



## Progress Report – Palliative Medicine (Adult Medicine)

Trainee details						
Trainee name and MIN <i>Title, preferred name, surname, MIN</i> Dr Lily Arslan , 3339205				Training Phase 1 - Specialty foundation		
Rotations						
Please list the rotation plan(s) for the training period this rotation progress report covers.						
Plan type	Training Setting	Start date	End date	FTE	Rotation type	Rotation supervisors
Accredited	Monash Health-Monash Medical centre, Clayton	8/06/2026	12/09/2026	1.0	Inpatient Unit/Hospice	Dr David McMahon Dr Marissa Nguyen
Trainee leave						
Please enter any leave taken during the rotation (excludes periods of interruption already applied for). Refer to the RACP <a href="#">Education policies</a> for leave types.						
Leave type	Start Date – End Date		Number of workdays			
Medical	24/07/2026-28/07/2026		4			
Choose an item.	Click or tap here to enter text.		Click or tap here to enter text.			
Choose an item.	Click or tap here to enter text.		Click or tap here to enter text.			
<input checked="" type="checkbox"/> I confirm I have not taken any other leave during this training period which is NOT already covered as an Interruption of Training.						
Assessments completed during the rotation						
Learning captures completed 4			Observation captures completed 7			



Learning goals			
Learning goals <i>The curriculum is available on the <a href="#">RACP Online Learning</a> website.</i>	Trainee Assessment <i>Make a self-assessment against each of the learning goals, refer to the learning opportunities outlined in your rotation plans as well as the expected standards for each goal in <a href="#">Appendix 1</a>.</i>	Rotation Supervisor Assessment <i>Assess the trainee against each of the learning goals, refer to the expected standards for each goal in <a href="#">Appendix 1</a>.</i>	
	<b>1. Professional behaviours</b>	5 - Consistently behaves in line with all 10 domains of professional practice	5 - Consistently behaves in line with all 10 domains of professional practice
Entrustable Professional Activities (EPA)	<b>2. Team leadership:</b> Provide leadership within teams of health professionals to provide palliative care for patients	2 - Able to act with direct supervision	2 - Able to act with direct supervision
	<b>3. Supervision and teaching:</b> Supervise and teach professional colleagues	2 - Able to act with direct supervision	2 - Able to act with direct supervision
	<b>4. Quality improvement:</b> Contribute to continuous quality improvement in health care delivery	3 - Able to act with indirect supervision (e.g. supervisor is physically located within the training setting)	3 - Able to act with indirect supervision (e.g. supervisor is physically located within the training setting)
	<b>5. Clinical assessment and management:</b> Clinically assess and manage the palliative care needs of patients across different stages of life-limiting illnesses	2 - Able to act with direct supervision	3 - Able to act with indirect supervision (e.g. supervisor is physically located within the training setting)
	<b>6. Management of transitions in care changes in clinical conditions:</b> Manage transition of patient care between care settings and contexts, including hospital, home, residential aged care setting, and palliative care units	3 - Able to act with indirect supervision (e.g. supervisor is physically located within the training setting)	3 - Able to act with indirect supervision (e.g. supervisor is physically located within the training setting)

Learning goals		
Learning goals <i>The curriculum is available on the <a href="#">RACP Online Learning</a> website.</i>	Trainee Assessment <i>Make a self-assessment against each of the learning goals, refer to the learning opportunities outlined in your rotation plans as well as the expected standards for each goal in <a href="#">Appendix 1</a>.</i>	Rotation Supervisor Assessment <i>Assess the trainee against each of the learning goals, refer to the expected standards for each goal in <a href="#">Appendix 1</a>.</i>
<b>7. Manage acute changes in clinical condition:</b> Manage the care of acute clinical changes in the palliative care setting, including palliative care emergencies	3 - Able to act with indirect supervision (e.g. supervisor is physically located within the training setting)	3 - Able to act with indirect supervision (e.g. supervisor is physically located within the training setting)
<b>8. Communication with patients</b> Communicate with patients across different stages of life-limiting illnesses	3 - Able to act with indirect supervision (e.g. supervisor is physically located within the training setting)	4 - Able to act with supervision at a distance (e.g. supervisor available to assist via phone)
<b>9. Prescribing:</b> Prescribe medications tailored to patients' needs, prognosis, and goals of care	2 - Able to act with direct supervision	2 - Able to act with direct supervision
<b>10. Procedures:</b> Plan, prepare for, perform, and provide aftercare for important practical procedures	2 - Able to act with direct supervision	2 - Able to act with direct supervision
<b>11. Investigations:</b> Select, organise, and interpret investigations	2 - Able to act with direct supervision	2 - Able to act with direct supervision
<b>12. Clinic and community management:</b> Manage the care of community-based patients	2 - Able to act with direct supervision	2 - Able to act with direct supervision
<b>13. End-of-life care:</b> Manage the care of patients in the terminal phase/last days of life	3 - Able to act with indirect supervision (e.g. supervisor is physically located within the training setting)	3 - Able to act with indirect supervision (e.g. supervisor is physically located within the training setting)
<b>14. Pain</b>	2 - Able to act with direct supervision	2 - Able to act with direct supervision

<b>Learning goals</b>			
<b>Learning goals</b> <i>The curriculum is available on the <a href="#">RACP Online Learning</a> website.</i>		<b>Trainee Assessment</b> <i>Make a self-assessment against each of the learning goals, refer to the learning opportunities outlined in your rotation plans as well as the expected standards for each goal in <a href="#">Appendix 1</a>.</i>	<b>Rotation Supervisor Assessment</b> <i>Assess the trainee against each of the learning goals, refer to the expected standards for each goal in <a href="#">Appendix 1</a>.</i>
	<b>15. Managing other symptoms and complications of cancer</b>	2 - Able to act with direct supervision	2 - Able to act with direct supervision
	<b>16. Cancer and its treatment</b>	2 - Able to act with direct supervision	2 - Able to act with direct supervision
Knowledge guides	<b>17. Non-malignant, progressive life-limiting conditions</b>	2 - Know the topics and concepts in this knowledge guide that underpin specialty practice (knows)	3 - Know how to apply the knowledge in this knowledge guide to specialty practice (knows how)
	<b>18. Acute conditions and palliative care emergencies</b>	3 - Know how to apply the knowledge in this knowledge guide to specialty practice (knows how)	2 - Know the topics and concepts in this knowledge guide that underpin specialty practice (knows)
	<b>19. Managing comorbidities in palliative care</b>	2 - Know the topics and concepts in this knowledge guide that underpin specialty practice (knows)	2 - Know the topics and concepts in this knowledge guide that underpin specialty practice (knows)
	<b>20. Comprehensive end-of-life care</b>	3 - Know how to apply the knowledge in this knowledge guide to specialty practice (knows how)	3 - Know how to apply the knowledge in this knowledge guide to specialty practice (knows how)
<b>Trainee comments</b>			
Provide overall comments about your rotation period for your Rotation Supervisor to consider. These comments may also be viewed by your other supervisors and the Progress Review Panel.			
<b>What did you do well during this rotation of training?</b>			
In this rotation I did well in my communication with patients and clinical assessment and management. I grew my skills in managing challenging conversations and in understanding the cultural context of death and dying for different people. I was exposed to a diverse case load and was able to lead a multidisciplinary team meeting and grew my understanding of the balance of patient centre-care and patient needs versus clinical outcomes.			

**What could you do to improve in the future?**

I would like to work on my document management and quality and improvement. Whilst I am meeting expectations I think I could become more efficient and clear in my documentation and expand my quality and improvement management.

- I have had the opportunity to discuss the content of this report with my supervisor(s).
- I understand my obligation to complete the training requirements outlined in the relevant curriculum
- I understand the College may share this information with current and future supervisors. This information may also be shared with other Training Committees if I'm a dual trainee or change training programs.
- I understand my obligation to comply with the relevant College education policies.

**Date completed by trainee**  
**12/09/2026**

**Supervisor review**

Provide your feedback on the trainee's progress throughout the rotation. Your comments will be visible to the trainee, other supervisors, and the Progress Review Panel.

**What did the trainee do well during this rotation of training?**

I agree with Lily's assessment of what she did well in her training. She showed a clear and marked improvement in both her verbal and non-verbal communication and clinical assessment and management. She also exhibited great collaboration with her colleagues across all departments. I am confident in Lily's continued improvement across the next rotation.

**What could they improve on in the future?**

I believe that Lily could focus on the speed and clarity on her documentation. Whilst she has produced documentation, it has taken persistent and repeated requests. At times this documentation has had to be rewritten to meet the standard required. I still think Lily should progress in her training however I think she could benefit from putting her hand up for some quality and improvement training sessions and mentoring from appropriate staff

**Has the trainee demonstrated the ability to plan and manage their learning and complete their learning and assessments in a timely manner?**  
Yes

**Is the trainee on track to meet the RACP's expected performance standard for the phase?**  
Yes

**Progression recommendation**

**This trainee is progressing satisfactorily**

**Comments/Notes**

General comments are optional, however if the progression recommendation is that a trainee is NOT progressing satisfactorily, please provide additional comments to support your recommendation.

Click or tap here to enter text.

- I have had the opportunity to discuss the content of this report with my trainee.
- I have discussed the trainee's progress with other supervisors if required.

**Completed by**

Name: Dr Phillip Rogers  
Email: phil.rogers@health.vic.gov.au

**Date completed**

14/09/2026

**Additional supervisor assessment**

Feedback and a progression recommendation has already been provided by another supervisor for this progress report. If you agree with their assessment of the trainee, please check the box below and provide optional feedback for the trainee and other supervisors to see.

If you would prefer to complete your own assessment, use the [Additional Supervisor - Rotation Progress Report](#).

**Agree with the assessment and recommendation**

**Comments on recommendation** *(optional)*

Click or tap here to enter text.

**Completed by**

Name: Click or tap here to enter text.  
Email: Click or tap here to enter text.

**Date completed**

Click or tap to enter a date.

**Trainee reflection** *(optional)*

Provide any comments or reflections relating to your supervisor's comments or the rotation in general.

**Reflection**

Click or tap here to enter text.

**Date**

— End of report —

		<b>Entry criteria</b>	<b>Progression criteria</b>	<b>Completion criteria</b>	
	<b>Learning goals</b>	<b>Entry into training</b> <i>At entry into training, trainees will:</i>	<b>Specialty foundation</b> <i>By the end of this phase, trainees will:</i>	<b>Specialty consolidation</b> <i>By the end of this phase, trainees will:</i>	<b>Transition to fellowship</b> <i>By the end of training, trainees will:</i>
<b>Be</b>	<b>1. Professional behaviours</b>	<b>Level 5</b> consistently behaves in line with all ten domains of professional practice	<b>Level 5</b> consistently behaves in line with all ten domains of professional practice	<b>Level 5</b> consistently behaves in line with all ten domains of professional practice	<b>Level 5</b> consistently behaves in line with all ten domains of professional practice
	<b>2. Team leadership:</b> Provide leadership within teams of health professionals to provide palliative care for patients	<b>Level 1</b> be able to be present and observe	<b>Level 2</b> be able to act with direct supervision	<b>Level 4</b> be able to act with supervision at a distance	<b>Level 5</b> be able to supervise others
<b>Do</b>	<b>3. Supervision and teaching:</b> Supervise and teach professional colleagues	<b>Level 1</b> be able to be present and observe	<b>Level 2</b> be able to act with direct supervision	<b>Level 4</b> be able to act with supervision at a distance	<b>Level 5</b> be able to supervise others
	<b>4. Quality improvement:</b> Contribute to continuous quality improvement in health care delivery	<b>Level 2</b> be able to act with direct supervision	<b>Level 3</b> be able to act with indirect supervision	<b>Level 4</b> be able to act with supervision at a distance	<b>Level 5</b> be able to supervise others
	<b>5. Clinical assessment and management:</b> Clinically assess and manage the palliative care needs of patients across different stages of life-limiting illnesses	<b>Level 1</b> be able to be present and observe	<b>Level 2</b> be able to act with direct supervision	<b>Level 3</b> be able to act with indirect supervision	<b>Level 5</b> be able to supervise others
	<b>6. Management of transitions in care settings:</b> Manage the transition of patient care between care settings and contexts, including hospital, home, residential aged care setting, and palliative care units	<b>Level 2</b> be able to act with direct supervision	<b>Level 3</b> be able to act with indirect supervision	<b>Level 4</b> be able to act with supervision at a distance	<b>Level 5</b> be able to supervise others
	<b>7. Manage acute changes in clinical condition:</b> Manage the care of acute clinical changes in the palliative care setting, including palliative care emergencies	<b>Level 2</b> be able to act with direct supervision	<b>Level 3</b> be able to act with indirect supervision	<b>Level 4</b> be able to act with supervision at a distance	<b>Level 5</b> be able to supervise others

	<b>8. Communication with patients:</b> Communicate with patients across different stages of life-limiting illnesses	<b>Level 2</b> be able to act with direct supervision	<b>Level 3</b> be able to act with indirect supervision	<b>Level 4</b> be able to act with supervision at a distance	<b>Level 5</b> be able to supervise others
	<b>9. Prescribing:</b> Prescribe medications tailored to patients' needs, prognosis, and goals of care	<b>Level 1</b> be able to be present and observe	<b>Level 2</b> be able to act with direct supervision	<b>Level 4</b> be able to act with supervision at a distance	<b>Level 5</b> be able to supervise others
	<b>10. Procedures:</b> Plan, prepare for, perform, and provide aftercare for important practical procedures	<b>Level 1</b> be able to be present and observe	<b>Level 2</b> be able to act with direct supervision	<b>Level 3</b> be able to act with indirect supervision	<b>Level 4</b> be able to act with supervision at a distance
	<b>11. Investigations:</b> Select, organise, and interpret investigations	<b>Level 1</b> be able to be present and observe	<b>Level 2</b> be able to act with direct supervision	<b>Level 4</b> be able to act with supervision at a distance	<b>Level 5</b> be able to supervise others
	<b>12. Clinic and community management:</b> Manage the care of community-based patients	<b>Level 1</b> be able to be present and observe	<b>Level 2</b> be able to act with direct supervision	<b>Level 3</b> be able to act with indirect supervision	<b>Level 5</b> be able to supervise others
	<b>13. End-of-life care:</b> Manage the care of patients in the terminal phase / last days of life	<b>Level 2</b> be able to act with direct supervision	<b>Level 3</b> be able to act with indirect supervision	<b>Level 4</b> be able to act with supervision at a distance	<b>Level 5</b> be able to supervise others
Know	<b>14. Pain</b>	<b>Level 1</b> have heard of some of the topics in this knowledge guide	<b>Level 2</b> know the topics and concepts in this knowledge guide	<b>Level 4</b> frequently show they apply this knowledge to practice	<b>Level 5</b> consistently demonstrate application of this knowledge to practice
	<b>15. Managing other symptoms and complications of cancer</b>	<b>Level 1</b> have heard of some of the topics in this knowledge guide	<b>Level 2</b> know the topics and concepts in this knowledge guide	<b>Level 4</b> frequently show they apply this knowledge to practice	<b>Level 5</b> consistently demonstrate application of this knowledge to practice
	<b>16. Cancer and its treatment</b>	<b>Level 1</b> have heard of some of the topics in this knowledge guide	<b>Level 2</b> know the topics and concepts in this knowledge guide	<b>Level 4</b> frequently show they apply this knowledge to practice	<b>Level 5</b> consistently demonstrate application of this knowledge to practice

	<b>17. Non-malignant, progressive life-limiting conditions</b>	<b>Level 1</b> have heard of some of the topics in this knowledge guide	<b>Level 2</b> Know the topics and concepts in this knowledge guide	<b>Level 4</b> frequently show they apply this knowledge to practice	<b>Level 5</b> consistently demonstrate application of this knowledge to practice
	<b>18. Acute conditions and palliative care emergencies</b>	<b>Level 2</b> know the topics and concepts in this knowledge guide	<b>Level 3</b> know how to apply this knowledge to practice	<b>Level 4</b> frequently show they apply this knowledge to practice	<b>Level 5</b> consistently demonstrate application of this knowledge to practice
	<b>19. Managing comorbidities in palliative care</b>	<b>Level 1</b> have heard of some of the topics in this knowledge guide	<b>Level 2</b> know the topics and concepts in this knowledge guide	<b>Level 4</b> frequently show they apply this knowledge to practice	<b>Level 5</b> consistently demonstrate application of this knowledge to practice
	<b>20. Comprehensive end-of-life care</b>	<b>Level 2</b> know the topics and concepts in this knowledge guide	<b>Level 3</b> know how to apply this knowledge to practice	<b>Level 4</b> frequently show they apply this knowledge to practice	<b>Level 5</b> consistently demonstrate application of this knowledge to practice