OVERVIEW OF THE ASSESSMENT PROCESS FOR PREVOCATIONAL TRAINING
Overview of the assessment process for PGY1 and PGY2

The assessment framework for PGY1 and PGY2 provides regular, formal and documented feedback to interns on their performance within each attachment.

Each intern will have a record of learning maintained in an e-portfolio, which will provide a nationally consistent means of tracking their progress and recording their skills and knowledge acquired during PGY1 and PGY2. The e-portfolio will be owned by the intern but will be accessible to the prevocational educational supervisor and the clinical supervisor.

Prior to commencing PGY1

- Interns will have the opportunity to indicate their preferences (in writing) about the learning outcomes and clinical attachments they are particularly interested in. This information will be taken into consideration when allocating the clinical attachments however, an intern’s preferences cannot be guaranteed.
- Once the intern is set up with their e-portfolio login and password they can access the skills log and begin to identify the learning outcomes from the NZCF they have already attained through prior learning, particularly in the 6th year of medical school (trainee intern year).
- Training providers will be able to access the e-portfolio system to allocate the intern’s four clinical attachments.
- Interns will be notified of their prevocational educational supervisor.

PGY1 and PGY2 - Supervision requirements

Prevocational educational supervisors

Interns have a designated prevocational educational supervisor to offer support and provide feedback over the course of PGY1 and PGY2. This could be the same person for PGY1 and PGY2 or a separate one for each.

Beginning of PGY1

Meet to discuss the intern’s e-portfolio, mix of clinical attachments and the learning outcomes in the NZCF, including those attained through prior learning, those which can be attained through the mix of clinical attachments and those which will need to be met through the training providers formal education programme and learning modules.

After each clinical attachment

Meet to discuss the intern’s performance on the clinical attachment, review the e-portfolio, update the PDP and offer support and guidance.

Record comments in the End of Clinical Attachment Assessment form and where there are performance issues, work with the intern and clinical supervisor (on the following attachment) to develop goals in the PDP specifically around the identified areas to focus on for improvement.

Towards the end of PGY1

Meet to assist the intern in developing an appropriate PDP for PGY2.

The goals in the PDP for PGY2 should be targeted around the following:
- outstanding learning outcomes from the NZCF for PGY1
- learning outcomes from the NZCF for PGY2
- areas for improvement identified on previous clinical attachments
- multisource feedback results (not a requirement until November 2015)
- outstanding community based experience (not a requirement until November 2015)
- vocational aspirations.
Advisory panel to make a recommendation about registration in a general scope of practice
The prevocational educational supervisor is required to be a part of the advisory panel that discusses the overall performance of each PGY1, assessing whether they have met the required standard to be registered in a general scope of practice and proceed to the next stage of training.

The advisory panel will make a recommendation to Council, who as regulator is the decision maker.

Beginning of PGY2
Meet to discuss the intern’s e-portfolio specifically the PDP, their mix of clinical attachments and vocational aspirations.

After each clinical attachment
Meet to discuss the intern’s performance on the clinical attachment, offer support and guidance and review and update the e-portfolio.

End of PGY2
At the end of PGY2 the intern should be able to demonstrate through the information in their e-portfolio that they have met the goals in their PDP. At this stage their PDP can be signed-off as complete by the prevocational educational supervisor, enabling the intern to apply to remove the endorsement from their practising certificate as part of the practising certificate renewal process.

Clinical supervisors
Each accredited clinical attachment will have at least one named clinical supervisors responsible for ensuring a quality learning experience for interns. Interns are required to work in accredited clinical attachments in PGY1 and PGY2.

The clinical supervisor will meet with the intern as described below:
- **Beginning of the clinical attachment** - discuss the learning opportunities available on the attachment and to assist the intern develop goals in their PDP. The goals in the PDP must target areas for improvement identified through the previous *End of Clinical Attachment Assessment* form
- **Mid-attachment** - provide feedback on the intern’s progress and performance and review and update the PDP. This is a crucial meeting and the intern should receive feedback on areas for improvement which they can focus on for the remainder of the attachment.
- **End of clinical attachment** - discuss the overall performance on the clinical attachment and review and update the PDP. This will inform the *End of Clinical Attachment Assessment* form.

The clinical supervisor can delegate day-to-day supervision to the registrar and are required to seek feedback on the intern’s performance from the healthcare team to inform the meetings with the intern.

*End of Clinical Attachment Assessment form*
The clinical supervisor must complete an *End of Clinical Attachment Assessment* form and rate the overall performance on the clinical attachment as either:
- Unsatisfactory
- Marginal
- Meets expectation
- Exceeds expectation or exceptional

The clinical supervisor will consult with the healthcare team to inform their assessment. They must also identify three of the intern’s strengths and areas for improvement.

Where there has been a marginal performance on the previous clinical attachment improvement must be observed for the marginal to count as a ‘satisfactory’ clinical attachment.
Requirements for registration in a general scope of practice
1. The (satisfactory) completion of four accredited clinical attachments.
2. The substantive attainment of the learning outcomes outlined in the NZCF (prior learning from the trainee intern year will be taken into account).
3. Completion of a minimum of 10 weeks full-time equivalent in each clinical attachment. Full time is equivalent to a minimum of 40 hours per week.
4. Advanced cardiac life support (ACLS) certification at the standard of New Zealand Resuscitation Council CORE level 7 less than 12 months old.
5. A recommendation for registration in a general scope of practice by a Council approved advisory panel.

Advisory panel to recommend registration in a general scope of practice
Each training provider will establish an advisory panel comprising of the following four members:
- a CMO or delegate who will Chair the panel
- the intern’s prevocational educational supervisor
- a second prevocational educational supervisor who may be from that training institution, or a different training institution
- a lay person.

The use of an advisory panel will add further robustness to the assessment of interns and will ensure that prevocational educational supervisors are better supported, and not placed in the role of advocate and judge.

It is expected that for the vast majority of interns this process will go smoothly and on the receipt of a recommendation from the advisory panel, a general scope of practice application will be processed.

If the advisory panel recommends that an intern has not met the requirements for a general scope of practice then Council can propose to decline the application for a general scope of practice and a formal Council process is initiated.

The advisory panel will hold the responsibility for endorsing the PDP as appropriate for PGY2.

Requirements for PGY2
Interns must work in accredited clinical attachments during PGY2 and complete a PDP.

Before being issued with a practising certificate, interns are required to establish an acceptable PDP for PGY2, to be completed during PGY2. The PDP will be reviewed and endorsed by the advisory panel at the time they consider recommending registration in a general scope of practice.

When an intern is approved registration in a general scope of practice an endorsement related to completing a PDP will be included on their practising certificate for the PGY2 year, under the competence provision of the HPCAA.

The endorsement will be removed at the end of PGY2, if the PDP has been satisfactorily completed. If the PDP has not been satisfactorily completed at that time, then the endorsement will remain.