



Progress Report – General and Acute Care Medicine

Dr Stone, 9999117 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	ABCD Hospital	3/02/2025	31/07/2025	1.0	Click or tap here to enter text.	Dr Gold Dr Patel
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Lea	rning goals			
The	rning goals curriculum is available on the P Online Learning website.	Trainee Assessment 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 Appendix 1.	Rotation Supervisor Assessment Assess the trainee against each of the learning goals, refer to the expected standards for each goal in Appendix 1.	
	1. Professional behaviours	5 - Consistently behaves in line with all 10 domains of professional practice	5 - Consistently behaves in line with all 10 domains of professional practice	
	2. Team leadership: Lead a team of health professionals	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)	
	3. Supervision and teaching: Supervise and teach professional colleagues	4 - Able to act with supervision at a distance (e.g. supervisor available to assist via phone)	4 - Able to act with supervision at a distance (e.g. supervisor available to assist via phone)	
	4. Quality and service improvement: Identify and address improvement opportunities in health care quality, efficiency, and effectiveness	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)	
es (EPA)	5. Clinical assessment and management: Clinically assess and manage the ongoing care of patients	4 - Able to act with supervision at a distance (e.g. supervisor available to assist via phone)	4 - Able to act with supervision at a distance (e.g. supervisor available to assist via phone)	
Entrustable Professional Activities (EP	6. Management of transitions in care: Manage the transition of patient care between health care professionals, providers, and contexts	4 - Able to act with supervision at a distance (e.g. supervisor available to assist via phone)	4 - Able to act with supervision at a distance (e.g. supervisor available to assist via phone)	
	7. Acute care: Manage those who are acutely unwell and stabilise haemodynamic compromise	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)	



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	8. Longitudinal care: Manage and coordinate the longitudinal care of patients with chronic illness, disability and/or long-term health issues	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)			
	9. Shared decision making with parents and carers: Formulate an agreed management plan with patients that fits with their medical context, goals, and values	4 - Able to act with supervision at a distance (e.g. supervisor available to assist via phone)	4 - Able to act with supervision at a distance (e.g. supervisor available to assist via phone)			
	10. Prescribing: Prescribe therapies tailored to patients' needs and conditions	4 - Able to act with supervision at a distance (e.g. supervisor available to assist via phone)	4 - Able to act with supervision at a distance (e.g. supervisor available to assist via phone)			
	11. Procedures: Plan, prepare for, perform, and provide aftercare for important practical procedures	4 - Able to act with supervision at a distance (e.g. supervisor available to assist via phone)	4 - Able to act with supervision at a distance (e.g. supervisor available to assist via phone)			
	12. Diagnostic decision making: Select, organise, and interpret investigations	4 - Able to act with supervision at a distance (e.g. supervisor available to assist via phone)	4 - Able to act with supervision at a distance (e.g. supervisor available to assist via phone)			
	13. Ambulatory care: Provide outpatient care across diverse settings	4 - Able to act with supervision at a distance (e.g. supervisor available to assist via phone)	4 - Able to act with supervision at a distance (e.g. supervisor available to assist via phone)			
	14. End-of-life care: Manage the care of patients at the end of their lives	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)			
	15. General medicine presentations and conditions	4 - Able to act with supervision at a distance (e.g. supervisor available to assist via phone)	4 - Able to act with supervision at a distance (e.g. supervisor available to assist via phone)			



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	16. Acute care presentations and conditions	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)		
	17. Obstetric medicine	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)		
Ş	18. Perioperative medicine	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)		
Knowledge guides	19. Health equity	4 - Frequently show I can apply knowledge in this knowledge guide to specialty practice (shows how)	4 - Frequently show I can apply knowledge in this knowledge guide to specialty practice (shows how)		

Trainee comments

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.

What did you do well during this rotation of training?

This rotation expanded my clinical exposure to acutely unwell and complex inpatients, and I improved my procedural skills (arterial and central lines). I worked closely with pharmacists on medication reconciliation and led a small QI audit on discharge summary timeliness. Teaching RMOs was rewarding and I received positive feedback

What could you do to improve in the future?

I will focus on:

- documenting medication changes (especially deprescribing rationale) more explicitly in progress notes and discharge summaries;
- developing clearer delegation skills and chairing of the MDT in high-workload situations;
- strengthening data analysis and presentation skills for QI projects; and



- targeted reading in perioperative and obstetric medicine.
- 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

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?

Dr Stone has made good progress across clinical assessments, prescribing, and supervision of junior clinicians. Her medication reviews have improved patient safety, and she demonstrates professional behaviour consistently. She has shown initiative in QI work and education.

What could they improve on in the future?

- Improve clarity and completeness of clinical documentation (especially deprescribing rationale and follow-up plans).
- Further develop leadership skills for high-acuity on-take days (explicit delegation, time prioritisation).
- Strengthen data analysis skills for QI projects and present results more robustly.

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.



Overall a solid performance with clear, achievable development goals that will support progression to more independent practice. Recommend scheduled review of QI project outcomes and documentation audit at next supervision meeting.

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 Gold

Email: dr.gold@abcdhospital.org.au

Date completed

12/07/2025

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:

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

I appreciate the constructive feedback and will prioritise improved documentation, leadership development and QI methodology. I will present the QI re-audit in the next departmental meeting

Date

17/07/25

- End of report -



		Entry criteria		ession teria	Completion criteria
	Learning goals	Entry into training At entry into	Specialty foundation By the end of	Specialty consolidation By the end of	Transition to Fellowship By the end of
		training, trainees will:	this phase, trainees will:	this phase, trainees will:	training, trainees will:
Be	Professional behaviours	Level 5 consistently behave in line with all 10 domains of professional practice	Level 5 consistently behave in line with all 10 domains of professional practice	Level 5 consistently behave in line with all 10 domains of professional practice	Level 5 consistently behave in line with all 10 domains of professional practice
Do	2. Team leadership: Lead a team of health professionals	Level 2 is able to act with direct supervision	Level 3 is able to act with indirect supervision	Level 4 is able to act with supervision at a distance	Level 5 be able to supervise others
	Supervision and teaching: Supervise and teach professional colleagues	Level 2 is able to act with direct supervision	Level 3 is able to act with indirect supervision	Level 4 is able to act with supervision at a distance	Level 5 be able to supervise others
	4. Quality and service improvement: Identify and address improvement opportunities in health care quality, efficiency, and effectiveness	Level 1 is able to present and observe	Level 2 is able to act with direct supervision	Level 3 is able to act with indirect supervision	Level 5 be able to supervise others
	5. Clinical assessment and management: Clinically assess and manage the ongoing care of patients	Level 2 is able to act with direct supervision	Level 3 is able to act with indirect supervision	Level 4 is able to act with supervision at a distance	Level 5 be able to supervise others
	6. Management of transitions in care: Manage the transition of patient care between health care professionals, providers, and contexts	Level 2 is able to act with direct supervision	Level 3 is able to act with indirect supervision	Level 4 is able to act with supervision at a distance	Level 5 be able to supervise others
	7. Acute care: Manage those who are acutely unwell and stabilise haemodynamic compromise	Level 2 is able to act with direct supervision	Level 3 is able to act with indirect supervision	Level 4 is able to act with supervision at a distance	Level 5 be able to supervise others
	8. Longitudinal care: Manage and coordinate the longitudinal care of patients with chronic illness, disability, and/or long-term health issues	Level 2 is able to act with direct supervision	Level 3 is able to act with indirect supervision	Level 4 is able to act with supervision at a distance	Level 5 be able to supervise others
	9. Shared decision making with patients and carers: Formulate an agreed management plan with patients that fits with their medical context, goals, and values	Level 2 is able to act with direct supervision	Level 3 is able to act with indirect supervision	Level 4 is able to act with supervision at a distance	Level 5 be able to supervise others
	10. Prescribing: Prescribe and deprescribe therapies tailored to patients' needs and conditions	Level 2 is able to act with direct supervision	Level 3 is able to act with indirect supervision	Level 4 is able to act with supervision at a distance	Level 5 be able to supervise others



		Entry criteria	Progression criteria		Completion criteria
	Learning goals	Entry into training	Specialty foundation	Specialty consolidation	Transition to Fellowship
	Learning goals	At entry into training, trainees will:	By the end of this phase, trainees will:	By the end of this phase, trainees will:	By the end of training, trainees will:
	11. Procedures: Plan, prepare for, perform, and provide aftercare for important practical procedures	Level 2 is able to act with direct supervision	Level 3 is able to act with indirect supervision	Level 4 is able to act with supervision at a distance	Level 5 be able to supervise others
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	15. General medicine presentations and conditions	Level 2 knows the topics and concepts in this knowledge guide	Level 3 knows how to apply this knowledge to practice	Level 4 frequently shows they apply this knowledge to practice	Level 5 consistently demonstrates application of this knowledge to practice
	16. Acute care presentations and conditions	Level 2 knows the topics and concepts in this knowledge guide	Level 3 knows how to apply this knowledge to practice	Level 4 frequently shows they apply this knowledge to practice	Level 5 consistently demonstrates application of this knowledge to practice
	17. Obstetric medicine	Level 1 has heard of some of the topics in this knowledge guide	Level 1 has heard of some of the topics in this knowledge guide	Level 2 knows the topics and concepts in this knowledge guide	Level 3 knows how to apply this knowledge to practice
	18. Perioperative medicine	Level 1 has heard of some of the topics in this knowledge guide	knows the topics and concepts in this knowledge guide	Level 3 knows how to apply this knowledge to practice	Level 4 frequently shows they apply this knowledge to practice
	19. Health equity	Level 2 knows the topics and concepts in this knowledge guide	Level 3 knows how to apply this knowledge to practice	Level 4 frequently shows they apply this knowledge to practice	Level 5 consistently demonstrates application of this knowledge to practice

