

In Training Assessment (ITA)

An ITA is required for each quarter of FPM training and must be submitted to the Faculty within 10 working days of completing the quarter. Training time will only be approved upon receipt of the ITA by the Faculty.

To be completed by the trainee

1 Personal information

College ID: ___ / ___ / ___ / ___ / ___ Name: _____

2 Training details

Training stage: (select one)

Training Unit: _____ Level: (please select)

ITA period start date: _____ ITA period end date: _____

FTE: (select one) _____ FTE (minimum requirement 0.5 FTE)

Number of weeks of training (excluding normal leave): _____

Number of days of leave taken this quarter: _____

Summary of workplace-based progressive feedback (WBPFs)

Note: A minimum of three WBPFs must be completed per quarter (see Section 8 of the FPM Training Handbook). Copies of all WBPFs completed must be retained in your learning portfolio and supplied to the Faculty upon request. On completion of a multi-source feedback, the SoT summary form needs to be forwarded to the Faculty.

3 Clinical Skills Assessments

Relevant topic area	Overall -rating	Assessment date	Workplace-based assessor

4 Management Plan Assessments

Relevant topic area	Overall -rating	Assessment date	Workplace-based assessor

5 Case-based Discussions

Relevant topic area	Overall -rating	Assessment date	Workplace-based assessor

6 Professional Presentations

Relevant topic area	Overall -rating	Assessment date	Workplace-based assessor

7 Multi-source Feedback

A multi-source feedback was undertaken during this ITA cycle. Yes No

8 Comments regarding WBPFs (to be completed by the trainee)

Progress in the clinical case study

9 Comments regarding clinical case study progress

Strengths and weaknesses

10 Areas of strength and weakness related to the roles in practice.

(Trainees need to identify the areas of strength and weakness from the ITA cycle).

Strengths:

Weaknesses:

To be completed by the SoT/PDS supervisor

11 Assessment

With reference to the Pain Medicine Roles in Practice please comment on the trainee’s performance for the preceding quarter based on the expectations for their stage of training. Where the trainee’s performance is unsatisfactory, please provide details. These comments may be used to counsel trainees and identify remedial actions and time-frames for their completion.

Please mark the box that best corresponds with your observations of the trainee.

Pain Medicine Roles in Practice	Expectation against stage of training					
	Rarely meets	Inconsistently meets	Meets expectations	Sometimes exceeds	Consistently exceeds	Unable to assess
Clinician						
Clinical assessment and formulation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Preparing management plans	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Implementing management plans	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comment/ Other specific areas need to improve:						

Pain Medicine Roles in Practice	Expectation against stage of training					
	Rarely meets	Inconsistently meets	Meets expectations	Sometimes exceeds	Consistently exceeds	Unable to assess
Communicator						
Ethical practice	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cultural awareness and sensitivity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Legal and regulatory environment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health and sustainable practice of specialist pain medicine physicians	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comment/ Other specific areas need to improve:						

Pain Medicine Roles in Practice	Expectation against stage of training					
	Rarely meets	Inconsistently meets	Meets expectations	Sometimes exceeds	Consistently exceeds	Unable to assess
Scholar						
Ongoing personal learning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Critical appraisal of medical information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Learning of others, with respect to pain and pain medicine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
New knowledge and practices in pain medicine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comment/ Other specific areas need to improve:						

Pain Medicine Roles in Practice	Expectation against stage of training					
	Rarely meets	Inconsistently meets	Meets expectations	Sometimes exceeds	Consistently exceeds	Unable to assess
Professional						
Therapeutic relationships	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Obtaining relevant information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sharing information with patients	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sharing information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comment/ Other specific areas need to improve:						

Pain Medicine Roles in Practice	Expectation against stage of training					
	Rarely meets	Inconsistently meets	Meets expectations	Sometimes exceeds	Consistently exceeds	Unable to assess
Collaborator						
Participate in a multidisciplinary healthcare team	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Effective co-operation and conflict mitigation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Collaborator	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comment/ Other specific areas need to improve:						

Pain Medicine Roles in Practice	Expectation against stage of training					
	Rarely meets	Inconsistently meets	Meets expectations	Sometimes exceeds	Consistently exceeds	Unable to assess
Manager/Leader						
Organisational work practice	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personal work practice	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Equitable allocation of finite health resources	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Participation in administrative and leadership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comment/ Other specific areas need to improve:						

Pain Medicine Roles in Practice	Expectation against stage of training					
	Rarely meets	Inconsistently meets	Meets expectations	Sometimes exceeds	Consistently exceeds	Unable to assess
Health advocate						
Patient advocate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Community advocate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personal advocate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health advocate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comment/ Other specific areas need to improve:						

Supervisor comments:

12 Global Impression

Please identify your impression on the trainee's overall level of competence with regards to each of the Pain Medicine Roles in Practice.

Impression on the overall level of competence at each role and globally:

1. New Trainee level - trainee would benefit from observing supervisor completing most of the tasks encountered in a Specialist Pain Medicine Practice.
2. Trainee skills need further development to manage most of the tasks encountered in a Specialist Pain Medicine Practice.
3. Trainee can manage most of the tasks encountered in a Specialist Pain Medicine Practice and may benefit from talking through some aspects of it from time to time.
4. Trainee can manage most of the tasks encountered in a Specialist Pain Medicine Practice and consult with supervisor appropriately.
5. Trainee can independently manage most of the tasks encountered in a Specialist Pain Medicine Practice with minimal supervision and could assist or mentor junior colleagues.
6. Approaching competency of a junior specialist pain medicine physician
7. Competence level of a junior specialist pain medicine physician

Pain Medicine Roles in Practice	1	2	3	4	5	6	7
	New Pain Medicine Trainee ← -----→ Junior SPMP Level						
Clinician	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Professional	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Scholar	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communicator	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Collaborator	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Manager/Leader	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health advocate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall global impression	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

13 Global assessment

Overall the trainee meets the expectations of his/her level of training:

- Yes Borderline No

Please provide an explanation where the overall assessment is unsatisfactory:

To be completed by the SoT/PDS supervisor and the trainee

14 Summary of discussion between trainee and supervisor

15 Learning goals for the next ITA period

What do you want to learn in your next ITA period?	Time line for completion	How will you demonstrate that you have learned what you planned?

16 SoT/PDS supervisor declaration

I hereby verify that this assessment has been informed by the sources as stated and that the assessment has been discussed with the trainee.

Supervisor's name: _____ Signature: _____ Date: _____

Supervisor's email address: _____

17 Trainee comments

I have sighted the assessment on this form; have discussed the assessment with the supervisor; and am aware that this assessment will form part of my training record.

I agree with the assessment on this form:

Yes No

Trainee comments:

Trainee's signature: _____ Date: _____

Send the completed form within 10 working days of the quarter to:

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