



The Royal Australian
and New Zealand
College of Radiologists®

Radiation Oncology Training Program 2022

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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



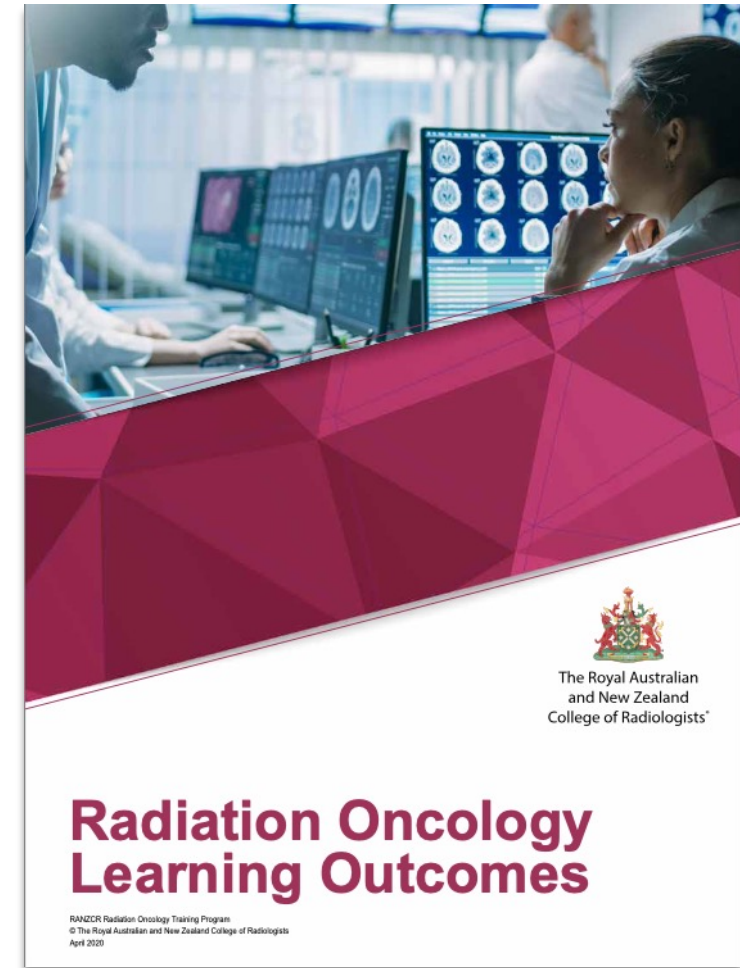
Information for delivery of the program



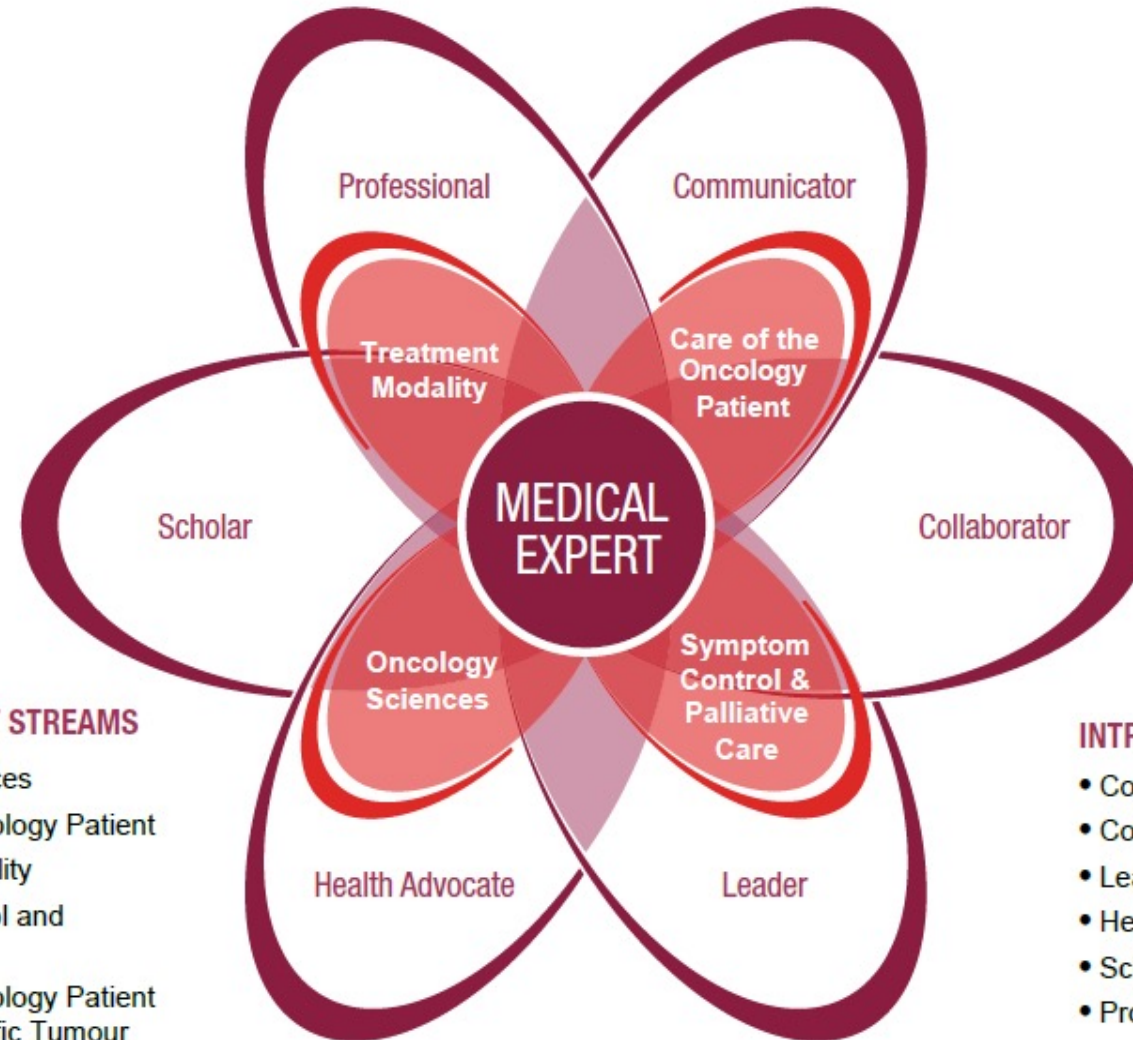
Recording of requirements via the e-Portfolio

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

INTRINSIC ROLES

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

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

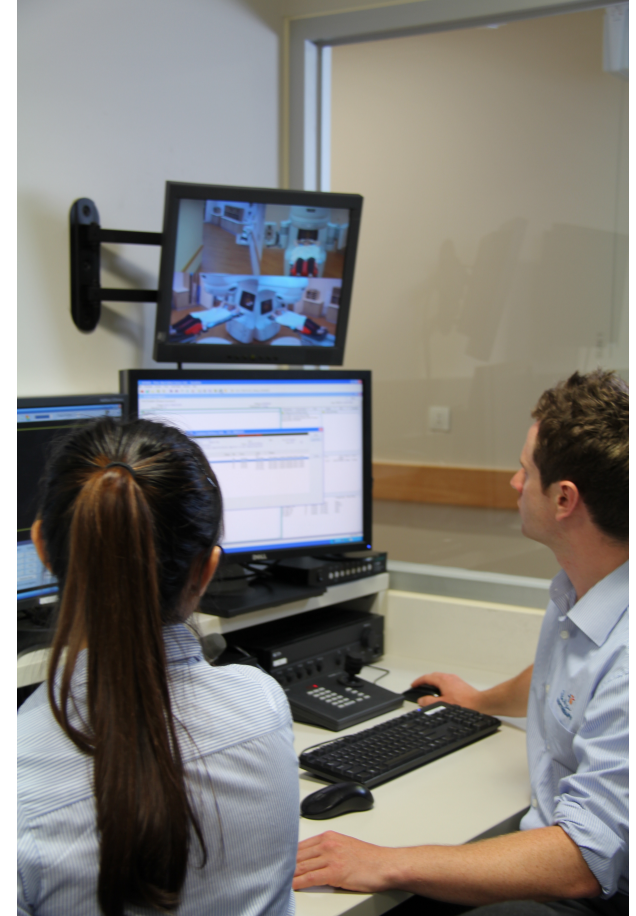
Assessment FOR learning within phases of training

Radiation Oncology Training Program				
Phase 1	e-Portfolio Review to Progress	Phase 2	e-Portfolio Review to Progress	Fellowship
Min: 18 mths accredited time Max: 30 mths accredited training time		Min: 36 mths accredited time Max: 10 years (Phase 1 + Phase 2)		Career
PEAT CPET CST		PEAT CPET CRDT CST		Continuing Professional Development
Phase 1 Examination		Phase 2 Examination Research		
Clinical Supervisor Appraisals Director of Training Reviews		Clinical Supervisor Appraisals Director of Training Reviews		

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



Patient Encounter Assessment Tool (PEAT)



Contouring and Plan Evaluation Tool (CPET)



Case Report Discussion Tool (CRDT)



Communication Skills Tool (CST)

ENTRUSTABILITY SCALE

Rating relies on the supervisor's clinical expertise

LEVEL 1	LEVEL 2	LEVEL 3	LEVEL 4
<p><u>Direct Input</u> Required direct instructions and inputs to fill knowledge gaps or deliver effective treatment</p>	<p><u>Substantial Guidance</u> Required substantial guidance to complete. Major corrections needed in order to deliver effective treatment.</p>	<p><u>Some Guidance</u> Required minimal supervision, but some guidance. Minor corrections needed to proposed treatment</p>	<p><u>Competent</u> Did not require guidance or support. Any suggestions for improvement had no significant impact on proposed treatment. Capable of independent practice.</p>

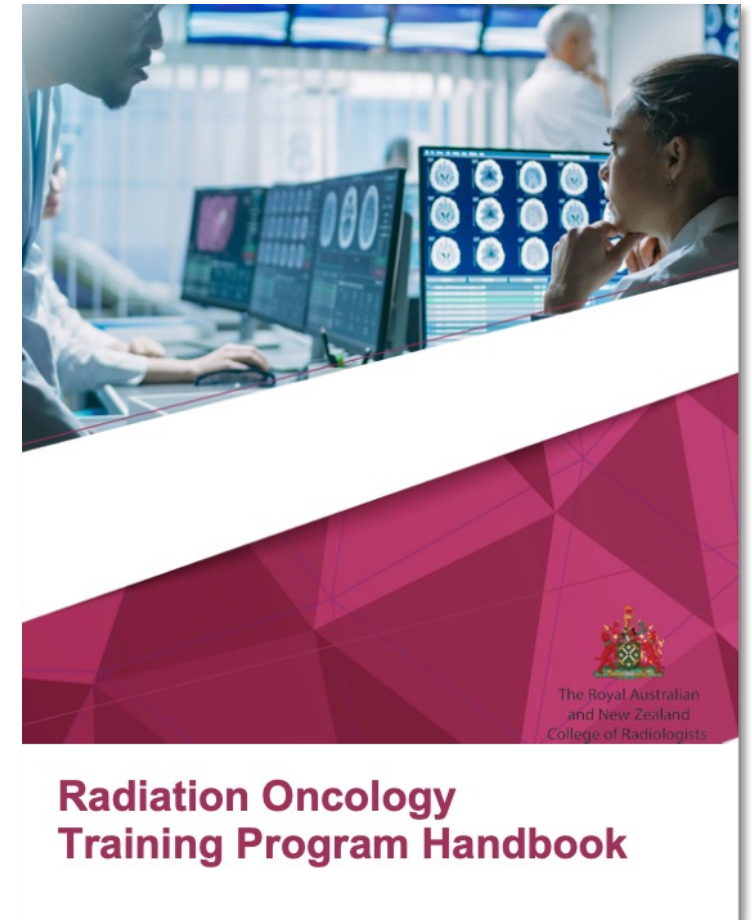
MONITORING AND REVIEW

- 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

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Training Program Application Process

Membership and Training Fees

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Training Network and Training Sites

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Changes to the Radiation Oncology Training Program

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Patient Encounter Assessment Tool

Contouring and Plan Evaluation Tool

Case Report and Case Report Discussion Tool

Communication Skills Tool

Work-based Assessment and Progression

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Oncology Sciences Workshops

SMART Workshops

Practical Oncology Experiences (POEs)

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Phase 1

Phase 2

Completion of POEs

6. PROFESSIONAL ACTIVITIES

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Activities

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Presenting at a Multidisciplinary Team Meeting

Running a Meeting

Recruiting a Patient to a Clinical Trial

Anticipated Duration of Phase 1	<p>Minimum accredited training time: 18 months.</p> <p>Maximum time: 30 accredited months.</p>
Work-based Assessment	<p>Demonstrated progress with work-based assessment.</p> <p>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.</p> <p>Contouring and Plan Evaluation Tool (CPET) A minimum of ten assessments which focus on the trainee's ability to prepare a radiation therapy plan.</p> <p>Communication Skills Tool (CST) Assessments of the trainee's communication skills in each of the following contexts:</p> <ul style="list-style-type: none"> ○ 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 <p>A minimum of one work-based assessment should be completed each month to obtain regular feedback.</p>

Structured Learning Experiences	<p>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.</p> <p>Phase 1 Practical Oncology Experiences (POEs) Two pathology sessions Four radiation planning sessions Four radiation delivery sessions</p>
Monitoring and Review	<p>Clinical Supervisor Appraisal every three months.</p> <p>Director of Training Review every six months.</p> <p>Phase 1 Review of trainees' portfolios at no later than 24 months into Phase 1, to check progress toward completing Phase 1.</p> <p>One Multisource Feedback (MSF) completed within the first 12 months.</p>

Phase 1 Examination	<p>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.</p>
Progression to Phase 2	<p>Trainees may present for portfolio review by Network Portfolio Review Committee, after a minimum of 18 months of accredited training time.</p> <p>Overall, the trainee's e-Portfolio must:</p> <ul style="list-style-type: none"> • 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. <p>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.</p> <p>Trainees must complete the Trainee Assessment of Training Sites (TATS) every six months.</p>

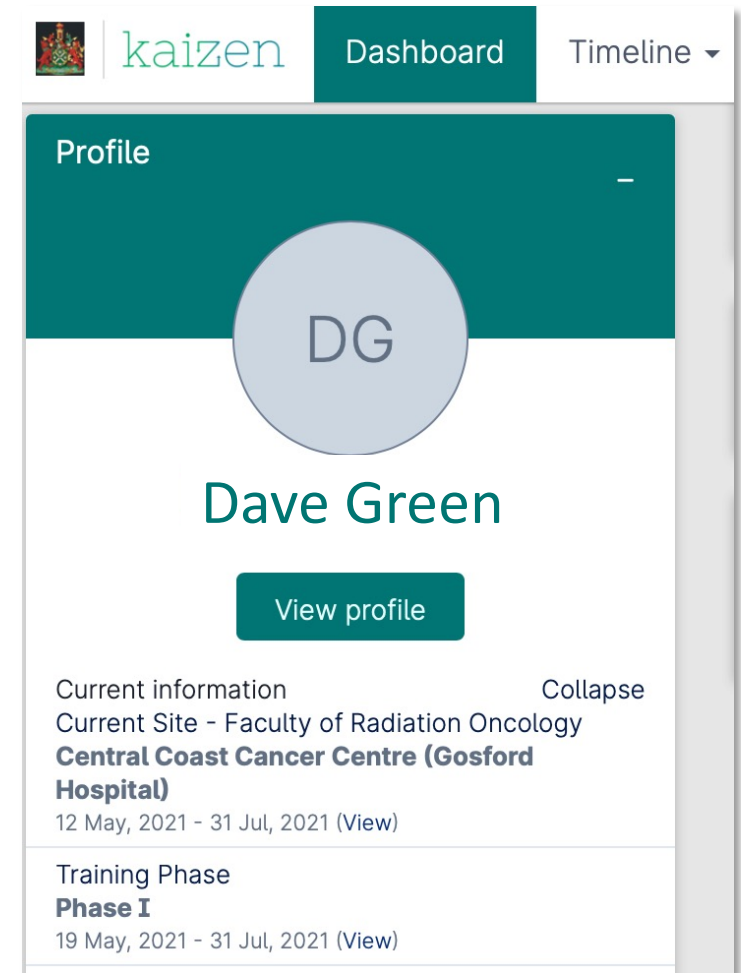
Anticipated Duration of Phase 2	<p>Dependent on trainees demonstrating competency (usually a minimum of 36 months).</p> <p>Maximum training time for the program: Up to 10 years (Phase 1 + Phase 2).</p>
Work-based Assessment	<p>Patient Encounter Assessment Tool (PEAT) A minimum of 15 assessments. Five of these assessments must include the Clinical Supervisor observing the trainee with the patient.</p> <p>Contouring and Plan Evaluation Tool (CPET) A minimum of 15 assessments.</p> <p>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.</p> <p>Communication Skills Tool (CST) Assessments of the trainee's communication skills in specific contexts including:</p> <ul style="list-style-type: none"> ○ 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 <p>A minimum of one work-based assessment should be completed each month to obtain regular feedback.</p>

Structured Learning Experiences	<p>SMART Workshops 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.</p> <p>Phase 2 Practical Oncology Experiences (POEs) Two sessions with patients being managed by a specialist palliative care team Two sessions with patients undergoing surgery Two sessions with patients receiving systemic therapy Four sessions focusing on any treatment modality</p>
Monitoring and Review	<p>Clinical Supervisor Appraisal every three months.</p> <p>Director of Training Review every six months.</p> <p>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.</p> <p>One Multisource Feedback (MSF) to be completed for eligibility for the Phase 2 Examination.</p>
Phase 2 Examination	<p>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.</p> <p>Phase 2 Examination – four written papers and viva voce examinations (vivas).</p>

<p><i>The following activities must be completed for eligibility for Fellowship, though they may be completed any time during Phase 2</i></p>	
<p>Professional Activities</p>	<p>For eligibility for Fellowship:</p> <ul style="list-style-type: none"> ○ Presenting at a multidisciplinary meeting ○ Recruiting a patient to a clinical trial ○ Running a meeting
<p>Research</p>	<p>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:</p> <ol style="list-style-type: none"> 1. Original Research Study 2. Cochrane Protocol or Review 3. Prospective Study
<p>Progression to Fellowship</p>	<p>Trainees may present for portfolio review by Network Portfolio Review Committee, after completion of all training requirements.</p> <p>Overall, the trainee's e-Portfolio must:</p> <ul style="list-style-type: none"> • 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. <p>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.</p> <p>Trainees must complete the Trainee Assessment of Training Sites (TATS) every six months.</p>

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



WHICH PHASE?

Trainees in their first 12 months of training

Trainees yet to pass the
Phase 1 Examination



PHASE 1 OF ENHANCED PROGRAM

Trainees who have passed the
Phase 1 Examination



PHASE 2 OF ENHANCED PROGRAM

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

Radiation Therapy Case Reports (25)	
Standard (20)	Special (5)
<u>Major Focus (15)</u> 1-2 from each category in Table of RT Case Report Topics and Codes – Major focus column	Brachytherapy – gynaecology (1)
	Brachytherapy – prostate (1)
	Stereotactic radiosurgery/RT (1)
<u>Lesser Focus (5)</u> One from five different categories in Table of RT Case Report Topics and Codes – Lesser focus column	Total Body Irradiation (1)
	Paediatric Oncology (1)

Clinical Oncology Case Reports (5)	
General (1)	Special (4)
Participation in learning opportunities for CanMEDS roles other than medical expert, i.e. Communicator, Collaborator, Manager, Health Advocate, Scholar, Professional	Examination under anaesthesia for cervix cancer (1)
	Observation of surgical procedures (1)
	Chemotherapy delivery session (1)
	Symptom management/palliative care (1)

Case Reports – Current Program	Credits – TP 2022
Radiation Therapy Case Reports	Case Report & Case Report Discussion Tool
Major Focus (15)	Major Focus (8)
	Trainees must complete case reports on in-patient which may be major focus areas (2)
Lesser Focus (5)	Lesser Focus (5)
Special (5) <ul style="list-style-type: none"> • Brachytherapy – gynaecology • Brachytherapy – prostate • Stereotactic radiosurgery/RT • Total body irradiation • Paediatric oncology 	Specific techniques (5)
Total = 25	Total = 20

Clinical Oncology Case Reports	POE Sessions
General (1)	No equivalent
Special (4) <ul style="list-style-type: none"> • Observation of surgical procedures • Chemotherapy delivery session • Symptom management/palliative care • Examination under anaesthesia for cervix cancer 	POE Sessions – 3 hrs duration (3) <ul style="list-style-type: none"> • Surgery (1) • Systemic Therapy (1) • Palliative Care (1) • Other (1)
Total = 5	Total = 4

If a trainee has completed 30 case reports the CRDT and Phase 2 POE requirements of the enhanced program are completed.

PHASE 2 EXAMINATION



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

Date	Webinars
September 2021	Work-Based Assessments Trainee Transition
October 2021	e-Portfolio System and Progression
November 2021 and 2022	Enhanced Program – Role of the Clinical Supervisor Enhanced Program – Role of the Director of Training

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



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