Radiation Oncology Training Program 2022
DR ANDREW POTTER
DR LISA SULLIVAN
WELCOME

• Type any queries you have into ‘Questions’
• Queries will be read out and answered so that they are recorded
• The webinar recording will be available to view afterwards
• Queries will also contribute to a series of ‘Frequently Asked Questions’
• If you think of any queries after the webinar, please email.
OVERVIEW

This webinar session will cover:

- Learning Outcomes
- Learning Activities in the Enhanced Program
- Work-Based Assessments
- The Training Handbook
- Summary of the Phases
- E-Portfolio
- Transitions Arrangements
- Upcoming Webinars
TRAINING PROGRAM 2022
WHY THE CHANGE?

• ACER-Prideaux Review – evaluation of the training program identified areas to improve
• Update the structure of the training program in line with current best practice in medical education
  • Competency based approach
  • More direct observation of trainees and feedback
  • Progression through stages of training rather than years
  • A programmatic approach to assessment
• Curriculum required updating to reflect contemporary practice
THE RADIATION ONCOLOGY TRAINING PROGRAM IS CHANGING

The Enhanced Program commences in February 2022 for all Australian, New Zealand and Singapore trainees

All trainees will transition to the enhanced program.

Trainees must be up to date with training requirements and assessments of the current program to ensure they obtain credit for them when they transition to the enhanced program.
## TRAINING PROGRAM 2022
### WHAT IS ENHANCED?

- Curriculum (Learning Outcomes)
- Structured learning activities
- A longitudinal assessment strategy
- Monitoring and review of trainee performance
- Information for delivery of the program
- Recording of requirements via the e-Portfolio
LEARNING OUTCOMES

• The Learning Outcomes document articulates what is expected of a trainee on their FIRST DAY of specialist practice.

• The Learning Outcomes guide teaching and learning, and assessment in the program.

• Trainees are eligible for Fellowship when they have completed the training requirements and demonstrated competence.
THE RADIATION ONCOLOGIST

MEDICAL EXPERT STREAMS
- Oncology Sciences
- Care of the Oncology Patient
- Treatment Modality
- Symptom Control and Palliative Care
- Care of the Oncology Patient Applied to Specific Tumour Sites

MEDICAL EXPERT

INTRINSIC ROLES
- Communicator
- Collaborator
- Leader
- Health Advocate
- Scholar
- Professional

Provisional Professional
Communicator
Care of the Oncology Patient
Symptom Control & Palliative Care
Health Advocate
Leader
Scholar
Collaborator
ENHANCED LEARNING

• Oncology Science Workshops
  • Assisting trainees to learn foundation knowledge

• Practical Oncology Experiences
  • Phase 1 and Phase 2
  • Target learning in particular areas

• Professional Activities
  • Running a meeting
  • Presenting at an MDM
  • Recruiting a patient to a clinical trial

NEW work-based assessments are also for learning
### Assessment FOR learning within phases of training

<table>
<thead>
<tr>
<th>Radiation Oncology Training Program</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Phase 1</strong></td>
</tr>
<tr>
<td>Min: 18 mths accredited time</td>
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<tr>
<td>Max: 30 mths accredited training time</td>
</tr>
<tr>
<td>PEAT</td>
</tr>
<tr>
<td>CPET</td>
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<tr>
<td>CST</td>
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<tr>
<td>Phase 1 Examination</td>
</tr>
<tr>
<td>Clinical Supervisor Appraisals</td>
</tr>
<tr>
<td>Director of Training Reviews</td>
</tr>
<tr>
<td><strong>Phase 2</strong></td>
</tr>
<tr>
<td>Min: 36 mths accredited time</td>
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<tr>
<td>Max: 10 years (Phase 1 + Phase 2)</td>
</tr>
<tr>
<td>PEAT</td>
</tr>
<tr>
<td>CPET</td>
</tr>
<tr>
<td>CRDT</td>
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<tr>
<td>CST</td>
</tr>
<tr>
<td>Phase 2 Examination</td>
</tr>
<tr>
<td>Research</td>
</tr>
<tr>
<td>Clinical Supervisor Appraisals</td>
</tr>
<tr>
<td>Director of Training Reviews</td>
</tr>
</tbody>
</table>

### Fellowship

- **Career**
- **Continuing Professional Development**

### Assessment OF learning between phases of training
WORK-BASED ASSESSMENT (WBA)

• Assessment of trainees completing activities with actual patients in the clinical setting

• Assessment for learning
  • Assessments can be repeated as many times as necessary
  • Focus is on improvement

• Feedback from a variety of consultants

• Tools focus on medical expertise as well as other competencies (communication, advocacy etc)
## FOUR WORK-BASED ASSESSMENT TOOLS

### FIT FOR PURPOSE

<table>
<thead>
<tr>
<th>Tool Name</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patient Encounter Assessment Tool (PEAT)</td>
<td></td>
</tr>
<tr>
<td>Contouring and Plan Evaluation Tool (CPET)</td>
<td></td>
</tr>
<tr>
<td>Case Report Discussion Tool (CRDT)</td>
<td></td>
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<tr>
<td>Communication Skills Tool (CST)</td>
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</tbody>
</table>
### ENTRUSTABILITY SCALE

Rating relies on the supervisor’s clinical expertise

<table>
<thead>
<tr>
<th>LEVEL 1</th>
<th>LEVEL 2</th>
<th>LEVEL 3</th>
<th>LEVEL 4</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Direct Input</strong>&lt;br&gt;Required direct instructions and inputs to fill knowledge gaps or deliver effective treatment</td>
<td><strong>Substantial Guidance</strong>&lt;br&gt;Required substantial guidance to complete. Major corrections needed in order to deliver effective treatment.</td>
<td><strong>Some Guidance</strong>&lt;br&gt;Required minimal supervision, but some guidance. Minor corrections needed to proposed treatment</td>
<td><strong>Competent</strong>&lt;br&gt;Did not require guidance or support. Any suggestions for improvement had no significant impact on proposed treatment. Capable of independent practice.</td>
</tr>
</tbody>
</table>
MONITORING AND REVIEW

• Clinical Supervisor Appraisals
  • Every 3 months
  • Monitor WBA completion
  • Focus on day-to-day activity and implementing feedback

• Director of Training Review
  • Every 6 months
  • Review progress for phase of training
  • Assist to remove barriers to completion
INFORMATION FOR DELIVERY

• The handbook is a comprehensive guide to all elements of the enhanced program
• One resource which provides information about:
  • Training program requirements
  • Possible variations to training
  • Progressing through the program
  • Additional trainee support
• Links to updated policies and guides
• Links to further resources on RANZCR website
2. OVERVIEW OF THE TRAINING PROGRAM

Commencing the Program

Training Program Application Process
Membership and Training Fees

Structure of the Training Program

Training Network and Training Sites
Clinical and Non-Clinical Time
Initial Meeting with Director of Training

Summary of Training Program Requirements

Phase 1
Phase 2
Changes to the Radiation Oncology Training Program

Variations to Training
Recognition of Prior Learning
Provision for Working Outside Radiation Oncology

Flexible Training
Part-Time Training
Interrupted Training
Non-consecutive Leave
Maximum Training Time of the Training Program

Fellowship
Admission to Fellowship
4. WORK-BASED ASSESSMENT

Work-based Assessment Tools

Patient Encounter Assessment Tool
Contouring and Plan Evaluation Tool
Case Report and Case Report Discussion Tool
Communication Skills Tool
Work-based Assessment and Progression

5. STRUCTURED LEARNING EXPERIENCES

Workshops

Oncology Sciences Workshops
SMART Workshops
Practical Oncology Experiences (POEs)
Phase 1
Phase 2
Completion of POEs

6. PROFESSIONAL ACTIVITIES

Activities

Presenting at a Multidisciplinary Team Meeting
Running a Meeting
Recruiting a Patient to a Clinical Trial
| **Anticipated Duration of Phase 1** | Minimum accredited training time: 18 months.  
Maximum time: 30 accredited months. |
|------------------------------------|-----------------------------------------------------------------------------------|
| **Work-based Assessment**          | Demonstrated progress with work-based assessment.  
**Patient Encounter Assessment Tool (PEAT)**  
A minimum of ten assessments which focus on the trainee’s ability to obtain a history, conduct a physical examination, interpret patient’s investigations or order additional investigations as required, and synthesise this information into a management plan. Five of these assessments must include the Clinical Supervisor observing the trainee with the patient.  
**Contouring and Plan Evaluation Tool (CPET)**  
A minimum of ten assessments which focus on the trainee’s ability to prepare a radiation therapy plan.  
**Communication Skills Tool (CST)**  
Assessments of the trainee’s communication skills in each of the following contexts:  
- during an initial consultation  
- a follow up consultation or treatment review  
- explaining a management plan to a patient and obtaining informed consent  
- breaking bad news  
A minimum of one work-based assessment should be completed each month to obtain regular feedback. |
| Structured Learning Experiences | **Oncology Sciences Workshops**  
Three Oncology Sciences workshops provide some formal learning in relation to radiation oncology physics and radiation and cancer biology. Trainees must attend at least two.  
**Phase 1 Practical Oncology Experiences (POEs)**  
Two pathology sessions  
Four radiation planning sessions  
Four radiation delivery sessions |
| --- | --- |
| Monitoring and Review | Clinical Supervisor Appraisal every three months.  
Director of Training Review every six months.  
Phase 1 Review of trainees’ portfolios at no later than 24 months into Phase 1, to check progress toward completing Phase 1.  
**One Multisource Feedback (MSF) completed within the first 12 months.** |
<table>
<thead>
<tr>
<th><strong>Phase 1 Examination</strong></th>
<th>Trainees must complete a minimum 12 months of accredited training time and all structured learning experiences to be eligible to sit for the Phase 1 Examination. The Phase 1 Examination includes three subject papers, each of two hours duration.</th>
</tr>
</thead>
</table>
| **Progression to Phase 2** | Trainees may present for portfolio review by Network Portfolio Review Committee, after a minimum of 18 months of accredited training time.  
Overall, the trainee’s e-Portfolio must:  
  - record the completion of all Phase 1 training requirements referred to in this table  
  - demonstrate learning and progress on a variety of clinical cases, as assessed by multiple assessors  
  - demonstrate learning and progress in acquiring competence in the intrinsic roles.  
Trainees must achieve Level 2 on the overall entrustability scale for at least half of the PEAT and CPET, and Level 3 on the CST for each scenario.  
Trainees must complete the Trainee Assessment of Training Sites (TATS) every six months. |
<table>
<thead>
<tr>
<th>Anticipated Duration of Phase 2</th>
<th>Dependent on trainees demonstrating competency (usually a minimum of 36 months). Maximum training time for the program: Up to 10 years (Phase 1 + Phase 2).</th>
</tr>
</thead>
</table>
| Work-based Assessment           | **Patient Encounter Assessment Tool (PEAT)**  
A minimum of 15 assessments. Five of these assessments must include the Clinical Supervisor observing the trainee with the patient.  

**Contouring and Plan Evaluation Tool (CPET)**  
A minimum of 15 assessments.  

**Case Report and Discussion Tool (CRDT)**  
A minimum of 20 assessments. At least five assessments on lesser focus topics, two on in-patient care and five on specific techniques.  

**Communication Skills Tool (CST)**  
Assessments of the trainee’s communication skills in specific contexts including:  
- during an initial consultation  
- a follow up consultation or treatment review  
- explaining a management plan to a patient and obtaining informed consent  
- breaking bad news  

A minimum of one work-based assessment should be completed each month to obtain regular feedback.
<table>
<thead>
<tr>
<th>Structured Learning Experiences</th>
<th>SMART Workshops</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Trainees are required to complete at least one SMART workshop and are encouraged to do so within the first six months of Phase 2 to provide the foundation for their engagement in their research project.</td>
</tr>
<tr>
<td><strong>Phase 2 Practical Oncology Experiences (POEs)</strong></td>
<td>Two sessions with patients being managed by a specialist palliative care team</td>
</tr>
<tr>
<td></td>
<td>Two sessions with patients undergoing surgery</td>
</tr>
<tr>
<td></td>
<td>Two sessions with patients receiving systemic therapy</td>
</tr>
<tr>
<td></td>
<td>Four sessions focusing on any treatment modality</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Monitoring and Review</th>
<th>Clinical Supervisor Appraisal every three months.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Director of Training Review every six months.</td>
</tr>
<tr>
<td></td>
<td>Phase 2 Review of trainees’ portfolios at no later than 36 months into Phase 2, to check progress toward presenting for the Part 2 Examination.</td>
</tr>
<tr>
<td></td>
<td><strong>One Multisource Feedback (MSF)</strong> to be completed for eligibility for the Phase 2 Examination.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Phase 2 Examination</th>
<th>Trainees must complete a minimum 24 months of accredited training time in Phase 2, all WBAs, an MSF and all structured learning experiences to be eligible to apply for the Phase 2 Examination.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Phase 2 Examination – four written papers and viva voce examinations (vivas).</td>
</tr>
</tbody>
</table>
The following activities must be completed for eligibility for Fellowship, though they may be completed any time during Phase 2

| Professional Activities | For eligibility for Fellowship:  
| o Presenting at a multidisciplinary meeting  
| o Recruiting a patient to a clinical trial  
| o Running a meeting |

| Research | For eligibility for Fellowship, trainees are required to submit a manuscript of their research project to an acceptable journal. Trainees may select one of three options:  
| 1. Original Research Study  
| 2. Cochrane Protocol or Review  
| 3. Prospective Study |

| Progression to Fellowship | Trainees may present for portfolio review by Network Portfolio Review Committee, after completion of all training requirements.  
Overall, the trainee’s e-Portfolio must:  
* record the completion of all training program requirements  
* demonstrate progress leading to competence across the breadth of the curriculum (a variety of clinical cases of differing complexity), as assessed by multiple assessors  
* demonstrate the achievement of competence across the intrinsic roles.  
As a guide, Trainees must achieve Level 4 on the overall entrustability scale for at least half of the PEAT, CPET and CRDT, and on the CST for each scenario.  
Trainees must complete the Trainee Assessment of Training Sites (TATS) every six months. |
E-PORTFOLIO SYSTEM

- Trainee profile
- Records of all training requirements
- Facilitates work-based assessment
- Monitors trainees progress through each phase of training
- Identifies when trainees are eligible to progress to the next phase or sit an examination
- User friendly and mobile device compatible
TRANSITION

ALL current trainees will transition to the enhanced training program at beginning of 2022, with transitions scenarios.

This is to:

• Avoid the need to operate two programs concurrently
• Allow all trainees to benefit from the changes to the training program
TRANSITION PRINCIPLES

The principles are to:

• Minimise disruption for trainees
• Minimise disadvantage for trainees
• Allow some flexibility – consideration on a case by case basis
• Ensure administrative feasibility
• Provide some leeway for transition trainees
Trainees in their first 12 months of training

Trainees yet to pass the Phase 1 Examination

Which Phase?

Phase 1 of Enhanced Program

Phase 2 of Enhanced Program

Trainees who have passed the Phase 1 Examination
TRANSITION INTO PHASE 1

- Complete up to a minimum of 18 months accredited training time
- NO maximum time in Phase 1
- Min. 5 Contouring and Plan Evaluation Tools (CPETs) must be completed in Phase 1 of enhanced program, demonstrate Level 2 with two different assessors
- 10 Patient Encounter Assessment Tools (PEAT), demonstrate Level 2 with two different assessors. Half should be observed. Mini-CEX completed in current program will be credited toward this
- Trainees are advised to complete the following in their entirety:
  - POE – Treatment Planning
  - POE – Treatment Machines
- Phase 1 Examination in 2022 will remain unchanged.
TRANSITION INTO PHASE 2

Trainees who start Phase 2 after October 2021 will complete Phase 2 of the enhanced program in its entirety.

Trainees who transition from Phase 2 in the current program to Phase 2 in the enhanced program will:
- Obtain credits toward new requirements
- Need to ‘top up’ outstanding requirements to be eligible for Fellowship

Trainees who are eligible for the Phase 2 Examination in the current program will just need to complete the Phase 2 Examination (no additional mandatory work-based assessments)
TRANSITION INTO PHASE 2

- Complete up to a minimum of 60 months accredited training time
- Contouring and Plan Evaluation Tools, demonstrate Level 4 with two different assessors
- 8 Patient Encounter Assessment Tools (PEAT), demonstrate Level 4 with two different assessors. Half should be observed. Mini-CEX completed in current program will be credited toward this.
- **20 Case Report Discussion Tools**, radiation therapy case reports in the current program will be credited toward this.
- 5 POE sessions, current clinical oncology reports (4) will be credited toward this requirement
- SMART workshop (10 SMART points deemed equivalent)
## Breakdown of Case Report Types and Requirements: Minimum Total 30

<table>
<thead>
<tr>
<th>Radiation Therapy Case Reports (25)</th>
<th>Clinical Oncology Case Reports (5)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Standard (20)</strong></td>
<td><strong>General (1)</strong></td>
</tr>
<tr>
<td><strong>Special (5)</strong></td>
<td><strong>Special (4)</strong></td>
</tr>
<tr>
<td><strong>Major Focus (15)</strong> 1-2 from each category in Table of RT Case Report Topics and Codes – Major focus column</td>
<td>Examination under anaesthesia for cervix cancer (1)</td>
</tr>
<tr>
<td>Brachytherapy – gynaecology (1)</td>
<td>Participation in learning opportunities for CanMEDS roles other than medical expert, i.e. Communicator, Collaborator, Manager, Health Advocate, Scholar, Professional</td>
</tr>
<tr>
<td>Brachytherapy – prostate (1)</td>
<td>Observation of surgical procedures (1)</td>
</tr>
<tr>
<td>Stereotactic radiosurgery/RT (1)</td>
<td>Chemotherapy delivery session (1)</td>
</tr>
<tr>
<td><strong>Lesser Focus (5)</strong> One from five different categories in Table of RT Case Report Topics and Codes – Lesser focus column</td>
<td>Symptom management/palliative care (1)</td>
</tr>
<tr>
<td>Total Body Irradiation (1)</td>
<td></td>
</tr>
<tr>
<td>Paediatric Oncology (1)</td>
<td></td>
</tr>
<tr>
<td>Case Reports – Current Program</td>
<td>Credits – TP 2022</td>
</tr>
<tr>
<td>-------------------------------</td>
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</tr>
<tr>
<td>Radiation Therapy Case Reports</td>
<td>Case Report &amp; Case Report Discussion Tool</td>
</tr>
<tr>
<td>Major Focus (15)</td>
<td>Major Focus (8)</td>
</tr>
<tr>
<td>Lesser Focus (5)</td>
<td>Lesser Focus (5)</td>
</tr>
<tr>
<td>Special (5)</td>
<td>Specific techniques (5)</td>
</tr>
<tr>
<td>• Brachytherapy – gynaecology</td>
<td></td>
</tr>
<tr>
<td>• Brachytherapy – prostate</td>
<td></td>
</tr>
<tr>
<td>• Stereotactic radiosurgery/RT</td>
<td></td>
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<tr>
<td>• Total body irradiation</td>
<td></td>
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<tr>
<td>• Paediatric oncology</td>
<td></td>
</tr>
<tr>
<td>Total = 25</td>
<td>Total = 20</td>
</tr>
<tr>
<td>Clinical Oncology Case Reports</td>
<td>POE Sessions</td>
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<tr>
<td>-------------------------------</td>
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</tr>
<tr>
<td>General (1)</td>
<td>No equivalent</td>
</tr>
<tr>
<td>Special (4)</td>
<td></td>
</tr>
<tr>
<td>• Observation of surgical procedures</td>
<td></td>
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<tr>
<td>• Chemotherapy delivery session</td>
<td></td>
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<tr>
<td>• Symptom management/palliative care</td>
<td></td>
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<tr>
<td>• Examination under anaesthesia for cervix cancer</td>
<td></td>
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<tr>
<td>POE Sessions – 3 hrs duration (3)</td>
<td></td>
</tr>
<tr>
<td>• Surgery (1)</td>
<td></td>
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<tr>
<td>• Systemic Therapy (1)</td>
<td></td>
</tr>
<tr>
<td>• Palliative Care (1)</td>
<td></td>
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<tr>
<td>• Other (1)</td>
<td></td>
</tr>
<tr>
<td>Total = 5</td>
<td>Total = 4</td>
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</tbody>
</table>

If a trainee has completed 30 case reports the CRDT and Phase 2 POE requirements of the enhanced program are completed.
Phase 2 Examination after 24 months of accredited training time in Phase 2 (within the current program or enhanced program).

All Work-Based Assessments, POEs etc. must be completed.

The 2022 Examinations will be conducted as per the current policy (for the second sitting in 2022, transition trainees may complete their research project after the exam).

For trainees sitting 2023 onwards, the research project can be completed after the Examination.
PREPARING FOR TRANSITION

- The e-Portfolio system will replace TIMS in late 2021
- Trainees will receive a transcript of their progress
- All trainees should record training activities completed in TIMS and keep it up to date prior to the cut-off date to make sure progress is transferred.
- Activities can continue between the TIMS cut-off date and February 2022 for upload
## WEBINARS

<table>
<thead>
<tr>
<th>Date</th>
<th>Webinars</th>
</tr>
</thead>
<tbody>
<tr>
<td>September 2021</td>
<td>Work-Based Assessments</td>
</tr>
<tr>
<td></td>
<td>Trainee Transition</td>
</tr>
<tr>
<td>October 2021</td>
<td>e-Portfolio System and Progression</td>
</tr>
<tr>
<td>November 2021 and 2022</td>
<td>Enhanced Program – Role of the Clinical Supervisor</td>
</tr>
<tr>
<td></td>
<td>Enhanced Program – Role of the Director of Training</td>
</tr>
</tbody>
</table>

Additionally, information including webinars and Q&As, will be posted on to College website.
SUMMARY

• The enhanced training program starts from February 2022
• Trainees will receive credit for what they have completed in the current program
• The Learning Outcomes and Training Program Handbook are key documents
• Training Program Handbook links to all updated policies and associated documents
• Trainees will receive a letter and individual transition information
FOR MORE INFORMATION

Visit the TAR webpage at
www.ranzcr.com/tar

Email us at:
ROtraining@ranzcr.edu.au
for information about the Radiation Oncology Training Program