum 2
Written report of complex case				No minimum	Maximum 3
Teaching session				No minimum	Maximum 2

For pre-examination supervisor's reports:

Does the print-out of the portfolio summary spreadsheet accurately record the contents of the portfolio?

☐ Yes ☐ No

Please score the Trainee's performance using this scale

- 1 = Performance currently falls far short of expected standards for level of training.
There is a serious problem that may have implications for accreditation of the current training period. The problem must be stated clearly on the final page.
- 2 = Performance currently falls short of expected standards for level of training.
There is an area of lower than expected performance. The problem must be stated clearly on the final page.
- 3 = Performance is consistent with the expected level of training.
About 80% of trainees will merit this grade.
- 4 = Performance is better than expected for level of training.
About 10% of trainees will merit this grade.
- 5 = Performance is exceptional.
Very few trainees will merit this grade.
- N/A = Not Applicable to this training period

Macroscopic handling and description (score between 1-5)	
Quality of macroscopic description	
Quality of cut up (appropriate block selection, number and size of blocks)	
Timeliness of cut up	
Understands workflow and specimen processing	

Microscopy (score between 1-5)	
Quality of descriptions and ability at histological diagnosis	
Knowledge and use of appropriate ancillary techniques (eg. Special stains, immunohistochemistry).	
Quality of clinicopathological correlation	

Research (score between 1-5)	
Demonstrates up-to-date knowledge of the literature and innovations in relevant areas of <u>medicine and pathology</u> .	
Able to critically evaluate sources of medical information, discriminating between them in terms of <u>their currency, format, authority and relevance</u>	
<u>Understands and applies the methods used to establish evidence-based practice</u>	
Able to prepare reports and papers for publication that comply with the conventions and <u>guidelines for reporting biomedical research</u>	
Demonstrates skill in developing a research proposal, conducting appropriate research activities and writing up to a standard suitable for peer review/publication.	

Professional behaviour (score between 1-5)	
Complies with legal, ethical and medical requirements, including those related to: (a) patient records and documentation (confidentiality, informed consent, data security); (b) human and animal research; (c) copyright and intellectual property.	
Demonstrates awareness of own limitations, consulting when needing help and receptive to feedback & views of others.	
Able to manage time, prioritise and complete work efficiently and effectively, showing reliability and initiative.	
Demonstrates respectful interpersonal communication skills, using appropriate language and showing awareness of cultural, linguistic and intellectual diversity.	
Contributes effectively to inter-disciplinary team activities, such as peer review sessions and other education and quality activities, recognising the responsibilities and limitations of own role.	
Able to convey technical information in a manner that contributes to the growth of scientific knowledge and understanding among laboratory personnel, peers, medical students and other health professionals.	

This comment box is only for a scientist's evaluation. If not available, please leave blank		Score (1-5)
Demonstrates commitment to maintaining professional standards of behaviour in the laboratory and other settings, to support the delivery of effective health care		
Please comment on elements such as respect, courtesy, work ethic, reliability, etc.		

Position

Name

Signature

Overall evaluation (to be completed by the person who directly supervises the trainee)

Areas of strength in professional practice (please summarise)

Areas for development in professional practice (please summarise)

Is specific further professional development required? If yes, please outline process

☐ Yes

☐ No

If a score of 1 or 2 is given, please identify any specific issue that needs to be addressed with respect to the trainee's progress and/or the training environment. **In this case the form must be signed by the supervisor plus at least one senior colleague and a plan for remediation attached.**

Other comments (if insufficient space, please attach sheet)

Signatures

Trainee (please PRINT name and sign)	Date
RCPA supervisor who directly supervises the trainee (please PRINT name and sign)	Date
Other senior staff member/second Supervisor (if applicable) (please PRINT name and sign)	Date
Other senior staff member (if applicable) (please PRINT name and sign)	Date
Head of Department (please PRINT name and sign)	Date

Comments by trainee:

Please return this Supervisor Report by the due date to:

The Royal College of Pathologists of Australasia
207 Albion Street
Surry Hills NSW 2010 AUSTRALIA

Scanned reports will not be accepted.

THE ROYAL COLLEGE OF PATHOLOGISTS OF AUSTRALASIA USE ONLY

Signature

College Representative, Board of Education and Assessment (please PRINT name and sign)	Date
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