



Progress Report – Child Population Health (Specialty foundation)

| Trainee details | | | | | | |
|--|----------------------------------|-------------|---------------------------------------|--------------------------|----------------------------------|----------------------------------|
| Trainee name and MIN <i>Title, preferred name, surname, MIN</i> | | | | Training Phase | | |
| Dr Ruby Forrester, 541245 | | | | 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 | Community Child Health Service | 3/03/2025 | 3/05/2025 | 1.0 | | Dr Clara Mandrake |
| 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 | | | |
| Medical | 14/4/25 – 16/4/25 | | 3 | | | |
| Standard | 6/3/25 | | 1 | | | |
| 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 | | | 3 | | | |



Learning goals

Learning goals

The curriculum is available on the [RACP 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](#).

Entrustable Professional Activities (EPA)

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)

3 - Able to act with indirect supervision (e.g. supervisor is physically located within the training setting)

3. Supervision and teaching:

Supervise and teach professional colleagues

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)

4. Quality improvement:

Identify and address failures in health care delivery

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)

5. Assessment and management – child maltreatment:

Develop competence in the identification and clinical management of situations of potential or suspected child harm / maltreatment

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)

6. Assessment and management – developmental and behavioural:

Provide comprehensive assessment and management of children who have been referred because of development and behavioural problems

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)



Learning goals

Learning goals

The curriculum is available on the [RACP 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](#).

7. Assessment and management – child population health:

Assessment and management of patients through a child population health lens

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)

8. 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)

9. 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)

4 - Able to act with supervision at a distance (e.g. supervisor available to assist via phone)

10. Communication in-child-centred care:

Communicate effectively and professionally with patients, carers, families, health professionals and other community members engaging with the health service

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. Developmental and behavioural paediatrics

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. Child safety and maltreatment

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)

13. Social paediatrics

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)

Knowledge guides



Learning goals

Learning goals

The curriculum is available on the [RACP 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](#).

14. Child population health

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 allowed me to strengthen my ability to assess population-level health needs and translate data into actionable interventions. I successfully contributed to an analysis of local immunisation coverage data, identified gaps and barriers, and participated in the development of culturally safe recommendations for improved uptake. I communicated effectively with multidisciplinary teams and demonstrated leadership in coordinating input from community stakeholders. These experiences have improved my confidence in applying epidemiological principles and developing child population health programs.

What could you do to improve in the future?

I aim to improve my experience in the design of community-based programmes through incorporating measurable outcomes and feasible timelines into future proposals. Incorporating cost-effectiveness considerations into intervention plans is another area for growth. I also plan to engage indigenous health experts and community representatives earlier in the planning process to ensure cultural safety and stakeholder buy-in. Additionally, I would like to take on more community leadership roles and teaching opportunities to further develop my professional skills.

| | |
|-------------------------------------|--|
| <input checked="" type="checkbox"/> | I have had the opportunity to discuss the content of this report with my supervisor(s). |
| <input checked="" type="checkbox"/> | I understand my obligation to complete the training requirements outlined in the relevant curriculum |
| <input checked="" type="checkbox"/> | 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. |
| <input checked="" type="checkbox"/> | I understand my obligation to comply with the relevant College education policies. |

| | |
|--|---|
| Date completed by trainee 5/5/25 | |
| 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? The trainee demonstrated emerging analytical skills and cultural awareness in assessing immunisation coverage and developing targeted interventions with the support of the wider team. They communicated clearly and professionally with both clinical teams and community stakeholders, and their recommendations reflected a sound understanding of equity principles. The trainee contributed meaningfully to planning discussions and showed growing confidence in leadership roles. | |
| What could they improve on in the future? The trainee should continue to gain experience in developing community programmes with a population health focus. Specific suggestions are to incorporate measurable outcomes and timelines into intervention plans and proactively involve indigenous health workers during planning stages. Including cost-effectiveness analysis will further strengthen their experience in population health. | |
| 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. | |
| <input checked="" type="checkbox"/> I have had the opportunity to discuss the content of this report with my trainee. <input checked="" type="checkbox"/> I have discussed the trainee's progress with other supervisors if required. | |
| Completed by Name: Dr Clara Mandrake Email: drclaramandrake1014@nswhealth.gov.au | Date completed 10/05/2025 |

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)*

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.

Completed by

Name: Dr Angela Werner

Email:

drangelawerner0254@nswhealth.gov.au

Date completed

14/05/2025

Trainee reflection *(optional)*

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

Reflection

I appreciated the opportunity to apply population health principles in a real-world setting. I feel more confident in data analysis and program planning. Moving forward, I will focus on evaluation metrics and stakeholder engagement.

Date

15/05/25

— 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 behave in line with all ten domains of professional practice | Level 5 consistently behave in line with all ten domains of professional practice | Level 5 consistently behave in line with all ten domains of professional practice | Level 5 consistently behave in line with all ten domains of professional practice |
| | 2. Team leadership: Lead and work collaboratively with 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: Demonstrate commitment to ongoing professional development and health professions education | 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: Contribute to improving safety, effectiveness, and experience of health care | 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. Assessment and management – child maltreatment: Develop competence in the identification and clinical management of situations of potential or suspected child harm / maltreatment | Level 1 be able to be present and observe | 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 |
| | 6. Assessment and management – developmental and behavioural: Provide comprehensive assessment and management of children who have been referred because of development and behavioural problems | 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. Assessment and management – child population health: Assessment and management of patients through a child population health lens | Level 1 be able to be present and observe | 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 |
| | 8. 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 |
| | 9. 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 |

| | | 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> |
| | 10. Communication in child-centred care: Communicate effectively and professionally with patients, carers, families, health professionals, and other community members engaging with the health service | 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 | 11. Developmental and behavioural paediatrics | Level 2 know the topics and concepts 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 |
| | 12. Child safety and maltreatment | Level 2 know the topics and concepts 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 |
| | 13. Social paediatrics | Level 2 know the topics and concepts 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 |
| | 14. Child population health | Level 2 know the topics and concepts 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 |