



Progress Report – Neurology AM

Trainee details						
Trainee name and MIN <i>Title, preferred name, surname, MIN</i>				Training Phase		
Dr Ronnie Lee, 542513				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	Neurology Unit – Tertiary hospital	3/03/2026	3/10/2026	1.0	Inpatient & Outpatient Neurology	Dr Ray Butani
Choose an item.	Click or tap here to enter text.	Select date	Select date	FTE	Click or tap here to enter text.	Click or tap here to enter text.
Trainee leave						
Please enter any leave taken during the rotation (excludes periods of interruption already applied for). Refer to the RACP Education policies for leave types.						
Leave type	Start Date – End Date		Number of workdays			
Standard	14/08/2026 – 18/08/2026		5 days			
Standard	20/09/2026 – 22/09/2026		3 days			
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			Observation captures completed			
3			8			



Learning goals			
Learning goals		Trainee Assessment	Rotation Supervisor Assessment
The curriculum is available on the RACP Online Learning website .		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.	Assess the trainee against each of the learning goals, refer to the expected standards for each goal in Appendix 1.
Entrustable Professional Activities (EPA)	1. Professional behaviours	5 - I consistently behave in line with each of the ten domains of professional practice	5 - The trainee consistently behaves in line with each of the ten domains of professional practice
	2. Team leadership: Lead a team of health professionals	3 - I am able to act with indirect supervision (i.e., ready access to a supervisor)	3 - The trainee is able to act with indirect supervision (i.e., ready access to a supervisor)
	3. Supervision and teaching: Supervise and teach professional colleagues	3 - I am able to act with indirect supervision (i.e., ready access to a supervisor)	3 - The trainee is able to act with indirect supervision (i.e., ready access to a supervisor)
	4. Quality improvement: Identify and address failures in health care delivery	3 - I am able to act with indirect supervision (i.e., ready access to a supervisor)	4 - The trainee is able to act with supervision at a distance (i.e., limited access to a supervisor)
	5. Clinical assessment and management: Clinically assess and manage the ongoing care of patients	3 - I am able to act with indirect supervision (i.e., ready access to a supervisor)	4 - The trainee is able to act with supervision at a distance (i.e., limited access to a supervisor)
	6. Management of transitions in care: Manage the transition of patient care between health care professionals, providers, and contexts	4 - I am able to act with supervision at a distance (i.e., limited access to a supervisor)	4 - The trainee is able to act with supervision at a distance (i.e., limited access to a supervisor)

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7. Acute care: Manage the early care of acutely unwell patients	4 - I am able to act with supervision at a distance (i.e., limited access to a supervisor)	4 - The trainee is able to act with supervision at a distance (i.e., limited access to a supervisor)
8. Longitudinal care: Manage and coordinate the longitudinal care of patients with chronic illness, disability and/or long-term health issues	3 - I am able to act with indirect supervision (i.e., ready access to a supervisor)	4 - The trainee is able to act with supervision at a distance (i.e., limited access to a supervisor)
9. Communication with patients: Discuss diagnoses and management plans with patients	3 - I am able to act with indirect supervision (i.e., ready access to a supervisor)	4 - The trainee is able to act with supervision at a distance (i.e., limited access to a supervisor)
10. Prescribing: Prescribe therapies tailored to patients' needs and conditions	3 - I am able to act with indirect supervision (i.e., ready access to a supervisor)	4 - The trainee is able to act with supervision at a distance (i.e., limited access to a supervisor)
11. Procedures: Plan, prepare for, perform, and provide aftercare for important practical procedures	4 - I am able to act with supervision at a distance (i.e., limited access to a supervisor)	4 - The trainee is able to act with supervision at a distance (i.e., limited access to a supervisor)
12. Investigations: Select, organise, and interpret investigations	3 - I am able to act with indirect supervision (i.e., ready access to a supervisor)	3 - The trainee is able to act with indirect supervision (i.e., ready access to a supervisor)
13. Clinic management: Manage an outpatient clinic	4 - I am able to act with supervision at a distance (i.e., limited access to a supervisor)	4 - The trainee is able to act with supervision at a distance (i.e., limited access to a supervisor)

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	14. End-of-life care: Manage the care of patients at the end of their lives	3 - I am able to act with indirect supervision (i.e., ready access to a supervisor)	3 - The trainee is able to act with indirect supervision (i.e., ready access to a supervisor)
Knowledge guides	15. Scientific foundations of neurology	4 - I frequently show how I apply this knowledge to practice	4 - The trainee frequently shows they apply this knowledge to practice
	16. Pain, including headache and facial pain	4 - I frequently show how I apply this knowledge to practice	4 - The trainee frequently shows they apply this knowledge to practice
	17. Disorders of consciousness and sleep	4 - I frequently show how I apply this knowledge to practice	4 - The trainee frequently shows they apply this knowledge to practice
	18. Disorders of memory, including dementia	3 - I know how to apply this knowledge to practice	3 - The trainee knows how to apply this knowledge to practice
	19. Paroxysmal disorders, including seizures, syncope and stroke	4 - I frequently show how I apply this knowledge to practice	3 - The trainee knows how to apply this knowledge to practice
	20. Disorders of vision and other senses	3 - I know how to apply this knowledge to practice	3 - The trainee knows how to apply this knowledge to practice
	21. Weakness and sensory change – central and peripheral disorders	3 - I know how to apply this knowledge to practice	3 - The trainee knows how to apply this knowledge to practice
	22. Disorders of gait and balance, including disequilibrium, dizziness, and vertigo	3 - I know how to apply this knowledge to practice	3 - The trainee knows how to apply this knowledge to practice

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<i>The curriculum is available on the RACP Online Learning website.</i>	<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 Appendix 1.</i>	<i>Assess the trainee against each of the learning goals, refer to the expected standards for each goal in Appendix 1.</i>
23. Movement disorders	3 - I know how to apply this knowledge to practice	3 - The trainee knows how to apply this knowledge to practice

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?

During this rotation, I gained extensive experience in managing acute neurological presentations, including stroke, seizures, and demyelinating disorders. I performed comprehensive neurological assessments, interpreted neuroimaging and EEG findings, and contributed to multidisciplinary care planning. I actively participated in outpatient clinics for movement disorders and headache management, improving my diagnostic accuracy with emerging therapies for multiple sclerosis and strengthening my ability to critically appraise evidence and communicate complex concepts clearly.

What could you do to improve in the future?

I aim to improve my ability to lead multidisciplinary meetings and take a more practical role in supervising junior trainees. I also plan to refine my skills in longitudinal care for chronic neurological conditions, including integrating rehabilitation and community support services. Additionally, I will work on developing structured approaches for end-of-life discussion and advanced care planning in neurodegenerative diseases.

- 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
28/10/2026

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?

Ronnie demonstrated strong clinical reasoning and diagnostic skills in both acute and chronic neurological conditions. She independently managed stroke cases under indirect supervision and provided evidence-based recommendations during ward rounds. Her communication with patients and families was empathetic and clear, particularly in complex discussions about prognosis. She actively engaged in teaching sessions and departmental presentations, showing initiative and leadership potential.

What could they improve on in the future?

Ronnie should focus on developing structured care plans for patients transitioning from hospital to community settings, including rehabilitation and follow-up arrangements. She should also aim to take a more proactive role in quality improvement projects, such as audit of seizures management protocols, and improving documentation of complex care plans in electronic medical records will further enhance her practice.

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.

- 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 Ray Butani
Email: RB4512@rpahospital.org.au

Date completed

31/10/2026

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](#).

<input checked="" type="checkbox"/> Agree with the assessment and recommendation	
Comments on recommendation <i>(optional)</i> <p>I agree with the primary supervisor's assessment. The trainee demonstrated steady progression across both clinical and professional domains appropriate for the Specialty Foundation Phase, and is well prepared for more independent responsibilities in the next phase of training.</p>	
Completed by Name: Dr Cillian Taylor Email: CT4546@rpahospital.org.au	Date completed 31/10/2026
Trainee reflection <i>(optional)</i> Provide any comments or reflections relating to your supervisor's comments or the rotation in general.	
Reflection <p>I found my supervisor's feedback very constructive and aligned with my own self-assessment. I am pleased that my clinical reasoning and communication skills were highlighted as strengths, particularly in managing acute neurological cases and engaging with multidisciplinary teams. I agree that developing structured approaches for discharge planning and taking a more proactive role in teaching junior colleagues will be important for my growth. I plan to incorporate these suggestions into my learning goals for the next rotation and seek opportunities to lead case discussions and quality improvement projects. Overall, this rotation has been an excellent learning experience and I feel confident about progressing to more independent practice in the next phase.</p>	Date 30/10/2026

— End of report —

		Entry criteria	Progression criteria		Completion criteria
	Learning goals	Entry into training <i>At entry into training, trainees will:</i>	Specialty foundation <i>By the end of this phase, trainees will:</i>	Specialty consolidation <i>By the end of this phase, trainees will:</i>	Transition to Fellowship <i>By the end of training, trainees will:</i>
Be	1. Professional behaviours	Level 5 consistently behaves in line with all 10 domains of professional practice	Level 5 consistently behaves in line with all 10 domains of professional practice	Level 5 consistently behaves in line with all 10 domains of professional practice	Level 5 consistently behaves in line with all 10 domains of professional practice
	2. Team leadership: Lead a team of health professionals	Level 2 be able to act with direct supervision	Level 3 be able to act with indirect supervision	Level 4 be able to act with supervision at a distance	Level 5 be able to supervise others
Do	3. Supervision and teaching: Supervise and teach professional colleagues	Level 2 be able to act with direct supervision	Level 3 be able to act with indirect supervision	Level 4 be able to act with supervision at a distance	Level 5 be able to supervise others
	4. Quality improvement: Identify and address failures in health care delivery	Level 2 be able to act with direct supervision	Level 3 be able to act with indirect supervision	Level 4 be able to act with supervision at a distance	Level 5 be able to supervise others
	5. Clinical assessment and management: Clinically assess and manage the ongoing care of patients	Level 2 be able to act with direct supervision	Level 3 be able to act with indirect supervision	Level 4 be 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 be able to act with direct supervision	Level 3 be able to act with indirect supervision	Level 4 be able to act with supervision at a distance	Level 5 be able to supervise others
	7. Acute care: Manage the early care of acutely unwell patients	Level 2 be able to act with direct supervision	Level 3 be able to act with indirect supervision	Level 4 be 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 be able to act with direct supervision	Level 3 be able to act with indirect supervision	Level 4 be able to act with supervision at a distance	Level 5 be able to supervise others
	9. Communication with patients: Discuss diagnoses and management plans with patients	Level 2 be able to act with direct supervision	Level 3 be able to act with indirect supervision	Level 4 be able to act with supervision at a distance	Level 5 be able to supervise others
	10. Prescribing: Prescribe therapies tailored to patients' needs and conditions	Level 2 be able to act with direct supervision	Level 3 be able to act with indirect supervision	Level 4 be able to act with supervision at a distance	Level 5 be able to supervise others
	11. Procedures: Plan, prepare for, perform, and provide aftercare for important practical procedures	Level 1 be able to be present and observe	Level 3 be able to act with indirect supervision	Level 4 be able to act with supervision at a distance	Level 5 be able to supervise others

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	14. End-of-life care: Manage the care of patients at the end of their lives	Level 2 be able to act with direct supervision	Level 3 be able to act with indirect supervision	Level 4 be able to act with supervision at a distance	Level 5 be able to supervise others
Know	15. Scientific foundations of neurology	Level 1 have heard of some of the topics in this knowledge guide	Level 3 know how to apply this knowledge to practice	Level 4 frequently show they apply this knowledge to practice	Level 5 consistently demonstrate application of this knowledge to practice
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