

NEUROSURGERY BOARD, COLLEGE OF SURGEONS OF HONG KONG

HIGHER SURGICAL TRAINING IN NEUROSURGERY

TRAINING PLAN

TRAINEE _____

PLACEMENT _____

PERIOD OF PLACEMENT _____

YEAR OF TRAINING _____

ASSIGNED EDUCATIONAL SUPERVISOR _____

OBJECTIVE SETTING (Joint planning between trainee & supervisor at start of training)

PART 1. TOPICS OF INTEREST FOR CURRENT PLACEMENT

PART 2. PROPOSED ACTION PLAN

LEARNING OPPORTUNITIES

WORKPLACE LEARNING

FORMAL LEARNING (Workshops/ Conferences / Mandatory Courses)

SELF-DIRECTED LEARNING/ PROJECT

ASSESSMENT

PROCEDURE-BASED ASSESSMENT (PBA)

TEAM PRESENTATION

CLINICAL AUDIT/ RESEARCH

PART 3. COMMENTS

TRAINEE COMMENTS

EDUCATIONAL SUPERVISOR COMMENTS

PART 4. AGREEMENT OBJECTIVE SETTING SIGN-OFF

TRAINEE _____ **DATE** _____

EDUCATIONAL SUPERVISOR _____ **DATE** _____

MIDTERM PLACEMENT REVIEW

PART 1. REVIEW AND UPDATING OF AGREEMENT DETAILS

REVIEW OF LEARNING OBJECTIVES & TOPICS OF INTEREST

PROGRESS ON LEARNING OPPORTUNITIES

PROGRESS ON ASSESSMENT

PROGRESS ON RESEARCH/ CLINICAL AUDIT

PART 2. COMMENTS

TRAINEE COMMENTS

EDUCATIONAL SUPERVISOR COMMENTS

PART 3. AGREEMENT PROGRESS SIGN-OFF

TRAINEE _____ **DATE** _____

EDUCATIONAL SUPERVISOR _____ **DATE** _____

FINAL REVIEW (Joint review by the trainee & supervisor at the end of training)

PART 1. REVIEW AND UPDATING OF AGREEMENT DETAILS

GENERAL STATEMENT

The training target was achieved (tick where appropriate):

Yes

No, reasons:

COMPLETED LEARNING ACTIVITIES

COMPLETED ASSESSMENTS

CLINICAL AUDIT/ RESEARCH

PART 2. EDUCATIONAL SUPERVISOR COMMENTS (Give reason if marked "No")

1. The trainee's reflective practice was satisfactory. Yes / No

Reason: _____

2. The trainee followed an agreed timetable. Yes / No

Reason: _____

3. There were no unresolved issues. Yes / No

Reason: _____

EDUCATION SUPERVISOR OVERALL SUMMARY STATEMENT

1. OVERALL PERFORMANCE

2. STRENGTHS

3. AREAS FOR DEVELOPMENT

RECOMMENDATIONS (Tick the appropriate option)

Trainee should progress to the next placement with no particular action required.

Trainee should progress to the next placement with targeted training or development in the next placement.

Recommended Targeted Training or Development:

EDUCATION SUPERVISOR SIGN-OFF

_____ **DATE** _____

PART 3. TRAINEE COMMENTS

GENERAL STATEMENT (Tick if agree)

- I attended an induction programme.

- Learning opportunities were provided with an agreed timetable.

- I attended an educational programme.

- There are no unresolved issues.

SELF-REFLECTIVE STATEMENTS

1. SELF-PERCEIVED PERFORMANCE

2. SELF-PERCEIVED STRENGTHS

3. SELF-PERCEIVED AREAS FOR DEVELOPMENT

REQUESTS RELEVANT TO FURTHER TRAINING

TRAINEE SIGN-OFF

I have read the comments from my assigned Educational Supervisor.

_____ **DATE** _____