

Practice Development Stage Proposal

The PDS proposal needs to be submitted to the Faculty at least 8 weeks prior to the planned progression to the practice development stage. The proposal should be developed by the trainee in consultation with the PDS supervisor and all placement supervisors. Separate *Placement detail* sections will need to be submitted for each placement and *training site description* sections for units not accredited for training by the Faculty or another medical College.

Supporting documentation to be submitted with the PDS proposal:

- Letter of offer, weekly session plan and position description for each placement
- The PDS supervisor agreement
- A placement supervisor agreement from each placement supervisor.

1. Personal information

College ID: __ / __ / __ / __ / __

Name: _____

If you were granted recognition of prior experience, how many weeks were granted? _____

Practice Development Stage Overview

2. Practice development stage learning goals

What would you like to focus on during your PDS?

How do you see this program helping you to transition to working as a specialist pain medicine physician?

How will you demonstrate what you have learnt?

3. Learning outcomes for the PDS program

Identify the learning outcomes from the *FPM Roles in Practice* (Section 2 of the curriculum) that you will focus on during the PDS. (Learning outcomes for the clinician role are to be addressed within the placement details section.)

No.	Learning Outcome	Role

Multisource Feedback

In which placement is the Multisource Feedback assessment planned to take place? _____

4. Practice development stage supervisor

It is suggested that the trainee and PDS Supervisor meet face-to-face 1-2 times across the stage.

Practice development stage supervisor: _____

The trainee and PDS Supervisor intend to meet to review this plan and discuss progress (circle)

Fortnightly / Monthly / Other: _____

Meetings will usually take place via:

Telephone / Video Conference / Face-to-Face / Other: _____

5. Declarations

Acknowledgement by PDS Supervisor

I have assisted the trainee in the development of this proposal and reviewed learning outcomes, learning activities and assessments and believe the placement/combination of placements is appropriate for completion of the PDS.

Signature: _____ Date: _____

Trainee declaration

The PDS proposal has been prepared in consultation with my placement supervisor(s) and has been approved by my PDS supervisor.

Signature: _____ Date: _____

Following agreement of the PDS proposal with the PDS Supervisor and Placement Supervisors the proposal and supporting documents must be sent to the Faculty for approval.

Faculty of Pain Medicine
PO Box 6095
ST KILDA ROAD CENTRAL
VIC 8008 AUSTRALIA

painmed@anzca.edu.au
fax: +61 3 9510 6786