# STRUCTURED LEARNING CYCLE (SLC) INSTRUCTIONS

#### Introduction:

The objectives set out on this form must be discussed and agreed upon by the Trainee and Supervisor.

The SLC is a means to guide the Trainee's performance.

It should be a clear indication of the expectations that are to be met and therefore should be clear and concise.

### Purpose:

The purpose of the SLC is to:

- Support Trainees who have received an unsatisfactory assessment to set objectives that will assist in achieving a satisfactory term
- Provide Supervisors and Trainers with a list of objectives the Trainee must meet
- Assist Supervisors and Trainers in providing opportunities to the Trainee to assist in meeting the objectives

#### Instructions:

The SLC is to be completed as follows:

- 1. During the meeting held with the Supervisor a discussion will occur regarding the Trainee's assessment and in particular any unsatisfactory or Borderline competencies.
- 2. At the meeting objectives will be discussed and set. These will need to be documented on the SLC. Complete the following columns:

Section	Explanation	
Assessment Area	Specify the competency or Assessment that the objective/goal relates to	
Goal to Achieve	List the specific goal(s) the Trainee must meet to assist in improving in the area listed above.	
	List each goal separately and ensure they are consistent with the training requirements of the Board of Paediatric Surgery	
	The goal also relates to the outcome that is expected	
	<ul> <li>Refer to the Setting SMART Goals Section below for tips on writing goals</li> </ul>	
Performance Indicator	An indicator describes how the objective will be measured and what actions need to be undertaken to achieve the objective	
	Indicators must relate to the specific objective, however there may be more than one indicator	
Timeline	The timeline specifies when the objective should be met	
	Timelines are particularly relevant when relating to courses and/or meetings	

- 3. The Supervisor and Trainee are to meet at least monthly to review the objectives and determine the outcome (see below). They may be required to meet more frequently if recommended by the Board of Paediatric Surgery.
  - a. The outcome is to be rated as follows:

Outcome	Code	Explanation
Exceeds Expectation	E	<ul> <li>Exceeds performance indicator</li> <li>Performs above expected level of training</li> <li>No omissions or errors</li> <li>Requires minimal instruction</li> </ul>
Meets Expectation	М	<ul> <li>Meets performance indicator</li> <li>Performs at expected level of training</li> <li>Minor omissions or errors</li> <li>Requires some instruction</li> </ul>
Progressing toward Expectation	P	<ul> <li>Has not yet met performance indicator</li> <li>Making satisfactory progress</li> <li>Some significant omissions or errors</li> <li>Requires regular instruction</li> </ul>
Not meeting Expectation	N	<ul> <li>Has not yet met performance indicator</li> <li>Making little, slow or inconsistent progress</li> <li>Regular or significant omissions or errors</li> <li>Requires frequent and close instruction</li> </ul>
Not Assessed	NA	Performance indicator not assessed

- **4.** The Trainee should undertake a self-evaluation first and then present this to their Supervisor 24 hours before the meeting. This enables the Trainee to undertake a self-reflection and assess his/her own performance.
- **5.** The Supervisor and Trainee are then to confirm the final outcome.
- 6. The monthly review is also an opportunity to modify, delete or add new indicators to the SLC and to discuss developmental opportunities.
- **7.** At each review both the Trainee and Supervisor have the opportunity to make further comments.
- **8.** The form is to be returned to the Executive Officer following each review.

# **SETTING SMART GOALS**

**SMART** goals - a method that is used to ensure that objectives are written in a manner that are:

**S** = Specific

**M** = Measurable

A = Attainable/Achievable

R = Relevant/Realistic

**T** = Timely

Developing goals that conform to this method is vital in ensuring that Trainees have clear direction and that outcomes can be easily measured.

Specific	<ul> <li>Goals should clearly define what the Trainee is going to be able to do.</li> <li>Specific is the:</li> <li>WHAT are you going to do? Use action words such as direct, organise, coordinate, lead, develop, plan, build.</li> <li>WHY is this important to do at this time? What do you want to ultimately accomplish?</li> <li>HOW are you going to do it? What is the action you will undertake?</li> </ul>
Measurable	<ul> <li>If you can't measure it, you can't manage or assess the performance.</li> <li>When you are measuring whether a goal has been accomplished you are looking for a change or improvement in behaviour or ability.</li> <li>Ask yourself the following question when setting a goal:</li> <li>How will you know when the goal has been achieved?</li> </ul>
Attainable/ Achievable	<ul> <li>Goals must be achievable yet challenging at the same time.</li> <li>A goal needs to stretch the Trainee slightly so that he/she feels that they can achieve it, but that it will also require a real commitment.</li> <li>Attainable, in this case, means "do-able."</li> <li>It means that the learning curve is not a vertical slope and that the skills and/or resources needed to achieve the goal are available.</li> <li>Devise a plan or a way of getting there which makes the goal realistic.</li> <li>The goal needs to be realistic for the Trainee and where they are at in their training.</li> </ul>
Relevant/ Realistic	The goal must relate to the Competency that requires improvement. Ideally goals will be linked to the Specific Specialty Curriculum.
Timely/ Time Bound	<ul> <li>Set a timeframe for the goal.</li> <li>Putting an end point on the goal gives the Trainee a clear target to work towards.</li> <li>Without a time-limit, there's no urgency to start taking action now.</li> <li>Time must be measurable, attainable and realistic.</li> </ul>

## **Performance Indicators**

Each SMART goal developed requires Performance Indicators which outline what behaviours will signify completion/attainment of the goal. There may be more than one Performance Indicator per goal.

# **Examples of SMART Goals, Performance Indicators and Learning Opportunities**

RACS COMPETENCY and BEHAVIOURAL MARKERS	SMART GOAL	PERFORMANCE INDICATOR and LEARNING OPPORTUNITY
Medical expertise		
Demonstrate medical skills and expertise:  Develop extensive depth and breadth of knowledge of the majority of conditions encountered in the Specialty.	Satisfactory management of [name medical conditions to be assessed] to the required SET level and in line with the Specialty Surgical Curriculum by mid-term.	Provides a consistently high standard of peri-operative care Ensures appropriate pain management is instituted in a timely manner Consistently considers the impact of comorbidities on presentation of surgical disease or recovery from surgical intervention Ensures the appropriate use of fluids, electrolytes and blood products including their adjustment according to patient progress Out-patient sessions
Monitor and evaluate care: Regularly review and evaluate clinical practice, surgical outcomes, complications, morbidity and mortality		Participates in surgical audit and peer review, compares own results with department and peers, reviews and discusses 'problem cases' Participates in root cause analyses or other reviews of adverse events
Manage safety and risk: Analyse and review incidents, errors and adverse events to manage patient care		Always undertakes an appropriate preoperative assessment of patients  Demonstrates awareness of unlikely but serious potential problems and prepares accordingly  Uses appropriate aseptic techniques, including regular hand washing, to minimise the risk of infection  Promotes participation in and adherence to surgical safety checklists and other risk reduction strategies

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Judgement – Clinical Decision Making	Judgement - Clinical Decision Making			
Consider options:  Recognises atypical situations and is sensitive to unusual/feasible diagnosis and is aware of what does not fit and the need for a second opinion.		Recognises and articulates problems to be addressed Initiates a balanced discussion of options with relevant team members Seeks second opinion when appropriate for surgeons or patients Respects the patient's right to self-determination		
Plan ahead:  Deals with complexity according to the patient's needs and develops management plans that anticipate potential problems and considers options and solutions.		Plans operating lists taking into account potential delays due to surgical or anaesthetic challenges Shows evidence of having a contingency plan e.g. by identifying and asking for equipment that may be required Is decisive and makes decisions in a timely manner Identifies the level of post-operative care that will be required and ensures that facilities are appropriate		
Implement and review decisions:  Manages complexity and uncertainty, devises alternative strategies to meet patient needs in a timely manner.  Involves support of colleagues.	By the end of rotation, independently formulate [number of] management plans and discuss plans with consultant/senior registrar	Implements decisions within an appropriate timeframe Reconsiders plans in the light of changes in patient condition or when problems occur Calls for assistance if required Routinely follows up investigation results and surgical specimen pathology Feedback meeting		
Technical Expertise				
Develop and maintain dexterity and technical skills:  Adapts their skills in context of each patient procedure and continues to learn new skills.  Can safely and effectively carry out common and more complex procedures and anticipate complications as the primary operator.	Obtain objective feedback on (number of) technical performance in theatre, at the end of procedures.	Goes through the appropriate processes when learning a new technique e.g. visiting a surgical expert or mentoring Participates in simulation exercises or other evaluations of technical skills when appropriate Modifies clinical practice in response to ageing, impairment or limitation of manual dexterity Uses techniques that minimise the risk of needle stick injury for surgeon, assistants and other staff   Arrange to carry out a monthly DOPS Assessment with each consultant.		

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Recognises conditions for which surgery may be necessary: Routinely evaluates their own management plan.		By [time frame], capable of performing [technical skill] with minimal supervision.  Consults with peers and colleagues about complex cases and difficult judgements  Routinely questions and justifies approaches to surgical problems and all aspects of practice  Prioritises need and time for surgery appropriately in emergency and elective situations  Recognises when further assessment, observation or investigation is preferable to immediate surgery
Defined scope of practice – recognises their own limitations:  Acknowledges their own limitations, when to exercise caution and when to seek assistance.  Maintains accurate data on all patients and analyses their own clinical performance and outcomes to encourage continuous improvement.		Take into account local hospital conditions and support services in defining scope of practice Knows own limitations and when to ask for help, referring conditions outside their usual scope Calls on advice and help with difficult problems outside normal scope of practice Modifies scope of practice in accordance with current experience
Professionalism and Ethics		
Has awareness and insight: Recognises colleagues who lack insight or need assistance. Respond positively to complaints and incidents.		Adopts a courteous approach to other staff and patients Responds positively to questioning, suggestion and objective criticism Acknowledges own errors, omissions or uncertainties and recognises when own performance has not met expectations.
Observe ethics, probity and confidentiality: Can identify situations that involve medico–legal issues and manages risk by actively undertaking open disclosure.	Satisfactorily completes on-line course on "sexual harassment prevention for employees" and submits certificate of completion	Discusses, explains and demonstrates acceptable code of conduct, as it relates to the professional behaviour expected of trainees and Fellows of the College.  Discusses, explains and demonstrates acceptable behaviour that is free of bullying, harassment and discrimination in the work and training environment.  Seeks informed consent of the patient before carrying out sensitive or invasive examinations or treatment  Does not make comments with sexual references or connotations  Staff and students report professional and ethical behaviour and

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		practice; receives satisfactory ratings on periodic 360-degree assessment.  Course
Maintain health and wellbeing: Manages fatigue or ill health by taking responsibility to ensure when on duty or on call they are at optimal level of performance.		Has a personal general practitioner and attends regularly and appropriately Enquires after the welfare of colleagues and junior staff Enjoys leisure activities and interests outside surgery and takes regular rest and holidays
Health Advocacy		
Provide care with compassion and respect for patient rights: Communicates in an empathic way respecting patient confidentiality, particularly difficult conversations such as end of life discussions. Arranges referrals and second opinions.	Demonstrate respect of patient's rights, choice, dignity, privacy and confidentiality during all ward rounds.	Encourages patients to seek different views and to exercise choice Treats patients courteously and compassionately, engaging them in decision-making and respecting their choices Exhibits concern Spends additional time where necessary to actively listen to patient and/or relative concerns Observation
Meet patient, carer and family needs: In potential and adverse situations has strategies to manage patient/ family expectations and minimise disruptions such as when lists are rescheduled.		Plans investigations and treatment taking into account the needs of the patient and carers Ensures appropriate communication with family members regarding plans and expectations of surgery Follows up referred patients and seeks reports on progress Allows sufficient time and seeks patient concerns or misgivings regarding treatment
Respond to cultural and community needs: Adapts response by considering the impact of culture and spirituality on patient care.		Strives to improve access to health care services Recognises the wider health needs of the community in an under resourced system Contributes to community education and development Addresses issues raised by people's cultural and linguistic backgrounds
Communication		
Gather and understand communication:	Demonstrate professional and effective oral	Introduces self (name, position and role) at the commencement of interpersonal interactions.

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Seeks timely and accurate information during the consultation in the ward or clinic and in the operating room whilst maintaining emotional balance.	communication with staff and patients at all times.	Communicates to patients and relatives using plain language, avoids use of jargon, enunciates clearly, checks for understanding, listens well and acknowledges concerns, questions, responses, perspectives and needs. Recognises and accommodates for cultural, social, emotional, cognitive and linguistic differences when communicating. Communicates respectfully, politely and professionally irrespective of cultural, religious, gender, social, ethnic, intellectual, age or professional differences. Staff report good communications; receives satisfactory ratings on periodic 360-degreee assessment.  Feedback
Discuss and communicate options: Provide relevant information to relevant personnel to identify and address unspoken concerns.		360-degree assessment involving consultants, junior staff, nurses and non-medical staff. Accepting feedback and actively participating in development of a performance improvement plan Demonstrating improved performance in the specific area of concern.
Communicate effectively: Can recognise and repair communication errors quickly with all parties. Communicates sensitively considering cultural values and beliefs	During patient consultation, ensure open and honest communication is adhered to and ensure any discrepancies are raised and clarified at the time of occurrence.	Accurate and honest communication with all staff members 100% of the time. Immediate acknowledgement by trainee if facts, details or investigation results are not known by the trainee. 360-degree assessment involving consultants, junior staff, nurses and non-medical staff. Demonstrates empathy and compassion when breaking bad news  Mini CEX
Collaboration and Teamwork		
Provide timely documentation and exchange of information: Shares information with the whole team including the family doctor.		Seeks and considers opinions and advice of staff. Recognises when colleagues and staff require assistance and offers help and support as necessary. Acknowledges and responds respectfully and appropriately to concerns, requests, opinions and actions of staff.

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Obtains appropriate informed consent for cases.		Makes the effort to communicate directly and convey critical information to others involved in management (e.g. GP or other specialists) Records contemporaneous and legible notes regarding patient care	
Establish a shared understanding: Briefs and debriefs the team respecting the expertise of others including patient care to other health professionals	During theatre demonstrate strategies to ensure communication towards non-medical staff is in a clear, collaborative and non-aggressive manner.	Approach an appropriate consultant to act as mentor. Discuss approaches with mentor before communication with staff when in doubt of how to approach situation. Provides briefing, clarifies objectives and ensures team understands the operative plan before starting operation Debriefs relevant team members, discussing what went well and problems that occurred  Surgical practice	
Play an active role as a member of a clinical team:  Evaluate your own and the team's performance, providing feedback and including strategies to resolve conflict.		Discusses anticipated admissions with management team Stops operating when asked to by anaesthetist or scrub nurse Informs surgical team of changes in management Arrives reliably on time to facilitate commencement of the operation	
Management and Leadership			
Setting and maintaining standards: Effectively manages resources and people. Follows codes of good clinical practice and adheres to hospital and theatre protocols	Ensure quality and safety by following up on adverse clinical an operating room occurrence	Clearly follows hospital, operating theatre and ward and practice protocols Requires all team members to observe standards (e.g. sterile field, professionalism of staff in clinic or practice) Always prepared to give a considered opinion on medical aspects of management issues  M&M's	
Leading and inspiring others: Assumes leadership to anticipate and make correct decisions in challenging situations including conflict.		Remains calm under pressure working methodically towards effective resolution of difficult situations Resolves team conflicts quickly and appropriately Acts as a role model to others in both technical and non-technical areas of surgery	

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Supporting others: Encourages team participation, provides support and constructive feedback.		Organises operation lists to ensure that there is time for trainees and junior staff to have supervised hands on experience Ensures delegation of tasks is appropriate Encourages and facilitates briefing and debriefing procedures involving the entire team Provides constructive criticism to team members
Scholar and Teacher		
Show commitment to lifelong learning: Identify and pursue learning opportunities in order to improve the depth and breadth of specialty knowledge.	Participate in weekly study group to revise topics through presentations, discussions and being questioned.	Participates regularly in courses and other CPD activities Willingly reconsiders current practice and embraces change when based on sound evidence Engages with staff and encourages their learning, development and career planning Demonstrates awareness of the recent literature and considers implications for clinical and office practice Attendance at weekly study group
Teach, supervise and assess:  Meet the challenge of teaching, supervising and assessing across all nine competencies.		Uses clinical encounters as an opportunity to teach Provides adequate supervision to junior staff Feedback from students and junior staff
Improve surgical practice: Anticipate errors and seek advice. Undertake a clinical review, critically appraising and presenting findings to an informed audience.		Strives to improve surgical practice through research, innovation and audit of outcomes Actively promotes best practice and evidence-based surgery principles Is prepared to alter clinical practice when audit and peer review suggests performance is suboptimal or there are opportunities to improve Always looks for better solutions to improve quality of care