Royal Australasian College of Surgeons

The Royal Australasian College of Surgeons and the Australian Society of Plastic Surgeons collaborate in the delivery of the Surgical Education and Training Program in Plastic and Reconstructive Surgery

Training Regulation: Assessment of Clinical Training

1. PURPOSE AND SCOPE

This document outlines the Australian Board of Plastic and Reconstructive Surgery (***"the Board"***) regulations pertaining to the clinical assessment of trainees undertaking the Plastic and Reconstructive Surgery (***"PRS"***) Surgical Education and Training (***"SET"***) Program, their remediation for unsatisfactory performance, and corrective process for trainees following unsatisfactory performance.

The assessment of a Trainee's performance by the Surgical Supervisor is fundamental to their continuing progression through the surgical education and training program.

Notes:
- *Trainee dismissal from SET is covered in the Training Regulation: Dismissal from SET*
- *Trainee misconduct is covered in the Training Regulation: Trainee Misconduct.*

2. OVERVIEW

Each accredited training position has a Royal Australasian College of Surgeons (***"RACS"***) approved Surgical Supervisor nominated by the hospital and approved by the Board.

Surgical Supervisors coordinate, and are responsible for, the management, education, training and assessment of trainees rotating through accredited training posts.

Surgical Trainers are surgeons and fellows of RACS, or other medical specialists, who assist the Surgical Supervisor with monitoring, guiding and giving feedback to trainees, as well as appraising and assessing their performance.

3. DEFINITIONS

Legacy SET

Refers to the training program, its rules and stakeholders for trainees who were selected prior to 2021.

SET 2022

Refers to the training program, its rules and stakeholders for trainees who were selected in 2021 or later.

Training Term or Training Period

Refers to a period of Clinical Training Time equal to six (6) calendar months in which a trainee is allocated to an accredited training post and is assessed by way of Professional Performance Assessment every three (3) calendar months.

Clinical Training Time

Clinical training time is training time in an accredited training post. Trainees are required to satisfactorily complete clinical training time as part of minimum requirements for graduation from SET.

Flexible Training

In this regulation, the terms 'flexible clinical training' or 'flexible training' are interchangeable and refer to training that is less than 1.0 full time equivalent (FTE) or similar concepts such as less than full time training (LTFT), job share, fractional or part time training. Trainees on flexible training will accrue pro-rata Clinical Training Time equal to three (3) months for every six (6) calendar month Training Term.

Support Person

In this regulation, a support person may accompany a trainee to assessment meetings. The support person may not advocate for the trainee and cannot be a practising lawyer.

Working Days

In this regulation, the term 'working days' refers to Monday to Friday in New South Wales, excluding Public Holidays.

4. WORKPLACE BASED ASSESSMENT

4.1. Operative Feedback Form (*"OFF"*)

The OFF is a focused observation or "snapshot" of a trainee undertaking a surgical procedure. The trainee selects the procedure to be observed, noting that the surgical procedure selected should be appropriate to the trainee's SET level as found in the P&RS Curriculum and preferably from the table included in the Training Handbook. In the case of a deficiency, the supervisor selects the procedure to be observed.

The consultant selected to observe the procedure must be a FRACS surgeon who is a supervisor or a trainer in the Plastic Surgery rotation.

The trainee and supervisor or trainer must agree to undertake the assessment prior to the procedure.

The consultant records the trainee's performance electronically on the Training Management Platform (RACS TMP), and based on the provided scale, and gives feedback following the procedure on their performance. The assessment can be assigned toward a relevant Entrustable Professional Activity (EPA). During the short post-procedure meeting, the consultant also answers any questions that the trainee may have.

4.1.1. Operative Feedback Form Frequency

Surgical Supervisor may initiate this assessment at any time. In addition, trainees who are on probation may be required to complete additional OFF assessments as part of a remedial action plan. The requirement to complete an OFF in either of these situations will be based on the professional judgement of the Surgical Supervisor.

Legacy SET Trainees **must** complete a minimum of one (1) OFF per clinical term.

SET 2022 Trainees should complete OFF assessments regularly in order to build up clinical experience relevant to Entrustable Professional Activities (EPAs).

4.1.2. Operative Feedback Form Outcomes

The OFF form will provide global rating and any feedback in the form of comments.

4.2. Clinical Feedback Form (*"CFF"*)

The CFF is designed to provide competency-based feedback in the assessment of a trainee's skill and in conducting a clinical examination of a patient. The trainee selects the clinical scenario to be observed from scenarios found in the P&RS Curriculum, preferably from the table included in the Training Handbook.

The consultant selected to observe the clinical scenario must be a FRACS surgeon who is a trainer in the Plastic Surgery rotation.

The trainee and consultant must agree to undertake the assessment prior to the procedure.

The consultant records the trainee's performance electronically on the Training Management Platform (RACS TMP), and based on the provided scale, and gives feedback following the

procedure on their performance. The assessment can be assigned toward a relevant Entrustable Professional Activity (EPA). During the short post-procedure meeting, the consultant also answers any questions that the trainee may have.

4.2.1. Clinical Feedback Form Frequency

A Surgical Supervisor may initiate this assessment at any time. In addition, trainees who are on probation may be required to complete additional CFF assessments as part of a remedial action plan. The requirement to complete a CFF in either of these situations will be based on the professional judgement of the Surgical Supervisor.

Legacy SET Trainees **must** complete a minimum of one (1) CFF per clinical term.

SET 2022 Trainees should complete CFF assessments regularly in order to build up clinical experience relevant to the Entrustable Professional Activities (EPAs).

4.2.2. Clinical Feedback Form Outcomes

The CFF form will provide global rating and any feedback in the form of comments.

4.3. Case-Based Discussion (*"CBD"*) Form

The Case Based Discussion (CBD) assessment is designed to provide competency-based feedback in the retrospective assessment of a trainee's approach to managing and treating a patient. The trainee selects the clinical scenario to be observed from scenarios found in the P&RS Curriculum, noting that the scenario selected should be appropriate to the trainee's Stage of SET. (*Legacy SET* trainees may prefer to perform procedures from the relevant table of appropriate procedures from the Training Handbook).

The consultant selected to undertake the assessment must be a FRACS surgeon who is a trainer in the Plastic Surgery rotation and has good knowledge of the case being discussed.

The trainee and consultant must agree to undertake the assessment prior to commencing an assessment meeting.

The consultant records the trainee's performance electronically on the Training Management Platform (RACS TMP), and based on the provided scale, and gives feedback in the meeting. The assessment can be assigned toward a relevant Entrustable Professional Activity (EPA).

4.3.1. Case-Based Discussion Frequency

A Surgical Supervisor may initiate this assessment at any time. In addition, trainees who are on probation may be required to complete additional CBD assessments as part of a remedial action plan. The requirement to complete a CBD in either of these situations will be based on the professional judgement of the Surgical Supervisor.

Legacy SET Trainees **must** complete a minimum of one (1) CBD per clinical term.

SET 2022 Trainees should complete CBD assessments regularly in order to build up clinical experience relevant to the Entrustable Professional Activities (EPAs).

4.3.2. Case-Based Discussion Outcomes

The CBD form will provide global rating and feedback in the form of comments.

4.4. Multi Source Feedback (*"MSF"*)

An MSF form is to be used for all trainees who are on probation or undergoing mandatory or voluntary performance management plans.

The MSF is a tool to assess capabilities within the areas of communication, collaboration, professionalism and management. It is not an assessment of clinical knowledge or practical skills.

The MSF is completed by a minimum of six (6) and maximum of twelve (12) people who work with the trainee (including consultants, nurses, and administrative staff). The trainee and the Surgical Supervisor each choose half of the assessors. The Trainee must also complete a self-assessment. Individual assessments are completed electronically on the Training Management Platform (RACS TMP). Following the contribution of ratings from assessors, the Surgical Supervisor may contact individual assessors to inform the final MSF report outcome.

The Surgical Supervisor conducts an assessment electronically on the Training Management Platform (RACS TMP). Based on the aggregated scores from raters / assessors , and feedback received, the Surgical Supervisor delivers the assessment report in the meeting including optional additional comments to indicate areas of excellence and/or areas requiring improvement for that trainee.

All responses are confidential. Individual responses will not be disclosed.

4.4.1. MSF Frequency

The Board or a Surgical Supervisor may initiate this assessment at any time. The requirement to complete a MSF in this situation will be based on the professional judgement of the Surgical Supervisor or the Board, respectively.

In addition, trainees who are on probation are required to complete two MSF assessments, in months 2 and 4 of a training term, as part of a remedial action plan.

Legacy SET trainees and all trainee on probation or performance management plan: An MSF is to be used for trainees who are on probation or undergoing performance management. If MSF is determined as a condition of probation by the Board, the MSF must be completed for review and feedback by the Surgical Supervisor at the interim and final PPA meetings.

SET 2022 trainees: MSF is included as a WBA for some EPAs. Additionally, an MSF is to be used for trainees who are on probation or undergoing performance management. If MSF is determined as a condition of probation by the Board, the MSF must be completed for review and feedback by the Surgical Supervisor at the interim and final PPA meetings.

4.4.2. MSF Outcomes

The MSF report will provide the range of scores submitted and may include feedback in the form of comments.

4.5. Presentation Evaluation Form (*"PEF"*)

The CFF is designed to provide competency-based feedback to the trainee to develop their presentation skills during the training program and for assessing competence in communicating and teaching.

The consultant selected to observe the scenario must be a FRACS surgeon who is a trainer in the Plastic Surgery rotation.

The trainee and consultant must agree to undertake the assessment prior to the presentation.

The consultant records the trainee's performance electronically on the Training Management Platform (RACS TMP), and based on the provided scale, and gives feedback on their performance following the presentation. The assessment can be assigned toward a relevant Entrustable Professional Activity (EPA). During the short post-presentation meeting, the consultant also answers any questions that the trainee may have.

4.5.1. Presentation Evaluation Frequency

A consultant may initiate this assessment at any time. The requirement to complete a PEF will be based on the professional judgement of the Surgical Trainers or Supervisor.

Legacy SET Trainees: Not mandated.

SET 2022 Trainees should complete PEF assessments regularly in order to build up clinical experience relevant to the Entrustable Professional Activities (EPAs).

4.5.2. Presentation Evaluation Outcomes

The PEF form will provide global rating and feedback in the form of comments.

5. LOGBOOK

The logbook is used to record information on surgical procedures undertaken by trainees and to assess trainee competence and to ensure training positions provide adequate training experience for subsequent trainees who occupy the position.

The trainee must provide information/detail on all surgical procedures performed, via the online logbook system, the Morbidity Audit and Logbook Tool (MALT). The procedures are then reviewed and approved by the supervising consultants.

5.1. Logbook Frequency

A procedure must be entered into the online logbook within two weeks of it being completed. All logged procedures for a term must be entered prior to each PPA for that term.

The Board expects most trainees will log in excess of 500 procedures (pro rata) per six calendar month rotation. A minimum of one hundred (100) procedures must be logged per three (3) calendar months. The minimum number of procedures for trainees in Flexible Training would be pro-rata. The minimum number may change based on the nature of the procedures performed at the training site. A change to the minimum number must be approved by the Board or Regional Subcommittee.

5.2. Logbook Outcomes

Submission of the minimum number of procedures for each term is viewed as a satisfactory outcome.

Failing to log the minimum number of procedures reflecting the procedures completed during the term may be taken into consideration when rating the trainee's performance on the PPA. Submission of the minimum or close to the minimum number of procedures for each term is viewed as a borderline performance and potentially requiring significant improvement.

6. ENTRUSTABLE PROFESSIONAL ACTIVITY

Trainees in *SET 2022* are required to complete a number of Entrustable Professional Activities (EPAs) before the completion of each particular stage of training. There are 14 EPA as outlined in the Training Regulation Training Requirements and Progression. They are:

EPA 1 Prioritise and manage an after-hours trauma list
EPA 2 Manage patients with common skin cancer
EPA 3 Manage patients with chronic wounds
EPA 4 Postoperative care of patients on the ward
EPA 5 Negotiate challenging interactions with patients and colleagues
EPA 6 Manage patients with a head and neck malignancies
EPA 7 Manage patients requesting aesthetic surgery
EPA 8 Manage patients requiring breast reconstruction
EPA 9 Manage patients with craniomaxillofacial trauma
EPA 10 Educate self, patient and others
EPA 11 Manage patients with a non-acute hand conditions

EPA 12 Manage patients with complex skin or soft tissue tumours
EPA 13 Manage patients with acute lower limb trauma
EPA 14 Manage paediatric patients with a cleft lip and palate

6.1. Assessment Process

A trainee may request their Surgical Supervisor to evaluate their competence for a particular EPA.

The Surgical Supervisor will form a panel with one other unit member.

The panel will review the validity of the WBAs and recent Professional Performance Assessment before making a recommendation regarding a trainee's EPA competence to the Regional Training Board, which will determine whether the trainee has successfully completed the EPA.

Where a trainee is on probation or a performance management plan, the panel can recommend conditional approval of competence subject to the outcome of the performance management process.

The panel will inform the Board (or Regional Training Subcommittee Chair) of its recommendation.

6.2. Assessment Outcome

A trainee will receive a global rating as per the published rating scale on the EPA assessment form.

A trainee who is determined, in accordance with the global rating scale on the EPA form, to be competent for an EPA will have that EPA recorded as complete.

A trainee who is determined, in accordance with the global rating scale on the EPA form, to not be competent, will be provided with further feedback on how to improve, including additional workplace based assessments, and may present again for an assessment of competence at a time determined by panel.

6.2.1. (*) Non completion of SET requirements

Should a trainee pass the maximum time allowance for a particular stage of SET without completing the minimum EPA requirements for that stage, that trainee will be informed, in accordance with the relevant Training Regulation, that the Board may consider dismissal proceedings. If the Board commences dismissal proceedings, the trainee may be suspended from training during the proceedings.

This process is governed by the RACS Regulation: Dismissal from Surgical Training, available to download from www.surgeons.org.

7. PROFESSIONAL PERFORMANCE ASSESSMENT

7.1. Professional Performance Assessment (*"PPA"*) Report

The Professional Performance Assessment (PPA) is the formative or summative assessment tool used to assess whether the trainee has demonstrated the expected level of skill and

performance to accredit a particular Training Period, pro rata for flexible training.

The views of all consultants on the unit must be sought, where possible, and reflected in the completed PPA form. The Surgical Supervisor may also refer to any of the following assessments that have been completed during the term:

- Operative Feedback Form (OFF)
- Clinical Feedback Form (CFF)
- Case-based Discussion (CBD) Form
- Multi Source feedback (MSF)
- Presentation Evaluation Form (PEF)
- Logbook

Surgical Supervisors and Surgical Trainers must provide examples to substantiate views that could lead to a recommendation about a trainee. Surgical Supervisors and Surgical Trainers must be willing for their views to be discussed with trainees who must be given the opportunity to acknowledge and respond to feedback and to improve performance.

Trainees must be informed at the earliest possible opportunity about performance issues. Overall performance is rated as either "Met", "Borderline" or "Poor". Where a trainee is rated as "Borderline" or "Poor", the supervisor will record reasons for the rating on the PPA. The competencies are:

- Medical Expertise
- Judgement & Clinical Decision Making
- Technical Expertise
- Communication
- Teamwork and Collaboration
- Health Advocacy
- Cultural Competence and Cultural Safety
- Management and Leadership
- Scholarship and Teaching
- Professionalism and Ethics

Cultural competence and cultural safety is currently part of the Health Advocacy competence.

The completed assessment report should be acknowledged and dated by both the trainee and the supervisor, following discussion of the ratings at a Performance Review Meeting. Acknowledging the assessment report confirms that the assessment report has been discussed but does not signify agreement by the trainee with the assessment.

Note: Trainees are required to keep a copy of the assessment report for their personal records and training portfolio.

7.1.1. PPA Frequency

The Surgical Supervisor will complete a PPA every three (3) calendar months. Typically an interim or formative PPA and a final or summative PPA each six-month Training Term.

7.1.2. PPA Outcomes

Each PPA form must contain an overall rating of "Met" or "Borderline" or "Poor" which then determines the PPA outcome.

a. An overall rating of "Met" or "Borderline" results in an overall PPA grade of satisfactory.
b. An overall rating of "Poor" results in an overall PPA grade of unsatisfactory.

"Met" means the trainee is performing at a level commensurate with their stage of training.

"Borderline" means the trainee requires some more focus to improve one RACS Core Competency. The trainee may not necessarily be performing at a level commensurate with their stage of training.

"Poor" means the trainee requires significantly more focus to improve one RACS Core Competency or the trainee requires some more focus to improve multiple RACS Core Competencies.

Where the outcome of a trainee's *interim PPA* is **satisfactory**, the trainee will continue with the training term.

Where the outcome of a trainee's *interim PPA* is **unsatisfactory**, the trainee will be required to follow a Remedial Action Plan for the remainder of the training term.

Where the outcome of a trainee's *final PPA* is **satisfactory**, clinical training time for the training term will be accredited provided that the Board is satisfied that the trainee has achieved **all** training requirements (as published in either Section 2.5 or Section 2.6 of the current Training Handbook) for the term.

Where the outcome of a trainee's *final PPA* is **unsatisfactory**, the training term will be recorded as unsatisfactory and clinical training time for the term will not be credited for that training term. In addition, the trainee will be placed on probation for the following training term and will be required to follow a Remedial Action Plan.

Where there is a persistent ***PPA outcome* of satisfactory with a borderline *rating*** **,** the Board may, at its absolute discretion, place the trainee on a Remedial Action Plan (refer to Section 8).

Please refer to Section 9 of this document onwards for the *Corrective Process for Unsatisfactory Term Assessment.*

Should a trainee be absent for more than six calendar (6) weeks during any term, or pro rata for those in flexible training, the Board may, in its absolute discretion, either
a) record the term as 'Not Assessed' and not count the training term towards total accredited training time;
b) partially credit the clinical training time (where a minimum of three months continuous clinical training with satisfactory PPA grade can be demonstrated).

8. SUPPORT FOR PERSISTENT BORDERLINE PPA RATINGS

8.1. Persistent Satisfactory outcome with Borderline PPA rating

The Board, or the Regional Subcommittee, or their respective Chairs, may determine that additional support is to be provided to the trainee to assist them to achieve the expected standard commensurate with their Stage of Training where either of the following occurs:

8.1.1. A **cumulative** total of three (3) borderline PPA ratings (including formative or summative assessments), in the preceding 24-month period, or

8.1.2. Two consecutive borderline PPA ratings, in the preceding 12-month period.

8.2. Meeting

Within ten (10) working days of notification of a persistent borderline rating as defined in 8.1, the trainee is required to liaise with their supervisor to arrange a suitable time for a meeting to discuss the persistent ratings, which may originate from a preceding rotation. A support person (see definition in Section 3) may accompany a trainee.

At this meeting, the Surgical Supervisor will discuss the expected standard of competence for each competency for which the trainee requires more focus **for improvement**. The trainee is then required to make a draft Remedial Action Plan, with the assistance of the Supervisor, if required, for these competencies, including strategies to achieve the expected standard.

The trainee must submit the draft Remedial Action Plan to the Surgical Supervisor, who shall finalise and/or approve it, and subsequently to ASPS staff within ten (10) working days of the notification of the persistent borderline ratings.

The trainee is also reminded at this meeting that they are required to attend Monthly Performance Review Meetings with their Surgical Supervisor who shall, where required, help the trainee coordinate these meetings.

8.3. Monthly Performance Review Meetings

Within ten (10) working days of notification of the persistent borderline ratings, a meeting schedule will be determined, coordinated by the Trainee with support, if required, from the Surgical Supervisor, for monthly Performance Review Meetings for the remainder of the term.

At each Monthly Performance Review Meeting, the Surgical Supervisor and trainee will discuss the trainee's performance, including the trainee's progress in completing the Remedial Action Plan. The Surgical Supervisor may also choose to use the meeting to review the trainee's logbooks, update the Remedial Action Plan, and/or review the trainee's completion of training requirements to date.

Each meeting will be attended by an ASPS staff member, either in person or by video- or teleconference, for the purpose of taking a document based minute (electronic recordings by any attendees are prohibited). The minutes will be disseminated to all attendees, and may also be forwarded to the Regional Subcommittee Chair or Deputy Chair. A copy of the meeting notes will be saved with the trainee's files in the ASPS office. The Trainee may

be asked if they believe the minutes are an accurate reflection of the meeting. Any changes they suggest can be attached to the minutes. No new information will be considered at this time for inclusion in the minutes.

9. CORRECTIVE PROCESS FOR UNSATISFACTORY PPA

9.1. Unsatisfactory Interim PPA Meeting

The trainee is required to liaise with their supervisor to arrange a suitable time for a meeting to discuss the ratings received on the formative or interim PPA. A support person (see definition in Section 3) may accompany a trainee.

At this meeting, the Surgical Supervisor will discuss the expected standard of competence for each competency for which the trainee requires more focus **for improvement**. The trainee is then required to make a draft Remedial Action Plan, with the assistance of the Supervisor, if required, for these competencies, including strategies to achieve the expected standard.

The trainee must submit the draft Remedial Action Plan to the Surgical Supervisor, who shall finalise and/or approve it, and subsequently to ASPS staff within ten (10) working days of the notification of the outcome of the PPA meeting.

The trainee is also reminded at this meeting that they are required to attend Monthly Performance Review Meetings with their Surgical Supervisor.

9.2. Monthly Performance Review Meetings

Within ten (10) working days of notification of the outcome of the PPA Meeting, a meeting schedule will be determined, coordinated by the Trainee with support, if required, from the Surgical Supervisor, for monthly Performance Review Meetings for the remainder of the term.

At each Monthly Performance Review Meeting, the Surgical Supervisor and trainee will discuss the trainee's performance, including the trainee's progress in completing the Remedial Action Plan. The Surgical Supervisor may also choose to use the meeting to review the trainee's logbooks, update the Remedial Action Plan, and/or review the trainee's completion of training requirements to date.

Each meeting will be attended by an ASPS staff member, either in person or by video- or teleconference, for the purpose of taking a document based minute (electronic recordings are prohibited). The minutes will be disseminated to all attendees, and may also be forwarded to the Regional Subcommittee Chair or Deputy Chair. A copy of the minutes will be saved with the trainee's files in the ASPS office. The Trainee may be asked if they believe the minutes are an accurate reflection of the meeting. Any changes they suggest can be attached to the minutes. No new information will be considered at this time for inclusion in the minutes.

9.3. Unsatisfactory Final PPA Meeting

The trainee is required to liaise with their supervisor to arrange a suitable time for a meeting to discuss the ratings on the summative or final PPA. A support person (see definition in Section 3) may accompany a trainee.

A summative or final PPA grade of satisfactory means the trainee will continue with quarterly assessments and the term remains accredited.

At this meeting, the Surgical Supervisor will discuss the expected standard of competence for each competency for which the trainee has been rated as requiring more focus for improvement. The trainee is then required to formulate a draft Remedial Action Plan, with the assistance of the Supervisor, if required, for discussion with their next Surgical Supervisor. The Surgical Supervisor from the trainee's next term may also attend the meeting.

The meeting will be attended by an ASPS staff member, either in person or by video- or teleconference, for the purpose of taking a document based minute (electronic recordings are prohibited). The minutes will be disseminated to all attendees and may also be forwarded to the Regional Subcommittee Chair or nominee, and the Chair of the Board. A copy of the minutes will be saved with the trainee's files in the ASPS office. The Trainee may be asked if they believe the minutes are an accurate reflection of the meeting. Any changes they suggest can be attached to the minutes. No new information will be considered at this time for inclusion in the documented minutes.

Within ten (10) working days of the Final PPA Meeting, the Board will be notified of the assessment outcome. A formal letter will subsequently be sent to the trainee from the Board Chair notifying them of the Board's decision.

A summative or final PPA grade of unsatisfactory means the trainee may be advised that the clinical training time will be not accredited towards their training, and that their training will be extended for the relevant time to meet the Clinical Training Time requirement (see Section 3).

Further requirements may include, but are not limited to, a return to full-time training for those in Flexible Training at the time of the unsatisfactory assessment.

In accordance with the *Assessment of Clinical Training* Policy, the trainee is informed that they will be placed on probation for the following term (*) including any consequences for an additional unsatisfactory term.

9.3.1. (*) Multiple Unsatisfactory Terms

If this is the trainee's third non-consecutive or second consecutive unsatisfactory term, the trainee will be informed that in accordance with the relevant Training Regulation the Board may consider dismissal proceedings (refer to *Training Regulation: Dismissal from SET*).

If no such decision is made, the trainee remains on probation for the following term.

10. CORRECTIVE PROCESS FOR TRAINEES FOLLOWING UNSATISFACTORY PPA

There are a variety of circumstances that may result in a trainee being placed on probation. These circumstances include but are not limited to:

- An unsatisfactory term;
- Continuation of probation as an alternative to dismissal.

10.1. At Start of Term

A meeting schedule will be determined, coordinated by the Trainee with support, if required, from the Surgical Supervisor, for monthly Performance Review Meetings with the Surgical Supervisor, including dates and locations of each meeting.

The trainee must ensure that their new Surgical Supervisor has a copy of their draft Remedial Action Plan (RAP), for the purpose of adjusting if necessary, and finalising and/or approving the RAP.

10.2. Monthly Performance Review Meetings

At each Monthly Performance Review Meeting, the Surgical Supervisor and trainee will discuss the trainee's performance including the trainee's progress in completing the Remedial Action Plan. The Surgical Supervisor may also choose to use the meeting to review the trainee's logbooks, update the Remedial Action Plan, and/or review the trainee's completion of training requirements to date. A support person (see definition in Section 3) may accompany a trainee.

The meeting will be attended by an ASPS staff member, either in person or remotely, for the purpose of taking meeting notes. The meeting notes will be disseminated to all attendees, and may also be forwarded to the Regional Subcommittee Chair or Deputy Chair, or nominee. A copy of the meeting notes will be saved with the trainee's files in the ASPS office. The Trainee may be asked if they believe the minutes are an accurate reflection of the meeting. Any changes they suggest can be attached to the minutes. No new information will be considered at this time for inclusion in the documented minutes.

10.3. Interim PPA Meeting

The interim PPA Meeting is typically combined with the third Monthly Performance Review Meeting.

The Surgical Supervisor and trainee will meet to discuss the trainee's performance and progress with the Remedial Action Plan and also complete an interim PPA. At this meeting, the results of the trainee's first MSF report may also be discussed. A support person (see definition in Section 3) may accompany a trainee.

The meeting will be attended by an ASPS staff member, either in person or by video- or teleconference, for the purpose of taking a document based minute (electronic recordings are prohibited). The minutes will be disseminated to all attendees, and may also be forwarded to the Regional Subcommittee Chair, Deputy Chair, or nominee. A copy of the minutes will be saved with the trainee's files in the ASPS office. The Trainee may be asked if they believe the minutes are an accurate reflection of the meeting. Any changes they suggest can be attached to the minutes. No new information will be considered at this time for inclusion in the documented minutes.

10.4. Final PPA Meeting

The final PPA Meeting is typically the sixth Monthly Performance Review Meeting.

The Surgical Supervisor and trainee will meet to discuss the rating on the final PPA. At this meeting, the results of the trainee's second MSF report may also be discussed. A support person (see definition in Section 3) may accompany a trainee.

A summative or final PPA grade of satisfactory means the trainee has successfully completed the period of probation and the term will be also be accredited towards their clinical training time.

A summative or final PPA grade of unsatisfactory, means the trainee's term will not be accredited. *Legacy SET* trainee may have their training time extended by six months.

The Surgical Supervisor will discuss the expected standard of competence for each competency for which the trainee requires more focus for improvement. In addition and where relevant, the Surgical Supervisor from the trainee's next term may also attend the meeting.

The meeting will be attended by an ASPS staff member, either in person or by video- or teleconference, for the purpose of taking a document based minute(electronic recordings are prohibited). The minutes will be disseminated to all attendees and may also be forwarded to the Regional Subcommittee Chair or nominee, and the Chair of the Board. A copy of the minutes will be saved with the trainee's files in the ASPS office. The Trainee may be asked if they believe the minutes are an accurate reflection of the meeting. Any changes they suggest can be attached to the minutes. No new information will be considered at this time for inclusion in the documented minutes.

The trainee will be informed that the Board may consider their training status including whether or not to recommend the trainee for dismissal proceedings (refer to *Training Regulation: Dismissal from SET*). If no such recommendation is made, the trainee remains on probation for the following term.

Within ten (10) working days of the Final PPA Meeting, the Board will be notified of the outcome from the meeting. A formal letter will be sent to the trainee from the Board Chair notifying them of the outcome.

11. RECONSIDERATION, REVIEW AND APPEAL

Trainees have options available to them to challenge all decisions regarding their training. Challenges are governed by the RACS Regulation "Reconsideration Review and Appeal", available to download from www.surgeons.org.

12. ASSOCIATED DOCUMENTS

Form: Clinical Feedback
Form: Case Based Discussion
Form: Multi Source Feedback
Form: Operative Feedback
Form: Presentation Evaluation
Form: Professional Performance Assessment Form
RACS Policy: Assessment of Clinical Training (ETA-SET-016)
RACS Position Paper: Natural Justice – Information for Decision Makers (ETA-SET-027)

RACS Regulation: Admission to Fellowship (REG-3008)
RACS Regulation: Dismissal from Surgical Training (ETA-SET-007)
RACS Regulation: SET Misconduct (ETA-SET-026)
RACS Regulation: Reconsideration, Review and Appeal (ETA-SET-061)
Training Regulation: Dismissal from SET
Training Regulation: Trainee Misconduct
Training Regulation: Variation to Training