

JOINT FACULTY OF INTENSIVE CARE MEDICINE
AUSTRALIAN AND NEW ZEALAND COLLEGE OF ANAESTHETISTS
ROYAL AUSTRALASIAN COLLEGE OF PHYSICIANS

THE ROLE OF SUPERVISORS OF TRAINING
IN INTENSIVE CARE MEDICINE

The Supervisor of Training is the Faculty's representative on training in accredited units. The role is an important one, and the Supervisor must have a broad understanding of Faculty affairs. The Supervisor provides liaison between trainees and the hospital authorities (in respect of matters related to training) as well as with the Joint Faculty of Intensive Care Medicine (JFICM). The role of the Supervisor is assuming increased importance, and takes considerable time and training if he/she is to be effective. Support from administration must be available to provide adequate time for Trainee assessments, and provision for attendance at Supervisor's training workshops.

The primary role of the Supervisor is to provide *formative assessment* (feedback on performance). In order to do this, the Supervisor should have regular meetings with the trainee, and organise assessments based on general observation of the trainee's clinical practice.

The Supervisor also has the responsibility to provide *summative assessment* (formal determination of competency). This involves completion of the in-training assessment form at the end of each 6 month period of training.

The Supervisor will often also have a mentor role. This might involve discussion with the trainee regarding their future training and employment. It might also involve assisting the trainee to recognise and deal with personal problems including aspects of inadequate performance.

1. APPOINTMENT

- 1.1 The Supervisor of Training will be nominated by the Director of Intensive Care who will be responsible for notifying the Board of the recommendation. The Supervisor will be appointed by the Board and both the Director and Hospital Administration will be advised of the appointment.
- 1.2 The appointee is required to hold the Diploma of FJFICM or an equivalent qualification acceptable to the Board, and should not be a candidate for any examination.
- 1.3 It is preferable but not mandatory that the Supervisor of Training be an intensive care specialist other than the Director of the Unit, and to have held the Diploma of FJFICM or equivalent for at least three years.
- 1.4 Nomination from the Director of Intensive Care must be accompanied by:
 - a) The curriculum vitae of the Fellow nominated.
 - b) An explanation of reasons for nominating the Fellow, including particular attributes which make the individual suitable.
 - c) If the nominated Fellow is less than 3 years post Fellowship, the Director should explain how support will be offered to help him/her. Some oversight from an experienced Fellow for 1 year is acceptable.

- d) An indication of support for the new Supervisor to attend a Supervisor's Workshop within one year of starting the role.
- e) An indication of the non-clinical time allowed for the Supervisor to perform their role.

2. DUTIES OF SUPERVISORS

2.1 Responsibilities to Trainees

- 2.1.1 To be familiar with the Joint Faculty's Administrative Instructions on Training and Examinations.
- 2.1.2 To advise potential and current trainees on their training, registration requirements, fee payments, examination dates and dates of closure for entries.
- 2.1.3 To be aware of dates and other matters relevant to appropriate courses and to ensure that trainees receive this information.
- 2.1.4 To monitor supervision, experience and fair allocation of duties for trainees and if necessary, to facilitate changes.
- 2.1.5 To liaise with the Director of the Department with respect to trainee duties, supervision, working hours and study time and release for approved courses.
- 2.1.6 To ensure an adequate orientation program is available for trainees.
- 2.1.7 To ensure that there is a structured educational program for trainees.
- 2.1.8 To provide advice, supervision and support for trainees planning, executing and presenting the Formal Project. The Supervisor also has a responsibility to critically review the final manuscript to ensure its suitability for submission.
- 2.1.9 To advise and assist candidates regarding the Fellowship Examination by providing or organising tutorials and trial examinations. After the Examination, to provide feedback from the Chairman of Examinations to the failed candidate and advise on future planning.
- 2.1.10 To undertake in-training assessments in accordance with Policy Document IC-11 'In-Training Assessment of Trainees in Intensive Care Medicine'.
- 2.1.11 To undertake in-training assessments for trainees, who are working in the intensive care unit on training programs other than the JFICM program. Documentation may need to be on forms specific to that particular training program
- 2.1.12 To assist in the identification and counselling of trainees with difficulties, and to initiate remedial action.

2.2 Responsibilities to the Joint Faculty

- 2.2.1 To establish and maintain liaison with other Supervisors of Training.
- 2.2.2 To refer any difficulties in respect of training or trainees to the Executive Officer.
- 2.2.3 To ensure the Board is aware of any senior staffing or other changes in the unit likely to impact on training.
- 2.2.4 To attend any regional meetings or Workshops for Supervisors of Training.

Related Documents:

- IC-3 “Guidelines for Intensive Care Units seeking Accreditation for Training in Intensive Care Medicine”
- IC-4 “The Supervision of Vocational Trainees in Intensive Care ”
- IC-11 “Guidelines for the In-Training Assessment of Trainees in Intensive Care Medicine”

This policy document has been prepared having regard to general circumstances, and it is the responsibility of the practitioner to have express regard to the particular circumstances of each case, and the application of this policy document in each case.

Policy documents are reviewed from time to time, and it is the responsibility of the practitioner to ensure that the practitioner has obtained the current version. Policy documents have been prepared having regard to the information available at the time of their preparation, and the practitioner should therefore have regard to any information, research or material which may have been published or become available subsequently.

Whilst the Joint Faculty endeavours to ensure that policy documents are as current as possible at the time of their preparation, it takes no responsibility for matters arising from changed circumstances or information or material which may have become available subsequently.

Promulgated: February 1994

Reviewed: 1995

Reviewed: 2001

Date of current document: June 2002