



## **ROLE AND RESPONSIBILITIES OF A CLINICAL RADIOLOGY DIRECTOR OF TRAINING**

The role and responsibilities for the Director of Training is summarised below.

### **Preamble**

The Royal Australian and New Zealand College of Radiologists (RANZCR) recognises that clinical and educational supervision of accredited trainees is a vital role in the successful training of future Clinical Radiologists (CRs). Training and supervision of individual trainees is undertaken by Directors of Training (DoTs) and Clinical Supervisors (CS).

Trainees will seek education opportunities to meet their learning needs and will request feedback from DoTs and CSs informally, during learning activities and whilst using work-based assessment tools. Trainees will action and respond to feedback suggestions to improve their performance. DoTs monitor performance and progression through the training program using the College's e-Portfolio System. The Local Governance Committee (LGC) is then responsible for determining whether trainees are ready to progress from Phase 1 to Phase 2 and Phase 2 to Phase 3 of the training program and are eligible to apply for Fellowship.

### **Primary Purpose of Position**

The Director of Training (DoT) has overall responsibility for the structure and quality of training in a hospital or department, in line with the College policies and the specific arrangements within their training network.

DoTs are the College's representatives of training in Clinical Radiology within accredited departments. They have an important role and ideally should have a broad understanding and experience in College activities. They provide liaison between Trainees and hospital/department administration regarding matters related to training as well as with Branch Education Officers and the College Office.

The role of the DoT also encompasses organisation and management, education, and human relations.

### **Appointment of Directors of Training**

To be appointed as a DoT, Fellows must be nominated by their Heads/Directors of Department and approved by Clinical Radiology Education and Training Committee (CRETc).

- The DoT shall not be the Head of Department or administratively responsible for its functioning unless the circumstances are exceptional.
- In hospitals with a large number of trainees, the CRETc may approve more than one DoT, with a recommendation of 10 trainees per DoT.
- In sites which only take trainees on short rotation (e.g. less than one month) a formal DoT is not mandatory, however there must be a radiologist on site who accepts responsibility for trainees and liaises with the DoT at the fully accredited site.

- The DoT will be appointed for a three-year term, with an optional second term. An extension to the term can be granted in extenuating circumstances.
- A DoT is required to hold a position within the department of minimum of 0.5FTE unless otherwise approved by the CRETC.

### **Qualifications and Skills:**

A DoT must:

- Be a Fellow of RANZCR or an Education Affiliate of RANZCR.
- Have consultant experience in a teaching Clinical Radiology Department for a minimum of two years full time or three years part time

It is essential that DoTs have:

- Demonstrated commitment to teaching and training.
- Good interpersonal skills and the ability to communicate effectively with trainees, other medical staff and patients.
- Ability to contribute to planning and delivery of an effective training program at the training site level.
- Other requirements as determined by the CRETC.

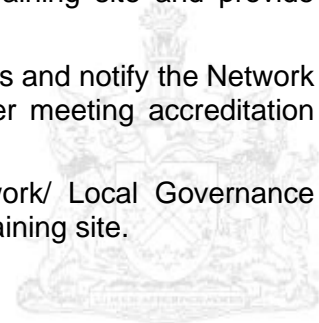
### **Responsibilities:**

In conjunction with the Head of Department the DoT will be expected to:

1. Within the first six months of appointment, complete Director of Training induction sessions, including:
  - Overview of the CR Training Program
  - Work-Based Assessment
  - Director of Training Reviews
2. Complete regular DoT upskilling sessions as requested, including all mandatory sessions.
3. Be familiar with and have current knowledge of the Clinical Radiology Learning Outcomes, Training Program Handbook, policies and procedures, and relevant jurisdictional policy directives.
4. Support and facilitate trainees to develop the breadth of competencies as detailed in the Clinical Radiology Learning Outcomes.
5. With the assistance of senior members of the specialist staff of an accredited Department, provide trainees with orientation prior to commencement of duties.
6. Conduct an initial meeting with the trainee within the first two weeks of training at the training site.
7. Manage implementation of the training rotation and educational opportunities in order to ensure that the program of training is:
  - Consistent with the training requirements
  - Appropriate for the stage of training



- Appropriate to the trainees needs
8. Supervise the professional education and clinical training of trainees (including ethical issues, career guidance, self-education etc.) and work with the Network Training Director (NTD) to ensure trainees have appropriate access to relevant training opportunities (e.g. breast imaging, paediatrics, nuclear medicine, obstetrics and gynaecology).
  9. Monitor the Trainee's progress by personal observation, feedback and discussion with delegation of these responsibilities to clinical supervisors where appropriate.
  10. Review and approve trainee requests for part-time and/or interrupted training.
  11. Facilitate the trainee's attendance at the network education program and site-based education activities such as tutorials and courses
  12. Encourage trainees to attend relevant in-hospital education teaching and learning activities such as, clinical radiology and multidisciplinary meetings, morbidity and mortality meetings, grand rounds etc.
  13. Ensure that trainees have opportunities to complete Work-Based Assessments and engage in regular feedback conversations.
  14. Ensure that each trainee receives adequate supervision and face-to-face discussion regarding clinical practice with their clinical supervisors.
  15. Seek feedback from CSs and other clinical teachers on trainee performance.
  16. Conduct DoT Reviews with trainees every six months, providing feedback on what the trainee is doing well and guiding trainees on their progress with training program requirements specified for each phase of training.
  17. Identify trainees who are experiencing difficulty and require additional support
  18. Initiate action plan meetings and remediation plan meetings with trainees and prepare plans when required and communicate to the NTD and College as outlined in the relevant policies.
  19. Facilitate the provision of counselling and information regarding career development for the future.
  20. Meet regularly with their Head of Department and other Clinical Supervisors to discuss issues related to training. This meeting is recommended once a month and could be incorporated into monthly consultant meetings.
  21. Participate in workshops on supervision and the DoT role, provided by the College from time to time.
  22. Participate in trainee selection as per College guidelines and agreed process of department or institution.
  23. Assist in the scheduled accreditation review of the training site and provide relevant documentation as required.
  24. Complete the Annual Clinical Radiology Training Census and notify the Network Governance Committee if the training site is no longer meeting accreditation standards.
  25. Attend (in person or via video teleconference) Network/ Local Governance Committee meetings and represent the views of their training site.



Approved by the CRETC 1 October 2021 and ratified by the FCR Council 29 October 2021