RANZCP ID:	
Surname:	
First name:	
Training zone:	
Location:	

Please indicate setting clearly with a **X:**	**Acute**	**Non-acute**
	☐	☐

Stage 1: Adult Psychiatry (end-of-rotation) In-Training Assessment (ITA) Form

1. Trainees are required to achieve 2 EPAs each 6-month FTE rotation in order to be eligible to pass the rotation.

2. Therefore, during the course of Stage 1 trainees **must** achieve the two Stage 1 EPAs **and** two Stage 2 EPAs to fulfil this requirement

   Unless they utilise the '**Stage 1, Rotation 1 Exception Rule'** which allows for a trainee to pass the FIRST rotation and ITA before achieving any EPAs. This is to allow for flexibility during a period of adjustment for trainees entering psychiatry training.

3. This rule cannot be applied in any other Stage or rotation, so in rotation **2** trainees **must** attain the minimum of 2 EPAs, regardless of how many were attained in Rotation 1.

4. All Stage 1 trainees are eligible to achieve the Stage 2 General Psychiatry or Psychotherapy EPAs.

5. Please refer to the RANZCP website Regulation page: section **4.9** of the *Stage 1 Mandatory Requirements Policy* for further details (in the Training chapter of the regulations). Pre-Fellowship>2012-Fellowship-Program>Regulations

Privacy Statement: Registrar evaluations are held and used in accordance with the College's Privacy Policy Statement. See www.ranzcp.org/privacypolicy

1. CONTACT INFORMATION

Mobile phone: ……

Email address: ……..

2. APPROVED TRAINING DETAILS

The Director of Training and/or Principal Supervisor should amend as necessary.

Start Date (DD/MM/YYYY) …… End Date (DD/MM/YYYY) ……....

Training at …… FTE Calculated FTE months: ……

Partial Completion of a 6-month rotation: *(skip if full rotation was completed)*

…… FTE months in total were actually completed, due to: ☐ Part-time training ☐ prolonged leave ☐ other

(Please give details)

3. TRAINEE STATEMENT

The following is a true and accurate record: *(check as appropriate)*	**Yes**	**No**
I have completed this training in Adult psychiatry in accordance with RANZCP Fellowship Regulations 2012.	☐	☐
During this rotation there has been a clear line of responsibility to a Consultant.	☐	☐
I have received formative feedback on my training progress mid-way or prior to mid-way through this rotation.	☐	☐
During this rotation I have received at least 4 hours of clinical supervision per week (or proportional time for part-time training) of which at least 2 proportional hours have been closer supervision outside of ward rounds/case review meetings. I have had 1 hour per week of individual supervision.	☐	☐
During this rotation I have observed my supervisor(s) during clinical interactions.	☐	☐
During this rotation my supervisor(s) have observed me during clinical interactions.	☐	☐

4. TRAINEE STATEMENT OF COMPLETED EPAs and WBAs

- It is **mandatory** to complete the Supervisor ID/Name, Date entrusted and WBA columns. Incomplete forms will be returned.
- Date entrusted should be during the rotation.
- Trainees only need to provide details of the EPAs and/or WBAs done in **this** rotation. It is **not** necessary to complete the form for EPAs or WBAs done in a previous Stage 1 rotation/s.
- Trainees should check their training record online by logging onto the College website *'Member Access'* and click '*My Training Reports*' to ensure that the data provided on this form has been accurately and fully reflected on their training records.

Stage 1 EPAs *(It is **not** necessary to provide details of EPAs attained in previous rotations)*	**Entrusting supervisor's RANZCP ID or NAME** *(PRINT)*	**Date entrusted** (DD/MM/YYYY)	**The following WBA tools were used to support the EPA attainment** *(please indicate number of each)*				
			CbD	**Mini-CEX**	**OCA**	**PP**	**DOPS**
Stage 1 EPAs	**Mandatory by the end of Stage 1**						
ST1-GEN-EPA5: Antipsychotic use							
ST1-GEN-EPA6: Providing psychoeducation							
Stage 2 General Psychiatry	**Mandatory EPAs by the end of Stage 2. May be done in either Stage 1 or Stage 2**						
ST2-EXP-EPA1: Electroconvulsive therapy (ECT)							
ST2-EXP-EPA2: Mental Health Act							
ST2-EXP-EPA3: Risk assessment							
ST2-EXP-EPA5: Cultural awareness							
Stage 2 Psychotherapy	**Psychotherapy EPAs. (One may be done in Stage 3)**						
ST2-PSY-EPA2: Therapeutic alliance							
ST2-PSY-EPA3: Supportive psychotherapy							
ST2-PSY-EPA4: CBT: Anxiety management							
Stage 2 EPAs	*(Please list additional EPAs possibly completed)*						

CbD=Case-based discussion; **Mini CEX**=Mini Clinical Evaluation Exercise; **OCA**=Observed Clinical Activity; **PP**=Professional Presentation; **DOPS** = Direct Observation of Procedural Skills

OCA WBA(s) completed in this rotation attached *(number in box).*
*(**All** OCA forms must be submitted.)*

5. SUPERVISOR ASSESSMENT

- Please indicate (by placing a ✔in the relevant box) which statement most appropriately describes the trainee's performance for each Learning Outcome.
- The columns marked with an * should help inform the feedback provided to the trainee (page 6), i.e. the trainee's strengths and weaknesses.

	STAGE 1 LEARNING OUTCOMES Refer to the Learning Outcomes document on the College website to see the Learning Outcomes across stages 1, 2 and 3. For a guide to grading standards, please see the Developmental Descriptors on the College website.	**EXPECTATIONS**					
		Rarely Met *	**Inconsistently Met ***	**Almost Always Met**	**Sometimes Exceeded**	**Consistently Exceeded ***	**Unable to Comment**
1	**Medical Expert**						
1.1	ASSESSMENT: Conducts an organised psychiatric assessment with a focus on: history taking, psychiatric interview skills, risk assessment, phenomenology, MSE with relevant physical and cognitive examination, obtaining collateral history from other sources.						
1.2	DIAGNOSIS: Accurately constructs a differential diagnosis for common presenting problems using a diagnostic system (DSM, ICD).						
1.3	FORMULATION: Identifies and summarises relevant biological, psychological, cultural and social contributors to the patient's illness and recovery.						
1.4	MANAGEMENT: Constructs and implements safe management plans under supervision using recognised biological (ECT and psychopharmacology) and psychosocial approaches, with reference to relevant treatment guidelines.						
1.5	PSYCHIATRIC EMERGENCIES: Undertakes the assessment and initial management of psychiatric emergencies, with due regard for safety and risk, under supervision.						
1.6	LEGISLATION: Describes the principles and practical application of the mental health legislation and informed consent and is able to work appropriately with the relevant mental health legislation.						
1.7	REFLECTION: Identifies the principles of reflection and uses supervision to engage in reflection on clinical activities.						
2	**Communicator**						
2.1	PATIENT COMMUNICATION: Uses effective and empathic verbal and non-verbal communication skills in all clinical encounters with the patient, their families and carers.						
2.2	CONFLICT MANAGEMENT: Recognises challenging communications, including conflict with patients, families and colleagues, and discusses management strategies in supervision to promote positive outcomes.						
2.3	CULTURAL DIVERSITY: Recognises and incorporates the needs of culturally and linguistically diverse populations, including the use of interpreters and culturally appropriate health workers.						

	STAGE 1 LEARNING OUTCOMES Refer to the Learning Outcomes document on the College website to see the Learning Outcomes across stages 1, 2 and 3. For a guide to grading standards, please see the Developmental Descriptors on the College website.	EXPECTATIONS					
		Rarely Met *	Inconsistently Met *	Almost Always Met	Sometimes Exceeded	Consistently Exceeded *	Unable to Comment
2.4	SYNTHESIS: Provides accurate and structured verbal reports regarding clinical encounters using a recognised communication tool.						
2.5	DOCUMENTATION: Demonstrates comprehensive and legible case record documentation including discharge summaries and written liaison with referrers, primary care providers and community organisations (where relevant), under supervision.						
3	**Collaborator**						
3.1	TEAMWORK: Participates constructively as a member of a multidisciplinary mental health team, demonstrating an awareness of the roles and contribution of various members of the MDT.						
3.2	EXTERNAL RELATIONSHIPS: Demonstrates an ability to work collaboratively and respectfully with consumer and carer representatives, other health professionals and other agencies to improve patient outcomes.						
3.3	PATIENT RELATIONSHIPS: Develops therapeutic relationships with patients, carers and relevant others.						
4	**Manager**						
4.1	GOVERNANCE: Describes own scope of practice, responsibilities and line of reporting.						
4.2	ORGANISATIONAL STRUCTURES: Identifies the operational structures of the service and own role within this structure.						
4.3	WORKLOAD & RESOURCE MANAGEMENT: Organises, prioritises and delegates tasks within the clinical setting. Accountable for own time management, availability and punctuality.						
4.4	QI FOCUS: Describes the principles of quality improvement and recognises opportunities for service improvement.						
4.5	REGULATION USAGE: Identifies and applies legislative/regulatory requirements and service policies (e.g. adverse outcomes reporting).						
5	**Health Advocate**						
5.1	ADDRESSING DISPARITY: Describes health inequalities and disparities in relation to clinical setting.						
5.2	ADDRESSING STIGMA: Identifies the impact of cultural beliefs and stigma of mental illness on patients, families and carers.						
5.3	COMMUNITY: Describes the scope and role of local consumer and carer organisations within mental health care.						

	STAGE 1 LEARNING OUTCOMES Refer to the Learning Outcomes document on the College website to see the Learning Outcomes across stages 1, 2 and 3. For a guide to grading standards, please see the Developmental Descriptors on the College website.	EXPECTATIONS					
		Rarely Met *	Inconsistently Met *	Almost Always Met	Sometimes Exceeded	Consistently Exceeded *	Unable to Comment
5.4	PATIENT FOCUS: Advocates for the patient within the MDT, with particular emphasis on ensuring patient safety.						
6	**Scholar**						
6.1	PARTICIPATES IN LEARNING: Actively participates in training program, including supervision, formal education course and academic presentations.						
6.2	RESEARCH: Critically evaluates academic material.						
6.3	FEEDBACK: Identifies and describes the principles of giving and receiving feedback.						
6.4	TEACHING: Describes principles of teaching and learning.						
6.5	PRESENTING: Presents to colleagues, medical students or members of the public, possibly including patients.						
7	**Professional**						
7.1	ETHICS: Adheres to professional and ethical standards of practice, in accordance with the RANZCP Code of Conduct and Code of Ethics, and local regulatory bodies.						
7.2	COMPLIANCE: Identifies and fulfils legislation, regulations and College requirements regarding training, employment and professional registration.						
7.3	SELF-CARE: Identifies strategies to balance personal wellbeing and professional priorities in adapting to trainee responsibilities.						
7.4	INTEGRITY: Aware of pathways and legislation to report unprofessional behaviours or misconduct of colleagues and acts on these as appropriate, using supervision.						
7.5	PROFESSIONAL DEVELOPMENT: Identifies learning goals and anticipated milestones in training, in supervision.						

6. FEEDBACK PROVIDED AT THE END OF ROTATION REVIEW

Supervisor to Trainee

The assessment given in Section 5 may assist you to complete this page.

Trainee's three areas of particular strength:

Three areas identified needing further development

7. PRINCIPAL SUPERVISOR REPORT – FINAL SUMMATIVE ASSESSMENT

With reference to the Developmental Descriptors please circle the final (overall) grade for this rotation.

Choose only one grade in either the Pass or Fail category.

Fail grades		Pass grades		
◯ **Rarely Met** the overall standard required	◯ **Inconsistently Met** the overall standard required	◯ **Almost Always Met** the overall standard required	◯ **Sometimes Exceeded** the overall standard required	◯ **Consistently Exceeded** the overall standard required

In the case of a failing grade: *(check as appropriate)*	**Yes**	**No**
Were these concerns discussed with the trainee earlier, e.g. at the mid-rotation point?	☐	☐
Has a supportive plan been undertaken with the trainee in this rotation prior to this final assessment?	☐	☐
Is there a formal Targeted Learning Plan in place for this trainee? *(As per the policy this will be required within 60 days of a failing grade.)*	☐	☐

8. PRINCIPAL SUPERVISOR DECLARATION

I declare that the above information was provided in good faith and is considered to be a true reflection of the trainee's ability. This training in **Adult Psychiatry** was completed in accordance with the RANZCP Fellowship Regulations 2012.

I acknowledge that this document forms a part of the trainee's RANZCP Training Record and is not an employment document, and that its use must comply with the RANZCP Privacy Policy.

I hereby verify that this assessment has been discussed with the trainee.

Supervisor Name (print) ……

Supervisor RANZCP ID: …….. Signature …….. Date ……..

9. TRAINEE DECLARATION

I have sighted the assessment on this report, have discussed the assessment with my Principal Supervisor and am aware that this assessment will form part of my RANZCP Training Record.

	Yes	**No**
I agree with the information on this form.	☐	☐

Trainee name (print) …….. Signature …….. Date ……

10. DIRECTOR OF TRAINING DECLARATION

I have checked the information provided by both the trainee and supervisor. I hereby verify that the '*Approved Training Details*' provide an accurate record of the trainee's post and training status and that, to the best of my knowledge, the assessment details accurately reflect the assessment by the appropriate supervisor.

I acknowledge that this document forms a part of the trainee's RANZCP Training Record and is not an employment document, and that its use must comply with the RANZCP Privacy Policy.

Director of Training Name (print) ……

Director of Training RANZCP ID: …… Signature ..... Date: ……