

Clinical supervision plan

A supervisor should complete this document with their registrar following the orientation period in each term. The supervisor first needs to be satisfied that the registrar does not require review of all of their consultations. The plan will need reviewing and revising as the registrar progresses.

Practice name

Registrar name

Date of plan

Primary supervisor name

Stage of training

Other members of the supervisory team

| | Name | Role |
|------------------------------|------|------|
| Other accredited supervisors | | |
| Allied health staff | | |
| Admin and reception staff | | |

When is the registrar expected to call for help?

Document the particular presentations or circumstances when you expect the registrar to call for help. Are there situations where help can be sought at the end of the session rather than at the time of the consultation? The registrar should be encouraged to call for help whenever they feel unable to adequately meet the patient's need.

Who is to be called for help?

Record the current arrangements for who the registrar should call during each session and document what should happen when the first-call doctor is not available. This may include arrangements for after-hours and hospital on-call back up. If there are multiple supervisors, you may wish to use a supervision roster, like the example below.

Supervision roster

| Days | AM | PM | After hours |
|-----------|----|----|-------------|
| Monday | | | |
| Tuesday | | | |
| Wednesday | | | |
| Thursday | | | |
| Friday | | | |
| Saturday | | | |
| Sunday | | | |

How should a call for help be made?

Via phone, knock on door, IT messaging? Consider how will it be explained to the patient and how the request for help should be articulated.