



**College of Intensive Care Medicine
of Australia and New Zealand**
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WCA INFORMATION SHEET FOR TRAINEES AND FELLOWS

ASSESSMENT PURPOSE

The WCA's are an assessment of key skills required of an intensive care specialist. One purpose of this assessment is to determine if the trainee has reached a standard of practice in these skills required of an intensive care specialist. The other purpose of this assessment is for the trainee to be observed and to engage in feedback regarding their clinical performance, in order to improve their practice. Knowledge, skills and behaviours assessed are from the medical expert, communicator, collaborator and professional domains of practice.

The 8 WCA's are:

- Brain Death
- Ventilation
- Pleural drain
- CVC insertion
- Percutaneous Tracheostomy
- Anaesthesia for percutaneous tracheostomy
- Communication: Standard (conducting a family meeting in circumstances of low complexity)
- Communication: Advanced (conducting a family meeting in circumstances of high complexity)

TRAINEES

Only trainees who registered for the training program from 2014 onwards are required to complete the WCA's. However, all trainees are encouraged to use the WCA's as an opportunity for observation in the workplace that will provide a basis for a feedback discussion. Trainees are encouraged to discuss any assessments they would like to complete during their training term with their SOT during the introductory meeting at the beginning of the term. Trainees completing the training program in paediatric intensive care medicine are not required to complete the tracheostomy or anaesthesia for percutaneous tracheostomy WCA's.

ASSESSORS

The WCA's can be completed by any Fellow of the College, not just SOT's. Ideally, a different Fellow should complete each WCA with a trainee.

TIMING AND NUMBER OF ASSESSMENTS

The WCA's can be undertaken at any time during the Core Year 1, Core Year 2, Medicine, Anaesthesia, Rural or Elective terms, or during Non-accredited Clinical Training (NACT) The brain death, ventilation, pleural drain, CVC insertion, and communication – standard WCA's must be successfully completed prior to entering the transition year. The tracheostomy, anaesthesia for percutaneous tracheostomy and communication – advanced WCA's must be successfully completed prior to completion of the transition year. Trainees are encouraged to complete each WCA on multiple occasions through training, including prior to the first part exam, to facilitate feedback and performance development. However, trainees are only required to submit one successful attempt to the College. Trainees are also encouraged to continually practice these skills even once the WCA's have been completed.

PROCESS OF COMPLETION

Trainees are encouraged to identify when they are ready to complete a WCA and notify a Fellow of the College. However, if a Fellow recognises an appropriate case that a trainee may be able to use as a WCA, (particularly those that occur more infrequently in the workplace) Fellows are encouraged to alert trainees to the opportunity. The Fellow should observe all elements of the WCA activity, use follow up questioning and

discussion as required and engage the trainee in a feedback conversation.

The feedback conversation should be conducted close to the time of the encounter, in an appropriate setting. Feedback should be a two-way discussion, and include trainee reflection, discussing the observed performance, discussing clinical reasoning, or thinking behind actions, collaboratively deciding on strategies for trainee performance improvement, and any follow up actions or future observations. The most important points from this discussion should be documented in the form. It is recommended the form is partially completed during the encounter and finalised after the feedback conversation. The form should then be scanned and emailed to assessments@cicm.org.au

COMPLETION OF THE FORM

Performance type

Some of the WCA forms include a selection for simulation or clinical performance. Simulation can be used for the purposes of skill practice and feedback, but clinical performance is required for successful completion of the WCA.

Case complexity and case information to justify complexity

The trainee and Fellow should collaboratively select the case complexity most appropriate (low/medium/high) (for relevant WCA's) and document relevant case information to justify the selected complexity. This assists the trainee to record of the breadth of experiences observed in order to guide future learning. No specific level of complexity is required for successful completion of the WCA's, except for the communication WCA, whereby one is completed in circumstances of low complexity, and one is conducted in circumstances of high complexity. No information that might breach patient confidentiality should be included in this section.

Entrustment Scale

The entrustment scale is a rating scale for overall performance, rated by both the trainee and a Fellow. This allows the trainee to self evaluate, and assists the trainee in understanding their performance on the learning trajectory to becoming an independent practitioner. Descriptions of each level of entrustment are provided on the form.

Actionable feedback

The Fellow should complete this section, noting elements of the encounter completed well and elements that require development. This can be completed both during the encounter and/or during the feedback conversation. The performance indicators listed serve as prompts for feedback, rather than a checklist to be achieved. Not all sections need to be completed, but key information to assist the trainee to develop should be included in the feedback conversation and documented on the form. Feedback conversations should involve two – way dialogue, be respectful, and consider the knowledge, skills and behaviours expected from a trainee at their stage of training. Feedback should also be specific, (for example, “used open and closed questioning when necessary” instead of “good communication with patient”) based on observed behaviour (for example, “conducted unnecessary physical examination procedure” instead of “unsure of physical examination procedures”) and be actionable by the trainee (for example, “allow time for the patient to ask questions” instead of “improve professionalism”).

Trainee reflection, goals and future actions

The trainee should complete this section at the end of the feedback conversation, briefly noting elements completed well or that require development, strategies for performance improvement or features of the case that require further self-directed learning.

SUCCESSFUL COMPLETION OF THE WCA'S

In order to successfully complete this assessment, the trainee must be rated by the Fellow on the entrustment scale as oversight or independent. If the trainee is successful, they do not need to complete any further assessments, however it is recommended that trainees continue deliberate practice of skills. If the trainee does not obtain a rating oversight or independent, the form is submitted, and the trainee is able to complete further assessments until they are successful.

EVALUATION

After completion of the assessment, please give feedback on the form and assessment process by completing an evaluation survey.

When the College receives the assessment form, a confirmation email will be sent which will include a link to the survey. Alternatively, you can access the survey by logging into your [members portal](#) and following the pathway: Online learning > Resources > Workplace Based Assessments.

Feedback from both trainees and Fellows is sought to assist in the evaluation process.