



**Health**  
Western Sydney  
Local Health District

WSLHD Ref: WSBrief21/2088-1

Dr Meredith Thomas, Chief Censor  
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**Via email: [accreditation@ranzcr.edu.au](mailto:accreditation@ranzcr.edu.au)**

Dear Dr Thomas and Prof Benevylet

Thank you for your ongoing assistance to WSLHD in relation to the Royal Australian and New Zealand College of Radiologists' (RANZCR) training site accreditation of the Westmead Hospital Department of Radiology.

Please find attached a further progress report against the recommendations made following the accreditation site visit conducted on 25<sup>th</sup> October 2019. Supporting evidence is attached as appendices.

In further support of the information provided in the attached summary table, WSLHD also seeks consideration of the attached executive statement.

Westmead Hospital and Western Sydney Local Health District (WSLHD) acknowledges that there are specific challenges and unresolved issues which are understandably of concern to RANZCR however strongly advocate that these are not insurmountable and should not represent sufficient grounds to cease accreditation of the site.

We contend that the Department of Radiology at Westmead Hospital is a very high quality training site with recent significant improvements in this training. The Hospital acknowledges that it may be necessary to adjust workforce capacity to meet operational and training site considerations in the near and medium term future. To this end, Westmead Hospital will adjust the intake of Radiology Trainees for the 2022 clinical year to align with the supervision ratio established by the College.

We look forward to continuing to work with you to our shared aim of excellence in training provision. We wish to continue to contribute to the worthy goal of providing highly capable diagnostic and interventional Radiologists for the Australasian health care systems and beyond. Indeed it is in WSLHD's self-interest to continue to train its own future Radiologist workforce.

If you wish to obtain further information, please contact Dr Emma McCahon, Executive Director of Medical Services via email [WSLHD-EDMS@health.nsw.gov.au](mailto:WSLHD-EDMS@health.nsw.gov.au).

Yours sincerely

  
**Graeme Loy**  
Chief Executive

Date: 19-7-21



**Progress Report Debrief Meeting**

Attendees:

Identified Criterion	Recommendation	Action Required	Accountable Officer	Responsible Officer	Progress Update	Supporting Evidence	RANZCR Accreditation Review	Westmead Hospital Executive Comment (November 2020 submission).	Further update as June 2021
1.1.1	Westmead Hospital to address the FTE resources and provide evidence of recruitment of an additional two FTE consultants to address the high clinical workload to enable better access to education, supervision and improve wellbeing of trainees and consultants.	<p>The WSLHD will work towards employing Radiologist Back-Fill positions of current vacancies related to resignations, extended sick leave and long service leave</p> <p>The back-fill Radiologist positions will be a combination of staff specialist and VMO positions. All Radiologists (current and recruitment) will be required to be physically present on-site to provide training for Advanced Radiology Trainees</p>	General Manager, Westmead Hospital	Head of Department of Radiology, Westmead Hospital	<p>WSLHD has approved the recruitment of an 4FTE staff specialists in Radiology but has been to date unsuccessful in recruiting to these positions. Additional complexity is added by payment arrangements outside of award conditions no longer being supported by NSW Health.</p> <p>Alternate approaches (eg VMO recruitment) are being investigated.</p>	<p>WSLHD has approved the recruitment of an 4FTE staff specialists in Radiology but has been to date unsuccessful in recruiting to these positions. Additional complexity is added by payment arrangements outside of award conditions no longer being supported by NSW Health.</p> <p>Alternate approaches (eg VMO recruitment) are being investigated.</p>	<b>Criterion Not Met</b>  Documentary Evidence to be supplied.	<p>Approval for recruitment of additional 4.0 FTE Radiologists. Unsuccessful recruitment thus far.</p> <p>Current vacancy is 6.0 FTE Radiologists. 2.0 FTE (currently on long term leave) expected to recommence Feb 2021. 1.0 FTE has expressed intention to return in 2021.</p> <p>Brief in progress to recruit VMO's to backfill current vacancies (related to resignations, extended sick and long service leave).</p>	<p>A significant amount of recruitment activity has occurred over the past 6 to 12 months to appoint additional consultant staff which has focussed on addressing rolling vacancies due to resignations, extended sick leave and concurrent long services leave. These appointments have been VMO's due to challenge for WSLHD in attracting Staff Specialist candidates currently (*refer below for additional context).</p> <p>This has addressed the gaps in the consultant staff establishment, which was depleted at the time of the Accreditation assessment but is now essentially fully recruited.</p> <p><b>1.1.1 Appendix 1 – Current Radiology Department Senior Medical Staff Establishment.</b></p> <p><b>1.1.1 – Appendix 2 - Summary of recruitment events 2019 to 2021</b></p> <p>Supervision and support of Trainees is an integral part of the VMO appointments made. This has been established in the position description and is demonstrated by through the participation of the VMOs in the tutorial session schedules. The VMOs are also rostered “one on one” with the trainees to the various roles within the department and provide direct supervision and feedback to the trainees as part of the role.</p> <p><b>1.1.1 Appendix 3 – VMO Position description</b></p> <p>A portion of ultrasound training is provided by O&amp;G VMOs and Staff Specialist Nuclear Medicine Physicians in the Department of Nuclear Medicine, PET and Ultrasound, where almost all of Westmead Hospital's ultrasound workload is performed.</p>



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									<p>The workflow is side-by-side reporting and tutorials in Reporting Room, with live case review as required. Tutorials are offered in this space, particularly for those about the sit their 2<sup>nd</sup> part exams. This staffing allocation in this instance is not included in senior staff counting, as these ultrasound specialists are not Radiologists.</p> <p><i>*WSLHD is in a challenging situation in relation in relation to senior medical staff recruitment currently due to significant ongoing industrial relations matters. The current "status quo" order made by the IRC results in considerable additional complexity.</i></p> <p><i>This has impacted on recruitment to Staff Specialist Positions as the current situation means that a newly appointed Staff Specialist will be remunerated and employed under different conditions to existing employees to undertake the same work as per the attached example.</i></p> <p><b>1.1.1 Appendix 4 - decline of Staff Specialist role due to award terms</b></p> <p><i>Uncertainty regarding the outcome of the IRC hearing also impacts future workforce planning as the current staff establishment in terms of FTE allocated to Westmead Hospital may change based on Commission's decision.</i></p>
2.2.7	Westmead Hospital to provide an updated consultant listing indicating Interventional Radiologist FTE commitment.	Provide an updated consultant listing indicating Interventional Radiologist FTE commitment.	Head of Department of Radiology, Westmead Hospital	Head of Department of Radiology, Westmead Hospital	Bruce Dennien – I departed from IR roster, and is requesting reduced FTE Rafid Al-Asady – present 0.7 Luke Baker – present 0.7 Jane Li – present 0.7 Alan O'Grady – present 0.7 Simon So – present 0.7 Philip Vladica – present 0.7	N/A	<b>Criterion Met</b>  <b>However:</b>  <b>Please provide a breakdown of diagnostic reporting hours against the FTE provided</b>	Please see attached evidence	<p>Summary of current Staff Specialist and VMO FTE / Hours with split between Diagnostic and Interventional (where applicable).</p> <p><b>2.2.7 – Appendix 1 – Diagnostic and IR breakdown</b></p> <p>The Radiology trainees confirm that they highly value the training/teaching and supervision offered by the IR Radiologists in the IR service when they are so rostered.</p>

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					Noel Young – present 0.7, moving off IR roster in September. Incoming VMP Radiologists for IR: Drs Izzy GOOLAM and Saif JAMEEL				
3.2.1	Westmead Hospital to provide evidence of onsite tutorials in hours.	Deliver tutorials in hours	DoTs	DoTs	A revised roster has been designed together with the DoT's – Dr Jane Li and Dr Mohamed Nasreddine and the Senior Registrar Dr Ismail Goolam for onsite tutorials	Appendix 1	Criterion Met		
2.2.1	Westmead Hospital to provide evidence of participation within the HETI program.	Provide evidence of participation within the HETI program	ESO	ESO	<p>Please see below the number of Westmead trainees who attended the HETI Part 2 days during 2019. As advised by HETI not all attendance sheets were forwarded to HETI for their records. Available documentary evidence is attached indicating the Westmead trainees who signed on that day.</p> <p>23/7/19 Concord Hospital – 3 Westmead trainees in attendance            26/7/19 Gosford Hospital – 3 Westmead trainees in attendance            29/7/19 Nepean Hospital – 3 Westmead trainees in attendance            16/9/19 RPA Hospital – 4 Westmead trainees in attendance</p>	N/A	Criterion Met		

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					24/9/19 Liverpool Hospital – 3 Westmead trainees in attendance 14/10/19 St George Hospital 4 Westmead trainees in attendance 19/11/19 Westmead Hospital 4 Westmead trainees in attendance 26/11/19 St Vincent's Hospital – 3 Westmead trainees in attendance Westmead DoT's and consultants also participated in the Part 2 HETI days as demonstrated by the Westmead programmes attached from 2019				
2.2.6	Westmead Hospital to address backlog of unreported cases to ensure patient safety.	Address backlog of unreported cases to ensure patient safety.	General Manager, Westmead Hospital	Head of Department of Radiology, Westmead Hospital	With the decreased activity resulting from the COVID-19 pandemic, back-log reporting has been reduced almost to almost zero. As a consequence, the real-time checking and authorisation of Radiology Registrar generated Provisional Reports averages < 2 hrs for ED and < 6 – 8 hrs for In-Patients during normal hours, with overnight work caught up early in the morning.  As Hospital services returns to normal, referral volumes have increased substantially.	Addressed as per item #1	<b>Criterion Met</b> <b>However:</b> Documentary Evidence to be supplied of current backlog of unreported cases.	Please see attached evidence	An external service provider has been contracted to assist with clearance of the unreported backlog. This clearance process is underway, with new procedures now established for this workflow.  Currently, the approval provided is for a one-off backlog clearance, but an opportunity now exists for ongoing use of this mechanism, in conjunction with ongoing review of the number of unreported cases.  As of 16/07/2021 there are currently 690 unreported exams awaiting review. 463 studies are currently with the external agency; these are expected to have turned within a short timeframe.



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					This will be addressed as per Item 1.				
1.6.1	Westmead Hospital to provide dedicated access to A/V facilities within the department to enable trainees to access a Network formal education program.	Provide dedicated access to A/V facilities within the department	Head of Department of Radiology, Westmead Hospital	Head of Department of Radiology, Westmead Hospital	A/V Facilities updated in Seminar Rooms 1 & 2.  Seminar Room 2 awaiting audio hardware to be installed. As an interim measure, a speaker phone is available in the room.	N/A	<b>Criterion Met</b>		
2.2.3	Westmead Hospital to demonstrate allocated protected time for trainees.	Demonstrate allocated protected time for trainees.	Head of Department	DoT	The allocation of Protected Time for DoT's and Advanced Trainees is unachievable in the current climate where there is a shortage of Staff Specialist / VMO Radiologists.  Once the new consultants are employed, this will be a priority. WSLHD recognises the importance of meeting trainee needs defined by RANZCR and is committed to working with the Department to achieve the provision of Protected Time within the next 6 months.	Refer Action Item #1 Appendix 2	<b>Criterion Not Met</b>  <i>Documentary Evidence to be supplied.</i>	Commitment from Westmead Hospital to ensure protected trainee teaching time is a priority.  Additional tutorials for Part 2 exam candidates (including specialty areas)  Teaching and training requirements are included in all Radiologist position descriptions  With addition of SRMO's (see below), 4 hours of protected time will be included in all RANZCR Trainee rosters  Appoint 0.6 FTE Research and Education Support Officer for Radiology in 2021	There is now an average of at least 5 hours of protected teaching per week for the trainees. In the lead up to exams, this is substantially increased with up to 5 hours per day in some instances. A strong program of additional protected time for Trainees ahead of exams has been established, with each candidate allocated 2-4 weeks in total where they are not allocated to any clinical shift to enable this time to be dedicated to exam preparation. This might be a combination of study leave and annual leave at a trainee's preferred time prior to the part 1 RANZCR exam or rostered teaching time for a 2-4 week block between the part 2 written exam and viva exam. This flexible rostering is greatly valued by the trainees. <b>2.2.3 – Appendix 1 – Statements from current trainees</b>  The attached schedules and attendance audit demonstrate that this time is being protected to ensure trainees are able to attend. <b>2.2.3 – Appendix 2 – Tutorial attendance records</b>  Similarly, the strong attendance by Westmead Trainees at the LAN Training session/HETI tutorials (Appendix 4 - Part B – 2.2.3) further demonstrates that the time of the trainees is being



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									<p>protected to ensure they are able to access education activities.</p> <p><b>2.2.3 – Appendix 3 – LAN training sessions records</b></p> <p>Regular sessions include:</p> <ul style="list-style-type: none"> <li>- A daily tutorial run by a consultant and attended by ALL registrars in the department on the day. Most commonly occur at 8 am - 9 am or 1 pm - 2 pm.</li> <li>- Departmental teaching session done once a week - run as a presentation . Most consultants and registrars present on the day attend these. These run for 1 hour from 1 pm - 2 pm (refer attached program).</li> </ul> <p>The effectiveness of the strategies implemented to ensure protected time for trainees is evidenced in the outcomes achieved by the training program.</p> <p>The current senior registrar indicates that in his time in the Westmead training program, commencing in 2016, no candidate has been removed from the program for failing Part 2 exams within the required timeframe, all candidates have passed their part 1 exams, with more than 50% passing part 1 exam at first attempt. Further, more than 50% of candidates pass 7 or more components of the part 2 exam at first attempt and a significant proportion pass 9 or more components at first attempt. This senior registrar achieved a RANZCR medal for his part 2 exam, passing all components at first attempt.</p>
<b>2.2.4</b>	Westmead Hospital to demonstrate allocated protected time for the DoT's	Demonstrate allocated protected time for the DoT's	Head of Department of Radiology, Westmead Hospital	DoT	The Department is endeavouring to ensure that the DoT's have allocated protected time (refer Appendix 8). This is acknowledged as challenging to maintain at current staffing levels. This is another area of priority when additional	Refer Action Item #1	<b>Criterion Not Met</b>  <b>Documentary Evidence to be supplied.</b>	<p>2 x Co-DoT currently.</p> <p>Allocation of five (5) hours per week of Protected Time for each DoT, on days where there are &gt;5 Radiologists rostered.</p> <p>If &lt;5 Radiologists onsite (due to unexpected leave etc), then DoT</p>	<p>The Director of Training position is held by Dr Jane Li and Dr Susan Grayson (reappointed after recent return from leave Dr Alan O'Grady has also applied to be a DoT.</p> <p><b>2.2.4 - Appendix 1 – DoT application for Dr Grayson</b></p> <p>The rostering principle established is each DoT has a minimum of 5 hours</p>

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					recruitment is completed.			will be reallocated to reporting, however, will remain available to Trainees for education and support on an Ad Hoc basis.	protected time allocated per week. This was communicated by the HoD via email. <b>2.2.4 - Appendix 2 – Establishing Rostering Principles for DoT's</b>  It is acknowledged that despite this rostering principle, the time was previously not being protected appropriately due to competing reporting priorities. Now that this has been escalated to Hospital Management, appropriate oversight is in place to provide one session per week for each DoT for each working week. This has been communicated to the DoTs, and the rostering Radiologists with weekly review of this rostering occurring to ensure that the time is protected.  <b>2.2.4 – Appendix 3 – Practice Changes to support DoT protected time</b>
1.1.4	Westmead Hospital to provide evidence of the DoT's continued active participation within the Network Committee.	Provide evidence of the DoT's continued active participation within the Network Committee.	DoTs	DoTs	A summary of Director of Training participation in Network Committees is below: NGC Meeting 11/3/19 – Dr Jane Li in attendance via teleconference NGC Meeting held 3/6/19 – Dr Jane Li & Dr Susan Grayson NGC Meeting 21/8/19 – Dr Susan Grayson in attendance via teleconference NGC Meeting 21/11/19 – Dr Jane Li in attendance via teleconference NGC Meeting held 16/3/20 as a teleconference due to COVID-19 – Dr Jane Li, Dr Susan Grayson & Dr Mohamed Nasreddine in attendance	N/A	Criterion Met		





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					HETI Radiology Directors of Training Meeting 20/3/19 – Dr Jane Li in attendance HETI Radiology Directors of Training Meeting 24/9/19 – Dr Jane Li in attendance RANZCR DoT Introduction Webinar – Webinar – Dr Nasreddine 22 & 24.07.20 1730 – 2130 hrs				
1.3.1	Westmead Hospital to demonstrate compliance to the AMA safe working hours and Public Hospital Medical Officers (State) Award 2018 guidelines to manage fatigue and wellbeing of trainees.  Rostered working hours and any unrostered overtime	Demonstrate compliance to the AMA safe working hours and Public Hospital Medical Officers (State) Award 2018 guidelines to manage fatigue and wellbeing of trainees.	Head of Department of Radiology, Westmead Hospital	DoT Director of Medical Services, Westmead Hospital	The Department's working conditions comply with AMA safe working hours. The Senior Registrar has not identified any infringement in relation to working hours and general consensus is that safe working hours are provided. It is noted that: Shifts are structured and spread amongst registrar cohort Volume of work afterhours is high at Westmead due to being a Level 6 Trauma centre. The volume is highest from 1800 – 2200 hrs on week days, and during the weekends Evening shift - registrars helping at 1600 – 1700 hrs by overlapping shifts After hours shifts are audited to ensure even share amongst registrar cohort. In the past, registrars and DOTs have proposed overlapping	College to confirm with the Advanced Trainees	<b>Criterion in Progress</b>  <b>However: Documentary Evidence to be supplied.</b>	Commitment from Westmead Hospital to encourage trainees to leave work at a reasonable time and discourage unnecessary overtime.  Ensure Trainees are supported to record and submit overtime activity via UROC. Monitored at a District level and breaches of Safe Working hours followed up by Chief Medical Advisor.  Support ongoing checks around roster development for trainees to ensure achievement of reasonable shift coverage.  Brief approved (currently advertised) to recruit SRMO's to reduce non-reporting duties of RANZCR Trainees.  Recruitment to current Radiologist vacancies will likely improve access to senior medical staff from trainees.	Safe working hours are monitored through monthly reporting to the Executive Director of Medical Services. These reports monitor the NSW Health identified safe working hours indicators of: - Shifts exceeding 14 hours - Shifts without a 10 hour break  As these reports are retrospective, they reflect actual hours submitted as worked, rather than those prospectively rostered. Breaches are followed up by the Chief Medical Advisor, however Radiology is not identified as an area of concern for these measures, with minimal breaches occurring.  <b>1.3.3 – Appendix 1 – Safe Working Hours report – Radiology</b>

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					<p>the Radiology Registrar roster from 1800 – 2100 hrs; while this has been considered it is noted that:                      This has the disadvantage of increasing the number of after hour shifts;                      Reduces the access to scheduled morning teaching; and,                      There are insufficient number of Radiology Registrars employed to permit such a roster change                      In summary, due to the current volume of after-hours CT referrals, there is a requirement for an additional junior workforce. The Department has previously proposed the appointment of SRMOs to support cannulation, review patients with allergic reactions/contrast extravasation, filtering radiology referrals, SECTRA documentation, assessing bloods/clinical information eMR – and general support to the evening Radiology Registrar. This proposal was not supported by the Organisation and workforce needs need to be reviewed again with a view to exploring non-SRMO support to the Department.                      All WSLHD junior medical staff are supported to record and submit overtime activity; this is monitored at a District level and any</p>				



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					breaches of safe working hours addressed by the Directors of Medical Services				
1.6.3	Westmead Hospital to approach the Network to allow BreastScreen to apply to become an accredited linked training site.	Approach the Network to allow BreastScreen to apply to become an accredited linked training site	Head of Department of Radiology, Westmead Hospital	DoT	Discussion have occurred with the relevant clinical leadership at BreastScreen to progress an application for recognition from RANZCR to further support radiology training.	Nearing completion	<b>Criterion Met and in progress</b> <b>Application received by College</b>		
1.4.1	Westmead Hospital to demonstrate appropriate stakeholder involvement regarding decision making including but not limited to rotations and equal Network education access.	Demonstrate appropriate stakeholder involvement regarding decision making including but not limited to rotations and equal Network education access.	DoT's LAN 2 Network Director	DoT's LAN 2 Network Director	<p>Westmead, as part of the Network has been a stakeholder in designing a new network education program.</p> <p>Westmead trainees have been rotating to accredited training sites within the network to RPA, Concord, Blacktown Mt Druitt &amp; Orange. Trainees are consulted by way of a preference form, listing the most desired rotation in number order. DoT's are consulted at times for more complex determinations.</p> <p>Rotations to other sites within the network occur in the 2nd year of training. This is dependent upon whether the trainee has passed their Part 1 exam, in which they have 4 attempts in the first 2 years of their training. This places</p>	Appendix 3	<b>Criterion Met</b>		

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					<p>limiting factors as to who can be rotated in the 2nd year, as some may need to complete exams. It is not desirable to send trainees on a rotation whilst exam completion is pending. Whilst we wait for Series 1 exam results around November, advice of rotation letters are often not get sent until December. Trainees who have passed on their first attempt are usually sent on rotation in the beginning of the following year with sufficient notice.</p> <p>Westmead trainees also have access and are rostered to Paediatric teaching as determined and planned by The Children's Hospital at Westmead DoT in conjunction with the NESO in the 3rd training year.</p> <p>Westmead trainees are rostered to BCI, Nuclear Medicine, Obstetrics &amp; Gynaecology &amp; Foetal Wellbeing on a sessional basis (rather than a block) at regular intervals. Further examples of Westmead registrar educational opportunities are attached as Appendix 3 – Registrar Educational Activities.</p>				



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1.6.1	Westmead Hospital to provide adequate and dedicated computer access within the trainee space.	Provide adequate and dedicated computer access within the trainee space.	General Manager, Westmead Hospital	RIS PACS Team	Completed	N/A	<b>Criterion Met</b> <b>However:</b> Documentary Evidence to be supplied.	Please see attached evidence <b>Now Closed</b>	
1.6.1	Westmead Hospital to provide immediate replacement for needed computer screen equipment.	Provide immediate replacement for needed computer screen equipment.	General Manager, Westmead Hospital	RIS PACS Team	Completed	N/A	<b>Criterion Met</b> <b>However:</b> Documentary Evidence to be supplied.	Please see attached evidence <b>Now Closed</b>	
1.6.2	Westmead Hospital to provide evidence of research access and assistance for trainees.	Provide evidence of research access and assistance for trainees.	Head of Department of Radiology, Westmead Hospital	Head of Department of Radiology, Westmead Hospital	There is an existing resource available to provide assistance to trainees.	N/A	<b>Criterion Met</b> <b>However:</b> Documentary Evidence to be supplied.	Please see attached evidence <b>Now Closed</b>	
1.6.3	Westmead Hospital to provide a confirmation of intended equipment and additional FTE for the expanded clinical radiology department.	Provide a confirmation of intended equipment and additional FTE for the expanded clinical radiology department.	General Manager, Westmead Hospital	Head of Department	<p>"Model of Care" and "Workforce Model" completed for the new Clinical Acute Services Building (CASB)</p> <p>WSLHD currently engaged in a range of consultations, including with the relevant Unions in relation to planning for CASB services.</p>	N/A	<p><b>Criterion in Progress</b> <b>However:</b> Documentary Evidence to be supplied.</p> <p>Please provide a detailed update of this criterion</p>	<p>Request for additional Radiologist FTE being progressed</p> <p>CASB opening will be staged. Only ED Radiology service will be opened initially.</p> <p>Please see attached evidence.</p>	<p>Medical Imaging's role in the CASB is currently limited to the Emergency Department. Transfer of services to the new building continues to occur gradually and there are no short term plans for transfer of further imaging services to the CASB.</p> <p>The Emergency Service has the following equipment in operation:</p> <ul style="list-style-type: none"> <li>- CT Scanner</li> <li>- Standard x-ray</li> </ul> <p>These represent transfers of services to the new facility, rather than increase of equipment and demand.</p> <p>The operating model of the Radiology Department has been adapted to ensure that there is supervision and support in place for doctors in training working in the new building as well as in the main facility. The structure of the roster and model of care by the department will continue to adapt as the expansion in the CASB continues.</p> <p>In the new building, the Radiology workflow in ED is side-by-side reporting with a trainee and rostered consultant with or without an SRMO.</p>

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									<p>This structure is providing an effective and efficient care through the Emergency Department and operating in an integrated model working closely with the Emergency and other specialists to support clinical decision making.</p> <p><b>1.6.3 – Appendix 1 – Supervision model &amp; Feedback from Emergency Department director</b></p>
2.2.1	Westmead Hospital to provide evidence of trainee exposure to an adequate and broad case mix.	Provide evidence of trainee exposure to an adequate and broad case mix.	DoTs	DoTs	Please refer to trainee logbooks on TIMS to exposure as assessed by the Directors of Training. Please see a copy of the 2019 radiology trainee rosters which indicate exposure to an adequate and broad case mix	Registrar logbooks on TIMS Appendix 4	<b>Criterion Met</b>  Documentary Evidence Supplied.		
2.2.4	Westmead Hospital to provide evidence of recruitment for one FTE dedicated administration support.	Provide evidence of recruitment for one FTE dedicated administration support.	N DOT	Head of Department of Radiology, Westmead Hospital	<p>WSLHD is supporting the vacancy created by the resignation of the LAN ESO position with 0.4 FTE while a review of the support needs occurs in conjunction with the WSLHD Education Director, the DoT's and Head of Department.</p> <p>Support related to research for the Trainees is provided through the 1.0 FTE Research officer.</p> <p>Meeting to assess support needs scheduled with WSLHD Education Director, the DoT's and Head of Department.</p>	N/A	<p><b>Criterion Not Met</b></p> <p>Documentary Evidence to be supplied.</p> <p>Please provide a detailed update of this criterion</p> <p>Please note that this position is to be adequate to the departments needs and must not include ESO allocated time. The Research role is a separate allocated position as indicated.</p>	<p>Appoint 0.6 FTE Research and Education Support Officer for Radiology in 2021.</p> <p>Radiology Department to work with WSLHD REN to support role.</p>	<p>The Westmead Radiology Department, including the Directors of Training and Trainees have access to administrative support through a team based model to ensure that support is available as required.</p> <p>The recommendation to recruit 1FTE was considered in the context of the existing staff establishment and workflow.</p> <p>A 0.5 FTE clerical resource has been allocated specifically to the DoTs with the DoTs defining their requirements in this regard. Duties include: Providing orientation support and updating orientation materials to all new trainees and Providing admin support to the DoT re: general administrative support ie agendas/meetings Maintaining leave documents and support Maintaining the education program for trainees</p>



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									<p>The Administrative Manager is the central point of contact for all consultants, but particularly the DoT's for all administrative support requests and ensure that support is accessible in the event of leave or other absences.</p> <p>A Westmead Hospital Radiology ESO position has also been created with funding from the Research and Education Network (REN) as a 0.4 FTE Health Manager 2. This role will provide further support to the Directors of Training with both administrative and education-focussed support. This role is part of a wider investment by REN in education support across accredited medical training specialities in WSLHD.</p> <p><b>2.2.4 Appendix 1 – Westmead Hospital Radiology ESO Position Description</b></p> <p>Separately, as previously advised an Administrative Officer within the Radiology Department is specifically allocated to support trainees in relation to research based activities</p> <p><b>2.2.4 – Appendix 3 – confirmation of administrative support for research activities</b></p>
1.2.1	Westmead Hospital to provide evidence of the appropriate use of the Performance and Progression (Clinical Radiology) Policy, the Remediation in Training (Clinical Radiology) Policy and the Withdrawal from Training (Clinical Radiology) Policy.	Provide evidence of the appropriate use of the Performance and Progression (Clinical Radiology) Policy, the Remediation in Training (Clinical Radiology) Policy and the Withdrawal from Training (Clinical Radiology) Policy.	DoT's	DoT's LAN 2 Network Director	There are currently three trainees identified as requiring additional support. Each of these trainees is receiving additional supervision and support in their roles with oversight from the Directors of Training.	N/A  College aware of situation.	<b>Criterion in Progress</b> <b>However:</b> <b>Documentary Evidence to be supplied.</b>  <b>Please provide a detailed update of this criterion</b>	Three (x3) trainees currently identified as requiring additional support and receiving additional supervision and support.  Ensure use of the appropriate policies, to allow for early identification and intervention for Trainees who may require additional support.	Over the past 18 months, Westmead Hospital has managed three trainees identified as requiring additional support via the Performance and Progression (Clinical Radiology) Policy and / or the Remediation in Training (Clinical Radiology) Policy. The "Withdrawal from Training (Clinical Radiology)" Policy has not been applied during this time period, however the DoT's are aware of the policy requirements.  <b>1.2.2 – Appendix 1 – correspondence examples</b>  As a NSW Health facility, Westmead Hospital also applies the principles established in NSW Policy "Managing for Performance" when introducing

Identified Criterion	Recommendation	Action Required	Accountable Officer	Responsible Officer	Progress Update	Supporting Evidence	RANZCR Accreditation Review	Westmead Hospital Executive Comment (November 2020 submission).	Further update as June 2021
									additional supervision, support or learning plans for trainees.  <b>1.1.2 – Appendix 2 – NSW Health Policy “Managing for Performance”</b>
3.1.4	Westmead Hospital to provide evidence for each current trainee or a trainee on rotation within the past two years that has been provided Patient Safety Training.	Provide evidence for each current trainee or a trainee on rotation within the past two years that has been provided Patient Safety Training.	DoTs	DoTs	N/A	Appendix 5	<b>Criterion in Progress</b> <b>However:</b>  Documentary Evidence to be supplied.  Please provide a detailed update of this criterion	DoT's to ensure all Trainees complete appropriate training on commencement, and ongoing training as required. DoT's to monitor and provide additional training as required.	WSLHD notes that access to training records is only available for current trainees  <b>3.1.4 , 3.1.5, 3.1.6 – Appendix 1 - Trainee Completion Progress – Training Modules</b>
3.1.5	Westmead Hospital to provide evidence for each current trainee or a trainee on rotation within the past two years that has undertaken the Report Writing Module.	Provide evidence for each current trainee or a trainee on rotation within the past two years that has undertaken the Report Writing Module.	DoTs	DoTs	N/A	Appendix 5	<b>Criterion in Progress</b>  <b>However:</b> Documentary Evidence to be supplied.	DoT's to ensure all Trainees complete appropriate training on commencement, and ongoing training as required.  DoT's to monitor and provide additional training as required.	WSLHD notes that access to training records is only available for current trainees  <b>3.1.4 , 3.1.5, 3.1.6 – Appendix 1 - Trainee Completion Progress – Training Modules</b>
3.1.6	Westmead Hospital to provide evidence for each current trainee or a trainee on rotation within the past two years that has been provided Non-Medical Expert Role training	Provide evidence for each current trainee or a trainee on rotation within the past two years that has been provided Non- Medical Expert Role training	DoTs	DoTS	N/A	Appendix 5	<b>Criterion in Progress</b>  <b>However:</b> Documentary Evidence to be supplied.	DoT's to ensure all Trainees complete appropriate training on commencement, and ongoing training as required. DoT's to monitor and provide additional training as required.	WSLHD notes that access to training records is only available for current trainees  <b>3.1.4 , 3.1.5, 3.1.6 – Appendix 1 - Trainee Completion Progress – Training Modules</b>
3.3.1	Westmead Hospital to provide job descriptions stating the responsibilities of Clinical Supervisors in regard to supervision, training and teaching.	Provide job descriptions stating the responsibilities of Clinical Supervisors in regard to supervision, training and teaching.	DoT's  Head of Department of Radiology, Westmead Hospital	DoT's LAN 2 Network Director	Please see attached a draft from the RANZCR Supervision & Training Policy specifically designed for instruction to clinical supervisors, which will now be included in orientation for new consultants and distributed to current consultants  Please note that all the positions descriptions for all Radiology Consultants as part of their job	Appendix 6  Copy of Position Description for Diagnostic and  Interventional Radiologists available upon request	<b>Criterion Met</b>  Documentary evidence supplied.		



Identified Criterion	Recommendation	Action Required	Accountable Officer	Responsible Officer	Progress Update	Supporting Evidence	RANZCR Accreditation Review	Westmead Hospital Executive Comment (November 2020 submission).	Further update as June 2021
					descriptions include under Key Accountabilities a specific section dedicated to Supervision, Training and Education				
3.3.1	Westmead Hospital to provide opportunities for Clinical Supervisors to undergo training to understand this role and responsibilities as it relates to training, teaching and assessment of trainees.	Provide opportunities for Clinical Supervisors to undergo training to understand this role and responsibilities as it relates to training, teaching and assessment of trainees.	General Manager	Head of Department of Radiology, Westmead Hospital	<p>Opportunities to participate in upcoming HETI state-wide +roadshows during 2020 will be offered in preparation for the new training and assessment reform where clinical supervisors will have a greater role than they currently do. WSLHD will also provide copies of the RANZCR Supervision &amp; Training Policy to each Clinical Supervisor to support understanding of the role. It is noted that the Directors of Training have attended the RANZCR DoT workshops.</p> <p>While not a specific recommendation, the report also makes a statement relating to on-call workload for trainees and references inadequate consultant support. This position is not supported by WSLHD and it is noted that: There is no on-call for Radiology Registrars: they are rostered to shifts i.e. there is no on-call workload for Radiology Registrars with the exception of</p>	Registrar Rosters Discussion with Senior Registrar	<p><b>Criterion in Progress</b> <b>However:</b> <b>Documentary Evidence to be supplied.</b></p> <p>Please provide a detailed update of this criterion</p>	<p>Roadshow has been delayed</p> <p>Opportunity will be provided when Roadshow and Webinars occur</p> <p>Emails have been sent to all clinical supervisors from Head of Department regarding role and responsibilities</p>	<p>Opportunities for clinical supervisors to provide mentorship and guidance to each is available through regular and ad-hoc Staff Specialist meetings, at which time various trainee issues could also be discussed. Minutes of Staff Specialist meetings are not provided as part of this response to the College as content covers material outside the scope of this response.</p> <p>A regular meeting (monthly) has been established between the Directors of Training and the Director of Education commencing from August 2021. This will provide a forum in which mentorship and guidance is available and needs of supervisions more broadly can be identified and addressed.</p> <p>HETI on behalf of NSW provides a range of resources and courses to support supervisors. These are available to all supervisors working within NSW Health:</p> <p><a href="https://www.heti.nsw.gov.au/education-and-training/courses-and-programs/basic-physician-training-in-nsw/clinical-supervision-resources">https://www.heti.nsw.gov.au/education-and-training/courses-and-programs/basic-physician-training-in-nsw/clinical-supervision-resources</a></p> <p>The RANZCR Supervisor Roles and Responsibilities resource has been provide to all supervisors in Radiology Department</p> <p><b>3.3.1 - Appendix 1 – distribution of RANZCR Supervisor Roles and Responsibilities resource</b></p>

Identified Criterion	Recommendation	Action Required	Accountable Officer	Responsible Officer	Progress Update	Supporting Evidence	RANZCR Accreditation Review	Westmead Hospital Executive Comment (November 2020 submission).	Further update as June 2021
					Senior Registrars contributing to MRI and IR on-call. The Department does not believe that there is inadequate Consultant support. Radiologists either come in after-hours for interventional work or are available at any time through the night or weekends for consultation				
1.5.1	Westmead Hospital Executive to provide a Risk Management Plan regarding high clinical workload and consultant and trainee wellbeing with clearly identified milestones that will be monitored.	Risk Management Plan to be provided by Westmead Hospital Executive	Exec DMS	Director of Education	WSLHD's Director of Education will convene a monthly meeting with DOTs and Trainee representatives to monitor training in line with WSLHD's Education Quality Framework (Appendix 2 – WSLHD Education Quality Framework). This regularly meeting will cover: Learning environment and culture (and will include discussion about hours and wellbeing) 2) Education Governance and Leadership (DoT and supervisor concerns) Supporting and empowering learners (access to educational activities and exam preparation) Supporting and empowering educators (any concerns from educators) Implementing curricula and assessments (update from DoT's and Network Director) This meeting will report monthly to the Executive Director of Medical Services		<b>Criterion Not Met</b>  Documentary Evidence of a Risk Management Plan to be supplied.  Please provide a detailed update of this criterion	Please see the attached Westmead Hospital Radiology Department Risk Management Plan	<b>1.5.1 – Updated Risk Management Plan</b>  Staff Specialists have good access to leave, including study leave with the possible exception of those on the IR roster where service availability 24x7 is of critical importance. Note of recent attempts to recruit additional IR VMO capacity.  Staff Specialists may participate in backlog reporting via a specific agreement. Some Staff Specialists elect to participate while others prefer not to allocate personal time towards such paid activities (fee-for-service).  External reporting via tele-Radiology has commenced, for the first time at Westmead.  Backfilling extended leave via fixed term Staff Specialist recruitment has not been possible recently, leading to backfilling by VMO staff.

Identified Criterion	Recommendation	Action Required	Accountable Officer	Responsible Officer	Progress Update	Supporting Evidence	RANZCR Accreditation Review	Westmead Hospital Executive Comment (November 2020 submission).	Further update as June 2021
1.5.2	Conduct a debrief session with all consultants and trainees discussing outcome of accreditation site visit – evidence to be supplied to support.					N/A	<b>Criterion Not Met</b>  <b>Documentary Evidence to be supplied.</b>	Outcome of accreditation site visit relayed via Individual discussions and Group Staff Specialist meetings. Plan to discuss with Trainees when Trainees return from exam leave.	Session held 16/06/2021 hosted by Westmead Hospital Chief Medical Advisor and WSLHD Clinical Network Director for Diagnostics  <b>1.5.2 – Appendix A - Feedback session with Registrars</b>
<b>6 Month Actions</b>									
1.1.1	Westmead Hospital to address the FTE resources and provide evidence of recruitment of an additional two FTE consultants to address the high clinical workload to enable better access to education, supervision and improve wellbeing of trainees and consultants.	Address the FTE resources and provide evidence of recruitment of an additional two FTE consultants to address the high clinical workload to enable better access to education, supervision and improve wellbeing of trainees and consultants.	General Manager	Head of Department of Radiology, Westmead Hospital	Refer to Item 1	Refer to Item 1	<b>Criterion Not Met</b>  <b>Documentary Evidence to be supplied.</b>	Approval for recruitment of additional 4.0 FTE Radiologists. Unsuccessful recruitment thus far.  Current vacancy is 5.0 FTE Radiologists. 2.0 FTE (currently on long term leave) expected to recommence Feb 2021. 1.0 FTE has expressed intention to return in 2021.  Brief in progress to recruit VMO's to backfill current vacancies (related to resignations, extended sick and long service leave).	As per first item.

## 1.1.1 – Appendix 2 - Summary of recruitment events 2019 to 2021

## Summary Radiology Recruitment Episodes - 2018 to 2021 (Summary from Senior Medical Recruitment Unit)

Advertised Position	Facility	Classification	Applicants	MDAAC	Appointed	HPECM ref
Permanent 1.0FTE Staff Specialist	Westmead	Staff Specialist	2	20-Jun-18	Dr Alan O'Grady	wsbrief17/1987
Fixed Term 1.0FTE Postgraduate Fellow Angiography - Clinical Year 2019-2020	Westmead	PGF	6	05-Sep-18	Dr Gabrielle James	WSBRIEF18/1452
Fixed Term 1.0FTE Postgraduate Fellow MRI Clinical Year 2019-2020	Westmead	PGF	2	05-Sep-18	Geetha Ramaswami	WSBRIEF18/1444
Permanent 1.0FTE Staff Specialist Radiology	BMDH	Staff Specialist	4	19-Sep-18	Basim Sulieman Alqutawneh	WSBRIEF18/1066
Fixed Term Visiting Medical Officer (2 positions)	BMDH	VMO	2	17-Oct-18	Dr Sonia Kariappa & Tamara Nowland	wsbrief18/1702
Fixed Term 1.0FTE Postgraduate Fellow MRI Clinical year 2020-2021	Westmead	PGF	2	02-Oct-19	Dr Mitchell Yam	19/51107
Fixed Term 1.0FTE Postgraduate Fellow Angiography - Clinical Year 2020-2021	Westmead	PGF	3	06-Nov-19	Dr Saif Jameel	WSBRIEF19/1661
Permanent 1.0FTE Staff Specialist	Westmead	Staff Specialist	8	11-Mar-20	Dr Roberta Tse	WSBRIEF19/2943
1.0FTE Fixed Term Staff Specialist no suitable applicants so e list of the above position was used to appoint Dr Ramaswami	Westmead	Staff Specialist	0	25-Mar-20	Geetha Ramaswami	WSBRIEF20/571
Fixed Term 1.0FTE Staff Specialist	Westmead	Staff Specialist	1	N/A	Department advised they did not want to proceed with this position	WSBRIEF19/3395
3.0FTE Permanent Staff Specialists	Westmead	Staff Specialist	N/A	N/A	Tender process run to identify recruitment agencies to support the IR recruitment. Department decided not to proceed with appointment and decided to advertise VMOs (below) as an alternative	WSBRIEF19/990
Fixed Term 1.0FTE Postgraduate Fellow MRI - 14 August 2020 - 31 January 2021	Westmead	PGF	Elibility list fr	12/08/2020	Dr Sarita Bahure	WSBRIEF20/2344
Fixed Term 1.0FTE Postgraduate Fellow Angiography - Clinical Year February 2021 - February 2022	Westmead	PGF	5	21/10/2020	Dr Ismail Goolam	WSBRIEF20/1594

## Appendix 1 - Part B

Fixed Term 1.0FTE Postgraduate Fellow MRI - Clinical Year February 2021 - February 2022	Westmead	PGF	10	21/10/2020	Dr Saif Jameel	WSBRIEF20/1594
Quinquennial Visiting Medical Officer	Westmead	VMO	5	09/12/2020	Dr Kim Son Nguyen Dr Mitchell Yam Dr Geetha Ramaswami Dr Roberta Man Yee Tse	WSBRIEF20/3475
Quinquennial Visiting Medical Officer	Westmead	VMO	6	21/04/2021	Dr Ismail Goolam Dr Radha Krishna Popuri Dr Saif Jameel Dr Suang Kiat Lau Dr Suchitra Mantrala	WSBRIEF20/3475

**From:** [Yogendra Narayan \(Western Sydney LHD\)](#)  
**To:** [Yogendra Narayan \(Western Sydney LHD\)](#)  
**Cc:** [Yogendra Narayan \(Western Sydney LHD\)](#)  
**Subject:** FW: Re: LETTER OF OFFER | Permanent 1.0FTE Staff Specialist - Radiology - Westmead Hospital - WSLHD  
**Attachments:** [image001.png](#)

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-----Original Message-----

**From:** [REDACTED]  
**Sent:** 29 March 2020 6:26 PM  
**To:** Yogendra Narayan (Western Sydney LHD) [mailto:[\[REDACTED\]](#)]  
**CC:** George Mcivor (Western Sydney LHD) [mailto:[\[REDACTED\]](#)]  
**Subject:** Re: LETTER OF OFFER | Permanent 1.0FTE Staff Specialist - Radiology - Westmead Hospital - WSLHD

Hi Dr Narayan,

Thank you for offering me this position and for correcting my post-fellowship pay grade. I acknowledge that WSLHD is moving away from the longstanding award arrangements that the current radiology staff specialists have been under. However, I regretfully cannot accept any offer with inequitable conditions to my fellow consultants.

I will be required to upskill and eventually take a lead in thoracic imaging which encompasses taking responsibility for high resolution CT reporting, CT coronary angiogram, cardiac MRI, etc. I will also be required to work closely with the respiratory department, and run a weekly thoracic MDT and the regular interstitial lung disease meeting. Furthermore, with my breast imaging skills, I anticipate that I will also be involved in breast MDTs. I believe my skillset justifies equal conditions to the colleagues I will be working with everyday, some of whom may not have the same meeting workload or responsibility for more than one subsection of the department.

The current award being offered would be close to half of my current salary in private practice. I am not prepared to take such a significant reduction with the current Award that is being offered despite my desire to work at Westmead Hospital. I believe that having different radiologists in the same department on different pay deals is inherently inequitable and can foster an atmosphere of resentment. I ask that I be appointed with the exact same conditions as the other consultants. Any other working arrangement does not make sense to me on any level.

I would like to finish on a positive note by saying how excited I would be to come back to Westmead, which I loved working in and feels like a second home. I am genuine that I want to be there for the long-term and continue seeing it go from strength to strength. I hope that I can do that and thank you for your consideration.

Kind regards,  
[REDACTED]

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**From:** Yogendra Narayan (Western Sydney LHD)  
**Sent:** Tuesday, 24 March 2020 2:42 AM  
**To** [REDACTED]  
**Cc:** George Mcivor (Western Sydney LHD)  
**Subject:** LETTER OF OFFER | Permanent 1.0FTE Staff Specialist - Radiology - Westmead Hospital - WSLHD

Dear Dr [REDACTED],

I refer to the letter of offer for Permanent 1.0FTE Staff Specialist - Radiology - Westmead Hospital. I also note your email on Thursday, 19 March to Shalamah Tautaiolefue, Medical Workforce Co-ordinator informing that you are not prepared to accept the offer as it stands.

I note that one of the concerns expressed is in relation to the level and grade that has been offered, and that you are seeking an appointment at Staff specialist Year 4. Based on your attainment of Fellowship status in 2015 and your employment record including the periods spent in post-fellowship training and independent practice as a specialist since your appointment to Royal North Shore as Staff Specialist in Feb 2017, we are able to amend the offer to commence as Year 4 Staff Specialist.

However, with regard to your second concern about the employment arrangements, I note your preference to be appointed in accordance with the now obsolete Radiologists Agreement. Western Sydney Local Health District no longer offers new Radiologists appointments under the Radiology Agreement and we only offer appointments with remuneration and working hours in line with the Staff Specialists Award.

I look forward to being advised if you intend to accept the offer as a Staff Specialist Year 4 in accordance with the standard Award conditions which has been offered.

Kind regards

(Yogi)

Dr Yogendra Narayan  
Senior Medical Advisor  
Medical and Dental Workforce Services  
Building 63 "Gnara-La"  
Cumberland Hospital  
5 Fleet Street  
North Parramatta NSW 2151  
Phone: [REDACTED] / Mobile: [REDACTED]  
Facsimile: [REDACTED]  
E-Mail: [REDACTED]



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## 1.1.1 - Appendix 1 - Staff Establishment

Name	FTE/ Hrs (Staff Specialists)*	Sessions (VMO's)	FRANZCR (Y/N)	IMG (Y/N)	Skill Set / Area of Interest
Bruce DENNIEN	1		Y	N	General
Kevin NG	1		Y	N	Neuroradiology

Lavier GOMES	1		Y	N	Neuroradiology
Michael VOWELS	1		Y	N	General, Breast imaging
Nisha KARUNARATNE	1		Y	N	Spine, Body imaging
Raymond LEE	1		Y	N	Body, Neuroradiology
Rob SCHAMSCHULA	1		Y	N	General, Breast imaging
Robert DE COSTA	1		Y	N	MSK imaging
Susan GRAYSON	1		Y	N	Breast, Body, Paediatric,
Tony PEDUTO	1		Y	N	MSK, Body imaging
Mohamed NASREDDINE	1		Y	N	Chest, Breast imaging
George McIVOR	0		Y	N	Administration, Cardiac, On
Farah AL-MAHDAWI	0.15	2	Y	N	Breast, General
Aruni THAMBUGALA	0.52	4	Y	N	Paediatric, Neuroradiology
Kim-Son NGUYEN	0.13	4	Y	N	Body, chest imaging
KP WONG	0.15	2	Y	N	1 session General (retired IR)
Mitchell YAM	0.32	2	Y	N	Breast, General
Suang Kiat LAU	0.32	2	Y	N	General
Suchitra MANTRALA	0.32	2	Y	N	General
Geetha RAMASWAMI	0.64	4	Y	N	Breast, General
Roberta Man Yee TSE	0.32	2	Y	N	Breast, General
Mark Soo	0.15		Y	Y	Resigned, hours re-allocated to

Name	FTE/ Hrs	Sessions	FRANZCR (Y/N)	IMG (Y/N)	Skill Set / Area of Interest
Jane LI	1		Y	N	3 sessions IR, Body imaging,
Luke BAKER	1		Y	N	3 sessions IR, Body imaging

Philip VLADICA	1		Y	N	2 sessions IR, Body, Cardiac
Simon So	1		Y	N	2 sessions IR, Body imaging
Alan O'Grady	1		Y	N	3 session IR, Body imaging,
Noel Young	0.5		Y	N	IR transitioning to DR
Izzy Goolam	0.44				
Saif Jameel	0.64				

\* Under the radiology agreement which is current subject to Industrial Relations processes, the Staff Specialists appointed under the agreement are required to attend Westmead Hospital 0.7 FTE





## Position Description

<b>Designation:</b>	<b>Radiologist</b>
<b>Classification:</b>	<b>Visiting Medical Officer</b>
<b>Award:</b>	<b>Public Hospitals (Visiting Medical Officers Sessional Contracts) Determination 2014</b>
<b>Department:</b>	<b>Radiology</b>
<b>Location:</b>	<b>Westmead Hospital</b>

### PRIMARY OBJECTIVES

Westmead Hospital is a large medical teaching and research campus

The Visiting Medical officer will be required to provide Interventional Radiology and diagnostic radiology duties. The role also participates on the on call roster and is rostered during normal hours to Auburn Hospital to Diagnostic Radiology duties on a 1:8 rotation. Applicants with Interventional Radiology (IR) skills will be rostered to IR and Diagnostic Reporting, and placed on the IR after-hours roster.

Appointees may be required to participate in other on call rosters at nominated facilities within Western Sydney Local Health District as determined by clinical operations.

Senior Medical and Dental staff at WSLHD take a collective responsibility for the provision of excellence in patient care, teaching and training of health professionals and trainees, and conducting research reflecting the highest standard of professional care and conduct.

Senior medical and dental staff are required to commit to create a workplace culture that supports positive and respectful behaviours, high performance, and accountability. The Senior Medical Staff Charter outlines behaviours expected with interactions with patients, colleagues, and the Western Sydney Local Health District.

Visiting Medical Officer is responsible for the maintenance of quality with all aspects of their service delivery and the efficient use of resources within the Western Sydney Local Health District.

Duties will include:

- Provision of diagnostic and interventional services at a high standard and in a safe, timely and cost effective manner.
- Potential appointment to a Director of Training position for the RANZCR.
- Potential appointment to Section Head of an Imaging Modality
- Assignment of other Radiology orientated duties at the discretion of the Clinical Director
- Provision of excellent clinical documentation
- Communicating well with referring doctors and work well as part of a team.
- Demonstrating a commitment to optimising the cost-effective services
- Providing occasional leave relief for other consultants as directed.
- Participation clinical governance, medico-legal and patient complaint matters as required.

Successful applicants will be assigned to running Clinical Meetings or MDT's at the direction of the Clinical Director.

The role includes undergraduate and post graduate teaching, research and supervision. Participation in teaching and training for all levels of undergraduate and postgraduate medical education is expected, as required by the Head of Department, as well as contribution to the multi-disciplinary professional development of other clinical staff within the department.

Supervision of JMO's is conducted according to AHPRA, WSLHD, Ministry of Health, and specialist medical College guidelines, and includes supervision of JMO's clinical shifts, as well as individual JMO mentoring responsibilities and completion of supervision reports as required for AHPRA, WSLHD, and Colleges.

Other duties include active participation in administrative activities, as required by the Head of Department, including Nursery Management Committee, Equipment Committee, and rostering tasks.

### LOCAL BACKGROUND & ENVIRONMENT

Western Sydney Local Health District is responsible for the provision of health services to the local government area comprised of Auburn, Baulkham Hills, Blacktown, Holroyd, and Parramatta and tertiary care. These services are provided through a number of hospital and community-based facilities located strategically across the District.

Western Sydney Local Health District is committed to achieving continuous quality improvement in client services within a Quality Management framework, with a supporting Strategic Plan aimed at the continuous improvement of all facilities. The District has individual facilities located at Westmead, Cumberland, Auburn, Blacktown and Mount Druitt.

All hospitals provide a range of both in-patient and outpatient services to clients both from within the boundaries of the District and cross border flows. In addition to this, there are a number of facilities strategically located across the District that provide primary health care services to the community.

**The primary goal of Western Sydney Local Health District is:** To improve the health of, and ensure comprehensive health care services for, our community.

#### **Its principal purposes are:**

- To provide relief to sick and injured persons through the provision of care and treatment.
- To promote, protect and maintain the health of the community.

### PROFESSIONALISM AND RESPECTFUL CONDUCT

Senior Medical and Dental staff at WSLHD take a collective responsibility for the provision of excellence in patient care, teaching and training of health professionals and trainees, and conducting research reflecting the highest standard of professional care and conduct.

Senior medical and dental staff are required to commit to create a workplace culture that supports positive and respectful behaviours, high performance, and accountability. The Senior Medical Staff Charter outlines behaviours expected with interactions with patients, colleagues, and the Western Sydney Local Health District

KEY INTERNAL & EXTERNAL RELATIONSHIPS	
Head of Department of Radiology. The position also has professional accountability to the General Manager.	Direct report
Key internal relationships within the department and the facility are with: <ul style="list-style-type: none"> <li>Medical consultant colleagues</li> <li>Junior medical officers</li> <li>Nursing staff, allied health staff, and administration staff.</li> </ul>	Essential to the safe and effective day-to-day operations across the department.  Collective responsibility for the provision of excellence patient care, teaching and training of health professionals and trainees.
Consumer organisations and non-government organisations such as charitable organisations, Universities and Specialist Medical Colleges	Assistance in establishing and maintaining relationships Participation in the education program for medical students Supervision of JMO's: both JMO's RANZCR Accredited Radiology Registrars and non-accredited SRMO's.

#### SUPERVISION ARRANGEMENTS

The Senior Medical Officer is responsible for the clinical supervision of JMO's when on service. Such supervision includes contribution to formal staff appraisals at regular intervals and provision of more informal feedback as required.

#### CHALLENGES / PROBLEM SOLVING

The position of Senior Medical Officer requires skills in complex clinical problem-solving, negotiating challenges in balancing clinical need with resource availability according to budget and infrastructure allocation.

Working within multidisciplinary teams is a key requirement of the role.

#### DETAILED WORK DUTY SCHEDULE

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Operating Rooms	<i>n/a</i>	<i>n/a</i>	<i>n/a</i>	<i>n/a</i>	<i>n/a</i>		
Diagnostic Radiology	0900 – 1700	0900 – 1700	0900 – 1700	0900 – 1700	0900 – 1700		
Research							
Other - please specify							
Teaching	<i>As rostered</i>	<i>As rostered</i>	<i>As rostered</i>	<i>As rostered</i>	<i>As rostered</i>		
On Call	1700 – 0900	1700 – 0900	1700 – 0900	1700 – 0900	1700 – 0900	1700 – 0900	1700 – 0900
On Call - Frequency (e.g. 1in3)	<b>1:8</b>						

## MAJOR ACCOUNTABILITIES

### Clinical

- Clinical privileges will be exercised within the scope of practice granted by the Medical & Dental Appointments Advisory Committee (Credentials Sub-Committee).
- Provide high quality care for patients and their families/significant others.
- Ensure adequate communication occurs between clinicians within the organisation.
- Ensure detailed patient care treatment plans are in place to support the timely management of patients.
- Ensure a high standard of clinical record documentation is maintained. This includes utilisation of paper based systems and electronic mail compatible with hospital systems, and keeping appropriate databases up-to-date.
- Ensure effective patient handover and transfer of care.
- Ensure appropriate communication occurs with medical practitioners external to the organisation regarding patients under their care, including providing detailed discharge summaries as indicated.
- Provide reliable and responsive on-call services (when privileged to do so). Attendance when requested is to be within thirty minutes of call, or otherwise within a timeframe consistent with the needs of the specialty as determined and approved by the facility.

### Research and Teaching

- Maintain an intellectual environment within the Department conducive to high quality medical research.
- Apply principles of evidence based medicine to clinical practice and contribute to the advancement of medical practice.
- Participate in research projects, implemented within the Department or in collaboration with research staff external to the Department, which have been approved by the Clinical Director and the appropriate regulatory committees.
- Encourage peers, registrars and resident medical officers to participate in research projects.
- Organise, deliver, or participate in education sessions within the Department.
- Teach and train effectively at all levels of undergraduate and postgraduate education where required.
- Provide “on the job” training of registrars and resident medical officers during ward rounds, outpatient clinics, operating/ procedural sessions as appropriate to the specialty.

### Supervision

- Fulfil responsibilities as mentors for medical students and resident medical staff assigned to the department as required. This includes participation in staff appraisal at regular intervals particularly in relation to registrars & resident medical staff.
- Supervise the junior medical staff and provide regular teaching and education in accordance with Health Education and Training Institute guidelines.
- Provide supervision and support for Fellows and Trainees in post-graduate medical programmes including University programmes, Colleges and the Western Division of General Practice.

### Quality

- Strive for continuing improvement in all aspects of work and that of colleagues, mindful of priorities and high standards.
- Actively support a “no blame” culture throughout the organisation.
- Undertake clinical governance activities, risk management and audit in order to improve the quality of service provision.
- Participate in all aspects of the clinicians’ toolkit to assess the quality of service being provided view to maintaining, assessing or improving standards of care, teaching or research. These quality improvement or other Departmental and Hospital processes, may include, but not be limited to Peer review; Morbidity & mortality meetings; Adverse and near miss events monitoring; Clinical risk management and Root cause analysis.
- Assist the Department Head to implement and develop appropriate clinical outcome measures.
- Actively participate in clinical practice improvement projects as identified through peer comparisons aimed at improving quality of both service delivery and patient care within the department.

## PERFORMANCE MANAGEMENT

- Participate in the Western Sydney Local Health District Performance Review and Management Framework for Senior Medical Practitioners. This is mandatory for all Senior Medical Practitioners in Western Sydney Local Health District as outlined in the Staff Specialist's (State) Award and PD 2011\_010 for Visiting Medical Practitioners.
- Demonstrate clinical competency within the clinical privileges granted by Western Sydney Local Health District.
- Provide satisfactory demonstration that quality assurance, quality improvement and risk management obligations are met.

## OTHER

- Attend and contribute to department / business meetings.
- Participate in activities within the facility or network especially in relation to the departmental specialty.
- Participate with the Department Head in strategic planning for clinical service provision in the Western Sydney Local Health District, as appropriate.
- Participate in strategic planning for Research and Educational activities at the University of Sydney and its Western Clinical School, as appropriate.
- Ensure that the Facility Managers, Clinical Directors and Department Heads are fully informed in a timely fashion of any known circumstances relating to matters within the Department, or any other activities of staff thereof, so they are aware early of incidents leading to adverse publicity or legal action against staff of the Western Sydney Local Health District.
- Provide appropriate, timely returns to the Department Head indicating external funding, research output and publications, external consultation, professional work and liaison activities and Quality Assurance activities, as required by these bodies.
- Provide responses as required in respect to internal hospital enquiries relating to the carrying out of these duties, patient complaints, Health Care Complaints Commission matters, and medico legal requests.
- Assist the Department Head in recruitment activities as required.

## SKILLS & ATTITUDES REQUIRED FOR PRACTICE AS A SENIOR MEDICAL PRACTITIONER

### 1. Skills

- Have the breadth of knowledge and skill to take responsibility for safe clinical decisions in their specialty.
- Able to communicate effectively with patients including the management of difficult and complex situations with patients and their families, to advise them appropriately and to manage complaints effectively.
- Skilled in building relationships of trust with patients and their families/supporters, through effective interpretation skills, a courteous and compassionate approach, and respect for their privacy, dignity and cultural and religious beliefs.
- Effective interpersonal skills that bring out the best in colleagues, to resolve conflicts when they arise and to develop and maintain productive working relationships within the team.
- Capacity to work cooperatively with other staff and practitioners and support teams in a complex multidisciplinary team environment.
- Capable of judging competence and professional attributes in others.
- Demonstrate skills and strategies in the process of feedback to colleagues and trainees, ensuring positive and constructive outcomes.
- Demonstrate the potential or capability to teach and train effectively at all levels of undergraduate and postgraduate education where required.
- Able to take responsibility for clinical governance activities, risk management and audit in order to improve the quality of service provision.
- Have the self-awareness to acknowledge where the limits of competence lie and when it is appropriate to refer to other senior colleagues for advice.

## 2. Attitudes

- Support teams that bring together different professions and disciplines and other agencies, to provide high quality health care.
- Strive for continuing improvement in all aspects of work and that of colleagues, mindful of priorities and high quality ethical care and standards.
- Ability to comply with the service objectives of Western Sydney Local Health District.
- Cognisant of the need to implement cost-effective therapies and evidence based practice into daily work.
- Act in personal and professional life to maintain public trust in the profession.
- Promote behaviour within the Department, which is respectful of all clinicians.
- Promote behaviour within the Department, which is respectful of the individual patient, their family, and their rights.
- Act quickly and effectively if there is reason to believe that their own or a colleague's conduct performance or health may put patients at risk.
- Commitment to own relevant professional and self-development.
- Commitment to clinical research and quality improvement.
- Commitment to education, training and the career development of junior medical staff and other undergraduate and postgraduate clinical staff.

### **EO RESPONSIBILITIES**

- Must adhere to the EEO policies and procedures of Western Sydney Local Health District.

### **WORK HEALTH & SAFETY RESPONSIBILITIES**

- Demonstrate commitment to WH&S through personal involvement.
- Do not put yourself or others at risk and cooperate with the employer.
- Follow the employer's reasonable instructions concerning health and safety in the workplace.
- Participate in WH&S education and training.
- Report any workplace hazards.
- Assist in the WH&S Risk Management process, by being actively involved in the identification, assessment and control of hazards and associated risks in the workplace.
- Assist managers in establishing and monitoring WHS Consultation in the workplace.

### **WESTERN SYDNEY LOCAL HEALTH DISTRICT SMOKE FREE POLICY**

- Western Sydney Local Health District is a smoke free environment.

### **CODE OF CONDUCT AND ETHICS**

- Comply with NSW Ministry of Health Code of Conduct.

### **PRIVACY STATEMENT**

The Privacy and Personal Information Protection Act 1998 (PPIPA) and the Health Records and Information Privacy Act 2002 (HRIPA) requires all staff/contractors and other health service providers who, in the course of their work, have access to personal information (PPIPA) or personal health information (HRIPA), to comply with the requirements of these Acts and the NSW Health Privacy Manual (PD2005\_593). It is the responsibility of all staff to ensure privacy of personal information by following Western Sydney Local Health District privacy and security procedures in relation to any personal information accessed during the course of their duties.

**RISK MANAGEMENT OBLIGATIONS**

- Report any risks identified (e.g. WHS, Corporate, Clinical, Financial, Service Delivery) and request a formal risk assessment to ensure the protection of the District, its staff, its patients and its resources.
- Notify all incidents identified using IIMS.
- Participate in the investigation of incidents as required.
- Participate in the implementation of recommendations arising from investigation of incidents.
- Encourage colleagues to notify incidents identified.

**ADDITIONAL FACTORS**

- The ability to relocate to other sites within Western Sydney Local Health District may at times be required.

**DECLARATION**

As the incumbent of this position, I have noted this Job Description and agree with the contents therein. I understand that other duties may be directed from time to time.

I also agree to strictly observe the Local Health District's policy on confidentiality of patient information or such sensitive information that I may come across in the course of my employment.

Incumbent:

Manager:

.....

.....

Signature:

Manager Title

Directorate / Department

Western Sydney Local Health District

## JOB DEMANDS CHECKLIST

This checklist is completed for each position. It reflects the physical, environmental, and psychological demands of positions. When completing the checklist, please make sure you align the demands in accordance with the [WSLHD Work Health and Safety Policy](#).

When considering the frequency of the job demand, you have the option of selecting:

- **Infrequent** – intermittent activity for a short time on a very infrequent basis
- **Occasional** – activity exists for up to 1/3 of the time when performing the job
- **Frequent** – activity exists between one third and two thirds of the time when doing the job
- **Constant** – activity exists for more than 2/3 of the time when performing the job
- **Repetitive** – activity involves repetitive movement
- **Not Applicable** – activity is not required to perform the job

You can make further comments under each section.

Physical Demands	Frequency
Comments:	
<b>Sitting</b> - remaining in a seated position to perform tasks	Frequent
<b>Standing</b> - remaining standing without moving about to perform tasks	Frequent
<b>Walking</b> - Floor type: even / uneven / slippery, indoors / outdoors, slopes	Frequent
<b>Running</b> - Floor type: even / uneven / slippery, indoors / outdoors, slopes	Infrequent
<b>Bend/Lean Forward from Waist</b> - Forward bending from the waist to perform tasks	Repetitive
<b>Trunk Twisting</b> - Turning from the waist while sitting or standing to perform tasks	Repetitive
<b>Kneeling</b> - remaining in a kneeling posture to perform tasks	Not Applicable
<b>Squatting / Crouching</b> - Adopting a squatting or crouching posture to perform	Not Applicable
<b>Leg / Foot Movement</b> - Use of leg and / or foot to operate machinery	Frequent
<b>Climbing (stairs/ladders)</b> - Ascend / descend stairs, ladders, steps	Infrequent
<b>Lifting / Carrying</b> - Light lifting & carrying: 0 - 9 kg	Infrequent
<b>Lifting / Carrying</b> - Moderate lifting & carrying: 10 - 15 kg	Not Applicable
<b>Lifting / Carrying</b> - Heavy lifting & carrying: 16kg & above	Not Applicable
<b>Reaching</b> - Arms fully extended forward or raised above shoulder	Infrequent
<b>Pushing / Pulling / Restraining</b> - Using force to hold / restrain or move objects toward or away from the body	Infrequent
<b>Head / Neck Postures</b> - Holding head in a position other than neutral (facing	Frequent
<b>Hand &amp; Arm Movements</b> - Repetitive movements of hands and arms	Frequent
<b>Grasping / Fine Manipulation</b> - Gripping, holding, clasping with fingers or hands	Frequent
<b>Work At Heights</b> - Using ladders, footstools, scaffolding, or other objects to perform	Not Applicable
<b>Driving</b> - Operating any motor powered vehicle	Not Applicable
Sensory Demands	Frequency
Comments:	
<b>Sight</b> - Use of sight is an integral part of work performance e.g. Viewing of X-Rays, computer screens	Constant
<b>Hearing</b> - Use of hearing is an integral part of work performance e.g. Telephone	Frequent
<b>Smell</b> - Use of smell is an integral part of work performance e.g. Working with	Not Applicable
<b>Taste</b> - Use of taste is an integral part of work performance e.g. Food preparation	Not Applicable
<b>Touch</b> - Use of touch is an integral part of work performance	Frequent
Psychosocial Demands	Frequency
Comments:	
<b>Distressed People</b> - e.g. Emergency or grief situations	Infrequent



<b>Aggressive &amp; Uncooperative People</b> - e.g. drug / alcohol, dementia, mental	Infrequent
<b>Unpredictable People</b> - e.g. Dementia, mental illness, head injuries	Infrequent
<b>Restraining</b> - involvement in physical containment of patients / clients	Infrequent
<b>Exposure to Distressing Situations</b> - e.g. Child abuse, viewing dead / mutilated	Frequent
<b>Environmental Demands</b>	<b>Frequency</b>
Comments:	
<b>Dust</b> - Exposure to atmospheric dust	Not Applicable
<b>Gases</b> - Working with explosive or flammable gases requiring precautionary	Infrequent
<b>Fumes</b> - Exposure to noxious or toxic fumes	Not Applicable
<b>Liquids</b> - Working with corrosive, toxic or poisonous liquids or chemicals requiring	Infrequent
<b>Hazardous substances</b> - e.g. Dry chemicals, glues	Infrequent
<b>Noise</b> - Environmental / background noise necessitates people raise their voice to	Not Applicable
<b>Inadequate Lighting</b> - Risk of trips, falls or eyestrain	Frequent
<b>Sunlight</b> - Risk of sunburn exists from spending more than 10 minutes per day in	Not Applicable
<b>Extreme Temperatures</b> - Environmental temperatures are less than 15C or more than 35C	Not Applicable
<b>Confined Spaces</b> - areas where only one egress (escape route) exists	Frequent
<b>Slippery or Uneven Surfaces</b> - Greasy or wet floor surfaces, ramps, uneven	
<b>Inadequate Housekeeping</b> - Obstructions to walkways and work areas cause trips and falls	Not Applicable
<b>Working At Heights</b> - Ladders / stepladders / scaffolding are required to perform	Not Applicable
<b>Biological Hazards</b> - e.g. exposure to body fluids, bacteria, infectious diseases	Frequent

*As the incumbent of this position, I confirm I have read the Position Description and Job Demands Checklist, understand its content and agree to work in accordance with the requirements of the position.*

**Employee Name:** \_\_\_\_\_

**Employee Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Manager's Name:** \_\_\_\_\_

**Managers Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_



Psychosocial Demands	Frequency
Comments:	
<b>Distressed People</b> - e.g. Emergency or grief situations	<b>Frequent</b>
<b>Aggressive &amp; Uncooperative People</b> - e.g. drug / alcohol, dementia, mental	<b>Frequent</b>
<b>Unpredictable People</b> - e.g. Dementia, mental illness, head injuries	<b>Frequent</b>
<b>Restraining</b> - involvement in physical containment of patients / clients	<b>Infrequent</b>
<b>Exposure to Distressing Situations</b> - e.g. Child abuse, viewing dead / mutilated	<b>Occasional</b>
Environmental Demands	Frequency
Comments:	
<b>Dust</b> - Exposure to atmospheric dust	<b>Infrequent</b>
<b>Gases</b> - Working with explosive or flammable gases requiring precautionary	<b>Frequent</b>
<b>Fumes</b> - Exposure to noxious or toxic fumes	<b>Not Applicable</b>
<b>Liquids</b> - Working with corrosive, toxic or poisonous liquids or chemicals requiring	<b>Not Applicable</b>
<b>Hazardous substances</b> - e.g. Dry chemicals, glues	<b>Not Applicable</b>
<b>Noise</b> - Environmental / background noise necessitates people raise their voice to	<b>Occasional</b>
<b>Inadequate Lighting</b> - Risk of trips, falls or eyestrain	<b>Occasional</b>
<b>Sunlight</b> - Risk of sunburn exists from spending more than 10 minutes per day in	<b>Infrequent</b>
<b>Extreme Temperatures</b> - Environmental temperatures are less than 15C or more than 35C	<b>Infrequent</b>
<b>Confined Spaces</b> - areas where only one egress (escape route) exists	<b>Infrequent</b>
<b>Slippery or Uneven Surfaces</b> - Greasy or wet floor surfaces, ramps, uneven	<b>Occasional</b>
<b>Inadequate Housekeeping</b> - Obstructions to walkways and work areas cause trips and falls	<b>Occasional</b>
<b>Working At Heights</b> - Ladders / stepladders / scaffolding are required to perform	<b>Not Applicable</b>
<b>Biological Hazards</b> - e.g. exposure to body fluids, bacteria, infectious diseases	<b>Frequent</b>
<p><i>As the incumbent of this position, I confirm I have read the Position Description and Job Demands Checklist, understand its content and agree to work in accordance with the requirements of the position.</i></p> <p><b>Employee Name:</b> _____</p> <p><b>Employee Signature:</b> _____</p> <p><b>Date:</b> _____</p> <p><b>Manager's Name:</b> _____</p> <p><b>Managers Signature:</b> _____</p> <p><b>Date:</b> _____</p>	

# Policy Directive



Ministry of Health, NSW  
73 Miller Street North Sydney NSW 2060  
Locked Mail Bag 961 North Sydney NSW 2059  
Telephone (02) 9391 9000 Fax (02) 9391 9101  
<http://www.health.nsw.gov.au/policies/>

## Managing for Performance

<b>Document Number</b>	PD2016_040
<b>Publication date</b>	12-Sep-2016
<b>Functional Sub group</b>	Personnel/Workforce - Conditions of employment Personnel/Workforce - Learning and Development
<b>Summary</b>	This Policy Directive identifies the key features to be reflected in all NSW Health organisation policies on performance management, building on the core requirements of Government Sector Employment legislation and the related essential elements outlined in the NSW Public Sector Performance Development Framework, including requirements for managing unsatisfactory performance.
<b>Replaces Doc. No.</b>	Managing for Performance [PD2013_034]
<b>Author Branch</b>	Workplace Relations
<b>Branch contact</b>	Workplace Relations 02 9391 9378
<b>Applies to</b>	Local Health Districts, Board Governed Statutory Health Corporations, Chief Executive Governed Statutory Health Corporations, Specialty Network Governed Statutory Health Corporations, Affiliated Health Organisations, Public Health System Support Division, Community Health Centres, Dental Schools and Clinics, NSW Ambulance Service, Ministry of Health, Public Health Units, Public Hospitals, NSW Health Pathology, Cancer Institute (NSW)
<b>Audience</b>	All staff, all managers / supervisors, human resources
<b>Distributed to</b>	Public Health System, Health Associations Unions, NSW Ambulance Service, Ministry of Health
<b>Review date</b>	12-Sep-2021
<b>Policy Manual</b>	Not applicable
<b>File No.</b>	15/1200
<b>Status</b>	Active

### Director-General

This Policy Directive may be varied, withdrawn or replaced at any time. Compliance with this directive is **mandatory** for NSW Health and is a condition of subsidy for public health organisations.

## MANAGING FOR PERFORMANCE

### PURPOSE

This Policy Directive sets out key features to be incorporated in all performance management systems across NSW Health.

It reflects the core requirements of the [Government Sector Employment \(GSE\) Rule 35](#) and their essential elements as outlined in the [NSW Public Sector Performance Development Framework](#). The core requirements and essential elements are supported by a number of Guides and other tools developed by the Public Service Commission for use by government sector agencies.

All NSW Health organisations are expected to review their existing local policies and practices to ensure they are consistent with this policy.

### MANDATORY REQUIREMENTS

The following key features are to be incorporated into all NSW Health 'managing for performance' systems:

- The six core requirements of [GSE Rule 35](#) and their essential elements as outlined in the [NSW Public Sector Performance Development Framework](#)
- Procedures for managing unsatisfactory performance in line with [GSE Rule 36](#) and [Section 68 of the GSE Act](#), and including identification and management of any risks posed by the unsatisfactory performance
- Clearly defined objectives linked to corporate objectives, priorities and strategies
- Consultation with staff, unions and other relevant stakeholders during development and implementation
- Consideration during the system's development and implementation of the special needs of staff with literacy issues; from racial, ethnic and ethno-religious minority groups; with disabilities; or of Aboriginal and Torres Strait Islander descent
- Clearly listed responsibilities and accountabilities for all parties
- A statement outlining the Chief Executive's commitment to all staff that the 'managing for performance' process will be equitable and confidential
- Integration with other workforce management processes, including recruitment and selection, orientation, career development, and grievance management
- Measurable performance criteria which focus on achievements and outcomes, and reflect the capabilities required by the role, as well as its context and scope
- A focus on performance improvement including strategies for mentoring, coaching and career development
- An implementation and communication strategy to ensure all staff are aware of the organisation's performance management process

- Appropriate training for all staff (including integration of relevant information into orientation and workplace induction)
- A mechanism to regularly evaluate performance management to ensure it meets stated objectives for the organisation
- Appropriate business processes to populate and maintain the performance fields in StaffLink for each staff member (including Staff Specialists) in order to facilitate any mandatory reporting on staff performance.

## IMPLEMENTATION

This Policy Directive applies to all staff employed in any body or organisation under the control or direction of the Minister for Health or the Secretary of NSW Health, other than members of the NSW Public Sector Senior Executive (PSSE) or Health Executive Service (HES) (from 1 January 2017 the Health Service Senior Executive (HSSE)), visiting practitioners, other independent contractors, agency staff supplied by another employer, students, volunteers, or external researchers who are not part of the government sector.

The [Staff Specialist \(State\) Award](#) contains specific provisions about annual performance agreements and reviews for Staff Specialists. Where they differ from this policy directive, the Award provisions take precedence.

Performance management requirements for visiting practitioners are contained in [PD2011\\_010 Visiting Medical Officer \(VMO\) Performance Review Arrangements](#); and for members of the PSSE and the HES/HSSE in [PD2016\\_019 Executive Performance Management](#).

The policy may be varied in respect of its application to casual and temporary staff who are employed for less than three months, but setting and clarifying expectations, monitoring, and acknowledging good performance should apply as a minimum.

**Senior executives** are required to ensure that:

- This policy is communicated to all supervisors / managers involved in managing staff
- Performance management systems are linked with organisational planning, systems and processes
- All facilities within each NSW Health organisation meet, or have plans in place to actively work towards meeting, the requirements of this policy.

**Workforce Directorates / Human Resources Departments** are required to:

- Ensure provision of advice, information and training as necessary to support effective implementation of this policy.

**Supervisors / Managers** are responsible for:

- Building capability to ensure continual development and success
- Setting clear performance objectives for their staff / team, monitoring their performance, and providing regular and ongoing feedback to them (including structured conversation about performance and development needs)

- Honestly and openly addressing unsatisfactory performance.

**All members of staff** are responsible for:

- Developing their own performance with the support of their manager
- Actively contributing in all aspects of performance management, including openly receiving feedback and providing open and honest feedback to their manager.

## REVISION HISTORY

Version	Approved by	Amendment notes
September 2016 PD2016_040	Deputy Secretary, Governance, Workforce and Corporate	Updated to ensure compliance with Government Sector Employment legislation regarding managing unsatisfactory performance and reflect changed reporting requirements.
October 2013 (PD2013_034)	Director General	Updated to comply with the NSW Public Sector Performance Development Framework.
January 2005 (PD2005_180)	Director General	New policy

## ATTACHMENT

1. Managing for Performance: Procedures.

**Managing for Performance**



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**Issue date:** September-2016

PD2016\_040

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## 1 BACKGROUND

### 1.1 About this document

The alignment of workforce capabilities with performance and organisational objectives is a NSW government sector wide priority.

Section 67 of the *Government Sector Employment Act 2013* (GSEA) requires all government sector agencies to have a performance management system that meets the core requirements of [Rule 35 of the Government Sector Employment \(GSE\) Rules 2014](#) and their essential elements as outlined in the [NSW Public Sector Performance Development Framework](#).

The core requirements and essential elements apply to all NSW Health organisations, and accordingly, have been incorporated into this policy framework for NSW Health.

It is recognised that a single 'model' is unlikely to be readily applicable in NSW Health due to the diversity of occupational groups, and the need to build commitment to performance management processes within each NSW Health organisation by involving key players in the design and review of systems. However, NSW Health organisations must ensure that local policies and practices reflect the principles, core requirements and essential elements outlined in this Policy Directive, the *Government Sector Employment legislation* and the [NSW Public Sector Performance Development Framework](#).

### 1.2 Key definitions

Capabilities – Knowledge, skills and abilities that a staff member must demonstrate to perform their role effectively.

Capability Framework – Refers to the NSW Public Sector Capability Framework, which describes the core capabilities and behaviours for all public sector staff. The Framework supports all workforce management and development activities, including role design, recruitment, performance management, learning and development, and strategic workforce planning.

NSW Health organisation - For the purposes of this policy directive, any body or organisation under the control and direction of the Minister for Health or the Secretary, NSW Ministry of Health.

Staff member - For the purposes of this policy directive, any person who is employed in any body or organisation under the control and direction of the Minister for Health or the Secretary, NSW Ministry of Health, excluding members of the NSW Senior Executive Service or Health Executive Service, visiting practitioners, other independent contractors, agency staff supplied by another employer, students, volunteers, or external researchers who are not part of the government sector.

## 2 ESSENTIAL ELEMENTS OF A 'MANAGING FOR PERFORMANCE' SYSTEM

### 2.1 The Public Sector Performance Development Framework

[GSE Rule 35](#) and the [NSW Public Sector Performance Development Framework](#) mandate that all performance management systems in the NSW government sector must contain the following six core components and essential elements:

	Component	Essential elements
CONTINUOUS	<b>Set and clarify expectations</b> Collaborative process between manager and employee to set performance expectations and clarify them on an ongoing basis.	<ul style="list-style-type: none"> <li>Each employee has an up-to-date description of their role, including required capabilities and responsibilities, linked to the organisation's strategy.</li> <li>All employees understand the public sector values, the capabilities required of them in their roles, and the deliverables for which they are accountable.</li> <li>All employees are aware of the codes of conduct, policies, procedures and standards they are expected to observe.</li> <li>All new employees (in the sector or the team) undergo a review process that includes informal and formal reviews.</li> </ul>
	<b>Monitor</b> Ongoing joint evaluation of progress towards achieving work goals and expectations, involving regular two-way feedback.	<ul style="list-style-type: none"> <li>All employees have regular opportunities to discuss their work with their manager and receive informal feedback on their performance (either individually or as a team).</li> <li>All employees have the opportunity to provide informal and formal feedback (through a structured assessment method) to their manager.</li> </ul>
CYCLICAL	<b>Plan and review</b> Collaborative process between manager and employee to plan performance, linked to corporate objectives, with periodic reviews of progress towards achieving work goals.	<ul style="list-style-type: none"> <li>All employees have an annual formal performance agreement with their manager that sets out individual performance objectives linked to corporate objectives as well as the capabilities they are required to demonstrate in their role.</li> <li>Performance agreements for all executives who have financial accountability include mandatory performance objectives set out in Appendix A.</li> <li>Performance agreements for all employees who have responsibility for managing people include mandatory performance objectives set out in Appendix B.</li> <li>All employees have a formal performance review at least once a year.</li> <li>Formal performance reviews are to inform all assessments for incremental salary progression; payment of increases determined by the Statutory and Other Officers Remuneration Tribunal (SOORT); and any contract renewal.</li> </ul>
	<b>Develop</b> Collaborative process to identify and develop employees' capabilities with periodic reviews of progress.	<ul style="list-style-type: none"> <li>Development plans are based on the capabilities required in the role, the employees' existing capabilities, and his/her performance objectives and/or career goals.</li> <li>Progress against development plans is formally reviewed at least once a year.</li> </ul>
	<b>Recognise</b> Regular practice of recognising employee efforts and excellent performance outcomes and achievements.	<ul style="list-style-type: none"> <li>Agencies have guidelines in place to help managers appropriately recognise employees at the local level.</li> </ul>
EVENT-DRIVEN	<b>Resolve unsatisfactory performance</b> Process of addressing employee unsatisfactory performance.	<ul style="list-style-type: none"> <li>Managers promptly work with the employee to understand and resolve instances or patterns of unsatisfactory performance.</li> </ul>

For detailed information and further guidance, refer to the following Public Service Commission documents available at the [Public Service Commission's Performance Development Framework website](#):

- NSW Public Sector Performance Development Framework (mandatory), including mandatory performance objectives for everyone managing people
- Managing for Performance – Guide for Human Resources (support only)
- Managing for Performance – Guide for Managers (support only)
- Managing for Performance – Guide for Employees (support only).

The website also provides access to other supporting material, including password protected access for HR staff to a Communications and HR toolkit.

## **2.2 Additional guidance for the NSW Health context**

### **2.2.1 The NSW Health workforce**

In making provision for an on-going local process for managing performance in NSW Health organisations, consideration should be given to the nature of the workforce (such as the proportion of staff working in a 24/7 environment involving shift work).

In some cases staff on rotating shifts may work for a number of different managers in a given period. In these instances the essential elements identified in 2.1. could be implemented in a way that can accommodate feedback from a number of managers while giving responsibility for face-to-face feedback to one manager.

### **2.2.2 Providing performance feedback**

Given the diversity of functions and roles carried out within a NSW Health organisation, the design of the performance review processes for particular categories of staff may be flexible and vary from facility to facility, while meeting the broad public sector requirements outlined in 2.1.

### **2.2.3 Linking pay and performance**

Notwithstanding that the [NSW Public Sector Performance Development Framework](#) would require that formal performance reviews are to inform all assessments for incremental salary progression, the majority of NSW Health awards provide for salary progression based on years of service rather than satisfactory performance.

Where award provisions differ from the provisions of the Framework, the award provisions take precedence.

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### 3 DEALING WITH UNSATISFACTORY PERFORMANCE

[GSE Rule 36](#) sets out the procedural requirements for dealing with unsatisfactory performance, consistent with procedural fairness.

If the performance of a staff member is determined to be unsatisfactory in accordance with [GSE Rule 36](#), [Section 68 of the GSE Act](#) provides for the possible actions that can be taken by the Chief Executive.

NSW Health organisations must develop procedures for dealing with unsatisfactory performance consistent with the above legislative requirements.

Such procedures must also include assessment and management of any risks related to the unsatisfactory performance (eg clinical risks etc), and any notifications required internally or externally in relation to the unsatisfactory performance (eg notification to the relevant professional council etc).

### 4 DATA COLLECTION AND REPORTING

All NSW Health organisations are required to populate and maintain the fields provided in StaffLink for performance reviews and agreements/development plans for each of their staff members.

This data will facilitate reporting against the performance KPI in the NSW Health Service Agreements (currently 'percentage of total eligible staff with performance reviews completed within the last 12 months'), and assist in any ad hoc and / or future government sector wide reporting requirements on staff performance.

---

**From:** Accreditation <[REDACTED]>  
**Sent:** Thursday, 10 June 2021 10:40  
**To:** Preeti Saraswati (Western Sydney LHD) <[REDACTED]>; Bettina Brooke <[REDACTED]>  
**Cc:** Jane Li (Western Sydney LHD) <[REDACTED]>; Susan Grayson (Western Sydney LHD) <[REDACTED]>; David Farlow (Western Sydney LHD) <[REDACTED]>  
**Subject:** RE: Trainees currently at Westmead and those on a performance plan

Thank you Preeti for the very prompt response.

Kind Regards

Janet

*For advice and information on impact of COVID-19 on education and training, events and other College activities, please [visit the College website](#).*

*Have I been of assistance to you today? Click [here](#) to respond.*

**Janet Chapterera | Project Officer, Training Accreditation | Specialty Training Unit**  
 The Royal Australian and New Zealand College of Radiologists  
 Level 9, 51 Druitt Street, Sydney 2000 NSW  
 T: +61 [REDACTED] | E: [REDACTED] | W: [www.ranzcr.edu.au](http://www.ranzcr.edu.au)




---

**From:** Preeti Saraswati (Western Sydney LHD) <[REDACTED]>  
**Sent:** Thursday, 10 June 2021 10:04 AM  
**To:** Accreditation <[REDACTED]>; Bettina Brooke <[REDACTED]>  
**Cc:** Janet Chapterera <[REDACTED]>; Jane Li (Western Sydney LHD) <[REDACTED]>; Susan Grayson (Western Sydney LHD) <[REDACTED]>; David Farlow (Western Sydney LHD) <[REDACTED]>  
**Subject:** Trainees currently at Westmead and those on a performance plan

Dear Team,

Please find below information on the Westmead trainees as requested. Please let me know if any further information is required.

**Trainees currently at Westmead:**

No	HOME SITE	TRAINEE	Current site	Comments
1	Westmead	Daniel Gao	Westmead	New starter- May 2021
2	Westmead	Ashley Heyworth	Westmead	
3	Westmead	Alexander Kirwan	Westmead	
4	Westmead	Cheng Yeo	Westmead	
5	Westmead	Eugene Ng	Westmead	

6	Westmead	Mila Dimitrijevic	Westmead	
7	Westmead	Jing Zhou Zhu	The Children's Hospital Westmead	Paeds Rotation
8	Westmead	Rueben Ganeshalingam	Concord Hospital	Orange Rotation cover (as per MoU)
9	Westmead	Jia Lin Chua	Westmead	
10	Westmead	Jeewaka Mohotti	Westmead	
11	Westmead	Nandu Dantan	Westmead	
12	Westmead	Rebecca Lim	Westmead	
13	Westmead	Sam Conyngham	Westmead	
14	Westmead	Jeffrey Wang	Westmead	Non Network trainee
15	Westmead	Ghadah Othman	Westmead	
16	Westmead	Amy Khoo (on maternity leave)	Westmead	On maternity leave for 2021
17	Blacktown	Shiv Aggarwala	Westmead	Nuclear med and breast rotations

**Westmead Trainees on a performance and progression plan:**

No	TRAINEE	Comments
1	Cheng Yeo	On progression plan, some progress made, follow up meeting to be scheduled by DoTs over the next week or two. Was on Network rotation to RPA in Term 1. Just passed Part 1 exam (Network awaiting formal notification from College).
2	Jeff Wang	Awaiting Phase 2 exam outcome, can come off the plan.
3	Amy Khoo	Post Remediation trainee currently on Maternity leave- due to sit exams on return

Kind Regards,  
Preeti Saraswati

Education Support Officer | Radiology - LAN 2 Network (0.5 FTE)  
Acting Education Support Officer | Radiation Oncology - Northern NSW Training Network (0.5FTE)

M [REDACTED] | [REDACTED]

Research and Education Network  
Post Grad Medical Education Centre | Westmead Hospital



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Subject: Re: Confirmation of Completion of Remediation Training for Dr Amy Khoo  
To: Radiology <[REDACTED]>  
Cc: [REDACTED] <[REDACTED]>

Dear Fatima,

Please find a reply letter attached, confirming Dr Khoo has completed remediation as of June 2020 and we endorse her application for the upcoming fellowship examination.

Kind regards,

**Dr Jane J. Li**

Staff Specialist & Director of Training , Radiology Department  
Westmead Hospital, Hawkesbury Road, WESTMEAD NSW 2145, Australia  
Telephone [REDACTED] | Fax [REDACTED]

**Radiology** [REDACTED]

Tue, Aug 25, 10:13 AM to m\_nasreddine@hotmail.com, me

Dear Dr Li,

Thank you for confirming that Dr Khoo has successfully completed her remediation training on 30 June 2020. This has been updated on Dr Khoo's records. Having met the remediation outcome, Dr Khoo is eligible to sit the Series 2 2020 examinations as attempt 1 of her 2 available attempts (which theoretically equates to 3 attempts due to the College's COVID-19 exemption).

Due to many uncertainties, we are not able to confirm when the Series 1 2021 examination is going to be held. According to the College policy a trainee has to be in an accredited training position to be able to sit the examinations i.e. if Dr Khoo has to utilise her 2<sup>nd</sup> attempt in Series 1 2021, she needs to be in an accredited post. Please note that it is up to the site to determine any contractual matters regarding Dr Khoo.

Please also note that the College's [COVID-19: Impact on College Activities](#) stipulates that in relation to training time:

*All trainees will be permitted up to 12 months additional training time if required, and the College will work with the various jurisdictions to facilitate this, recognising that similar concessions will be needed in the training programs for many medical specialties.*

I hope you find the above information useful for the Network.

Should you have any questions, please do not hesitate to contact me.

Kind regards,

*Have I been of assistance to you today? Click [here](#) to respond.*

**Fatima Zia | Project Officer, Clinical Radiology | Specialty Training Unit**

The Royal Australian and New Zealand College of Radiologists

Level 9, 51 Druitt Street, Sydney 2000 NSW

T: +61 [REDACTED] | E: [REDACTED] | W: [www.ranzcr.com](http://www.ranzcr.com)



**From:** Jane Li [mailto: [REDACTED]]  
**Sent:** 25 January 2021 12:42 PM  
**To:** Radiology [mailto: [REDACTED]]  
**CC:** Mohamed Nasreddine (Western Sydney LHD) [mailto: [REDACTED]], Robert De Costa (Western Sydney LHD) [mailto: [REDACTED]], Lourens Bester [mailto: [REDACTED]], Preeti Saraswati (Western Sydney LHD) [mailto: [REDACTED]]  
**Subject:** Re: RANZCR - Low DoT Assessment Score - Cheng Hong Yeo

Dear Fatima,

I have attached a Performance and Progression Action Plan for Dr Cheng Hong Yeo. We have met with Dr Yeo at the end of last year to complete this plan because we the DOTs have ongoing concerns about his training. He has satisfactorily prepared for the Part I examinations and has recently passed 3 out of 4 components. However there are issues around his clinical acumen, adaptation and suitability for the specialty.

We will endeavour to meet again with Dr Yeo at 3 months and 6 months for a review.

Kind regards,

**Dr Jane J. Li**

Staff Specialist , Radiology Department  
Westmead Hospital, Hawkesbury Road, WESTMEAD NSW 2145, Australia  
Telephone [REDACTED] | Fax [REDACTED]

**Appendix D – Action Plan**

Trainee First Name:	Cheng	Trainee Last Name:	Yeo
Training Start Date:	Feb 2020	Year of Training:	Year 1 (8 months)
Date of Meeting:	29/9/2020	Venue:	Westmead Radiology
Time Started:	16.20 - 17.30	Time Ended:	17.30
Review Start:	1/10/2020	Review End:	31/03/2020
Anticipated duration of Action Plan:	6mths		

Meeting Attendees (name and position)	Dr Jane Li , co-director of Training
	Dr Mohamed Nasreddine , co-director of Training
	Dr Cheng Yeo , radiology trainee

<b>Issue 1: Identified (and sources of Identification):</b>  Detection difficulties, slow to identify abnormalities on radiographs and CTs. Sometimes missing the core finding		TIMS
		CSA
		EXAMS
		OTHER: Tutorials In-hour & After hour reports

<b>Issue 1: Action Plan (and sources of identification):</b>  Rostered to one-to-one supervision with consultant. going through scan findings  Rad primer & Emergency Radiology 101 Radiopaedia Trauma Course Reed chest radiology (Statdx only as reference)		TIMS
		CSA
		EXAMS
		OTHER:

<b>Issue 1: Intended Outcome:</b>  Improve ability to detect abnormal findings on imaging and work out diagnosis independently
--

<p><b>Issue 2: Identified (and sources of identification):</b></p> <p>Time management</p>		TIMS
		CSA
		EXAMS
		OTHER: Feedback from consultants
<p><b>Issue 2: Action Plan (and sources of identification):</b></p> <p>Giving Cheng more opportunities to take on busier roles over time</p> <p>Initially we have reduced the number of weekend shifts, so trainee is not overwhelmed by workload. Will gradually introduce evening &amp; night shifts. Buddy system if required, as we see fit</p>		TIMS
		CSA
		EXAMS
		OTHER:
<p><b>Issue 2: Intended Outcome:</b></p> <p>Ensure trainee is able to multi-task and effectively manage time in busy roles</p> <p>Produce reports accurately and in a timely manner while managing reviews and liaising with clinical teams</p>		

<b>Issue 3: Identified (and sources of identification):</b>  Shyness in approaching consultants & not as approach proactive	TIMS
	CSA
	EXAMS
	OTHER: observation

<b>Issue 3: Action Plan (and sources of identification):</b>  Need to ask questions. Be inquisitive Approach consultants to review cases Challenge self with more difficult cases.	TIMS
	CSA
	EXAMS
	OTHER:

<b>Issue 3: Intended Outcome:</b>  - Increase confidence and ability to participate in higher level learning, expected of a radiology specialty trainee. - Demonstrate a willingness and enthusiasm to learn from consultants.
---

<p><b>Issue 4: Identified (and sources of Identification):</b></p>		TIMS
		CSA
		EXAMS
		OTHER:

<p><b>Issue 4: Action Plan (and sources of identification):</b></p>		TIMS
		CSA
		EXAMS
		OTHER:

<p><b>Issue 4: Intended Outcome:</b></p>
--

**Trainee Verification:**

I agree with the action plan

I do not agree with the action plan

**Comments from Trainee:**


Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Comments from Director of Training:**

*we will work closely with Cheng after  
Part 1 exams to achieve the above outcomes*

Signature: \_\_\_\_\_



Date: \_\_\_\_\_

15/10/2020

**Comments from Director of Training / Head of Department:**

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## Appendix A – Remediation Plan Template

Trainee First Name:	Amy	Trainee Last Name:	Khoo
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Training Start Date:	18/11/2019	Year of Training:	Year 6.
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Date of Meeting:	16/01/2020.	Training Site:	LAN2, Westmead Hospital.
Time Started:	13:00	Time Ended:	14:00.

Review Start:	16/01/2020.	Review End:	30/06/2020.
---------------	-------------	-------------	-------------

Remediation Plan Meeting:		Training Time Suspended:	From: <u>26/11/2018</u> To: <u>17/02/2019</u>
---------------------------	--	--------------------------	--

Meeting Attendees (name and position)	Dr Jane Li DoT
	Dr Mohamed Nasreddine DoT.
	Dr Amy Khoo Trainee



**Reason for Remediation: Identification of Areas where Trainee requires assistance to perform or progress:**

Need to extend remediation period from a further 6 months. Has completed 1 year remediation period in Orange.

Failure to pass part II exams in 2018.  
O & G, mammo viva, paedthology viva and report writing

No other employment issues

No outstanding TMS assessment. All other training components completed at Liverpool Hospital

**Issue 1:**

Failure to pass part II exams

**Issue 1: Identified:**

- Weakness in knowledge and/or poor exam technique in O&G and pathology
- Inadequate exposure to O&G ultrasound & mammo
- Not enough opportunity in "hot seat" during tutorials at previous site

**Issue 1: Trainee Responsibility:**

- Attend all tutorials on offer.
- Ask for extra pre-part II exam tutorials from subspecialty consultants at Westmead and external sites
- Attend MDTs, go through library (film)
- Attend Breast clinic, BCI tutorials. Report mammo cases

**Issue 1: Department Responsibility (please outline additional training and support to be provided):**

- Provide Amy opportunity to present cases in tutorials  
run MDTs to increase exposure to practice technique / increase confidence. Mock viva / report writing sessions
- Roster Amy to areas she feels deficient in, esp BCI and general radiology to prepare for resitting all components of exam

**Issue 1: Measurable Outcome:**

- Review progress in 2-3 months. Consultant feedback on trainee reports and knowledge level.
- Assess tutorial & MDT presentation skills. Ensure performance improve over time before resitting part II's.

**Issue 1: Responsibility for Completion:**

- DOT & LANZ network director to have meeting with Amy in April, June & August 2020 to offer feedback

**Issue 1: Timeframe for Completion:**

6 months

**Issue 2:**

Employment contract at current site ends Jan 2021  
(progression issue)

**Issue 2: Identified:**

Trainee plans to attempt part II exams (after 1½ yr. remediation) in 2nd series 2020

If a second attempt is required, trainee needs to be in an accredited training site.

**Issue 2: Trainee Responsibility:**

Seek out every option to ensure she has an accredited training position in 2021

**Issue 2: Department Responsibility (please outline additional training and support to be provided):**

We will support to Amy & provide accurate advice on potential employment opportunities.

Unfortunately we have cannot provide guarantee of contract from Westmead in 2021.

**Issue 2: Measurable Outcome:**

Ensure Amy has spoken to potential employers in August 2020 & apply for jobs to allow her to stay in an accredited position if she wishes to resit exams again in 2021

**Issue 2: Responsibility for Completion:**

Sit down meeting in June 2020 to discuss.

**Issue 2: Timeframe for Completion:**

3-6 months

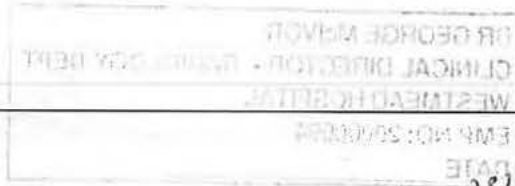
**Trainee Verification:**



I agree with the plan and will take responsibility for completion of the issue(s) identified

**Comments from Trainee:**

- ① fulfil the responsibilities as outlined above.
- ② seek ongoing feedback



Signature: \_\_\_\_\_

Date: \_\_\_\_\_

23/01/2020

**Director of Training Verification:**



I agree to take responsibility for assisting in the completion of the issue(s) identified

**Comments from Director of Training:**

Trainee has not met remediation goals in the previous year, hence necessary to extend for 6 months. Encourage trainee to sit exam in 2020.

Name: \_\_\_\_\_

Dr Jane J. Li

Date: \_\_\_\_\_

23/1/2020

Signature: \_\_\_\_\_

**Head of Department Verification:**



I agree to take responsibility for assisting in the completion of the issue(s) identified

**Comments from Head of Department:**

[Empty text box for comments]

Name:

DR GEORGE McIVOR  
CLINICAL DIRECTOR - RADIOLOGY DEPT  
WESTMEAD HOSPITAL  
EMP NO: 20000994  
DATE

Date: 30.01.20

Signature:

**Person Responsible for Oversight and Monitoring of Completion Verification:**



I agree to take responsibility for assisting in the completion of the issue(s) identified

**Comments:**

[Empty text box for comments]

Name:

\_\_\_\_\_

Date: \_\_\_\_\_

Signature:

\_\_\_\_\_

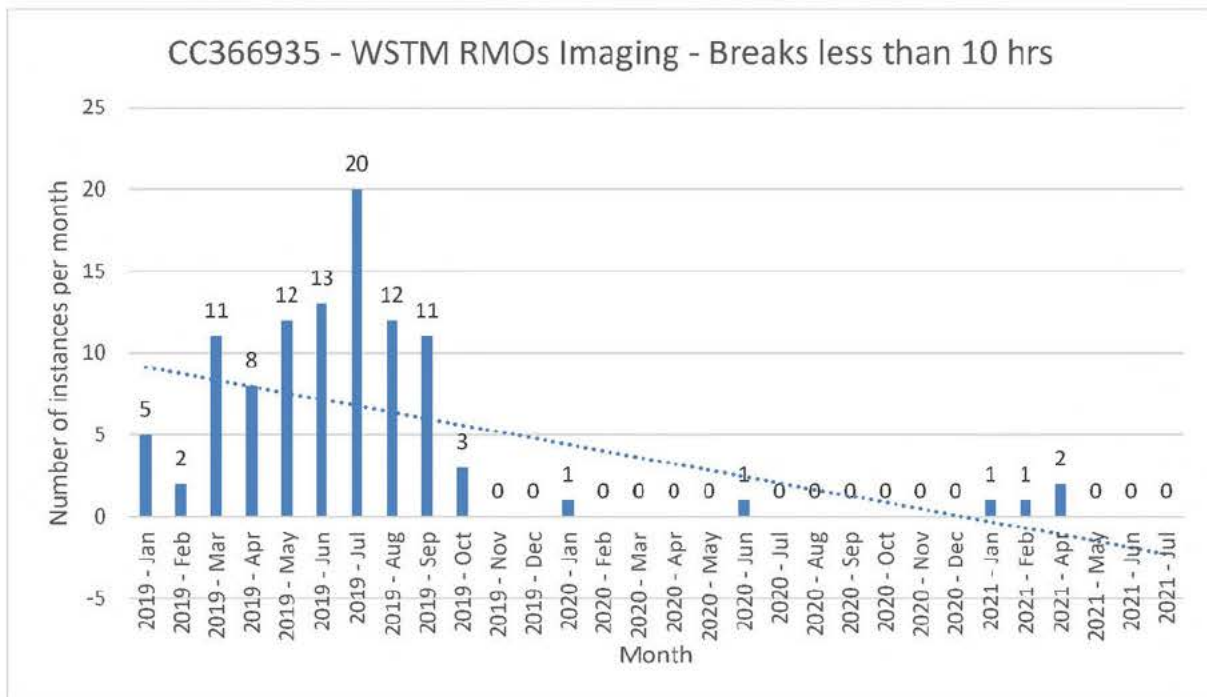
## 1.1.1 – Appendix 1

### Safe Working Hours Reports – Radiology Extract

Safe working hours are monitored through monthly reporting to the Executive Director of Medical Services. These reports monitor the NSW Health identified safe working hours indicators of Shifts exceeding 14 hours and Shifts without a 10 hour break. These reports are extracted from rostering systems and reported monthly.

The last reported shift exceeding 14 hours occurred in September 2019.

Shifts with breaks less than ten hours since January 2019 are reported below, with a significant improvement since 2019.



## Westmead Hospital Radiology Department Risk Management Plan

A Risk Register has been developed to identify, monitor and manage the risks and related issues in the Radiology Department at Westmead Hospital those related to accreditation as a training site with the Royal Australian and New Zealand College of Radiologists (RANZCR). Risks are rated using the table below, obtained from NSW Health Enterprise-Wide Risk Management Framework.

NSW Health Risk Matrix		NSW HEALTH RISK CATEGORIES	CONSEQUENCE EXAMPLES				
			Catastrophic	Major	Moderate	Minor	Minimal
Risk rating	Action required	Clinical Care & Patient Safety	Unexpected multiple patient deaths unrelated to the natural course of the illness.	Unexpected patient death or permanent loss/reduction of bodily function unrelated to the natural course of the illness.	Unexpected temporary reduction of patient's bodily function unrelated to the natural course of the illness which differs from the expected outcome.	Patient's care level has increased unrelated to the natural course of the illness.	First Aid provided to patient unrelated to the natural course of the illness.
		Health of the Population	An increase in the prevalence of known conditions contributing to chronic diseases across the state-wide population health KPI categories currently measured by NSW Health and/or an increase of more than 10% in one or more category.	Failure to materially reduce the prevalence of known conditions contributing to chronic disease across the majority of the state-wide population health KPI categories measured by NSW Health and/or an increase of more than 5% up to 10% in one or more category.	Failure to materially reduce the prevalence of more than one of the known conditions contributing to chronic disease from the state-wide population KPI categories measured by NSW Health and/or an increase of more than 2% and up to 5% in one or more category.	Failure to reduce the prevalence of one of the known conditions contributing to chronic disease from the state-wide population health KPI categories measured by NSW Health or an increase of up to 2% in one or more category.	A preventative health program has not demonstrably met planned objectives but the prevalence of known condition is continuing to decrease in line with KPI targets.
Red = Extreme (A - E)	Escalate to CE or Head of Health Service or Secretary, MoH A detailed action plan must be implemented to reduce risk rating with at least monthly monitoring and reporting.	Workforce	Unplanned cessation of a critical state-wide program or service or multiple programs and services.	Unplanned cessation of a service or program availability within a Service Area with possible flow on to other locations.	Unplanned restrictions to services and programs in multiple locations, or a whole hospital or community service.	Unplanned service delivery or program delays, reduced to department or community service.	Minimal effect on service delivery.
		Communication & Information Facilities & Assets Security	Cessation of services due to loss, damage or unauthorised access to property, assets, records and information.	Prolonged service disruption or suspension of services due to the loss, damage or unauthorised access to property, assets, records and information.	Temporary suspension of services due to the loss, damage or unauthorised access to property, assets, records and information.	Localised disruption to services. Minor loss, damage or unauthorised access to property, assets, records and information.	Minimal effect on services. No loss or damage to property, assets, records or information.
Orange = High (F - K)	Escalate to Senior Management A detailed action plan must be implemented to reduce risk rating.	Emergency Management	State-wide system dysfunction resulting in total shutdown of service delivery or operations.	Services compromised as service providers are unable to provide effective support and other areas of NSW Health are known to be affected.	Disruption of a number of services within a location with possible flow on to other locations in the area.	Some disruption within a location but manageable by altering operational routine.	No interruption to services.
		Legal	Legal judgement, claim, non-compliance with legislation resulting in indefinite or prolonged suspension of service delivery.	Legal judgement, claim, non-compliance with legislation resulting in medium term suspension of service delivery.	Legal judgement, claim, non-compliance with legislation resulting in medium term but temporary suspension to services.	Legal judgement, claim, non-compliance with legislation resulting in short term disruption to services.	Legal judgement, claim or legislative change but no impact on service delivery.
Yellow = Medium (L - T)	Specify Management Accountability and Responsibility Monitor trends and put in place improvement plans.	Finance	More than 5% over budget/NOT recoverable within the current financial year. Unable to pay staff or finance critical services.	Up to 5% over budget or a material overrun NOT recoverable within the current financial year. Unable to pay conditions which affect benchmark.	Up to 5% over budget but recoverable within current financial year.	Up to 1% temporarily over budget and recoverable within current financial year.	Less than 1% over budget. Temporary loss of or unplanned expenditure related to individual program or project but no net impact on budget.
		Work, Health & Safety Environmental	Multiple deaths or life threatening injuries or illness to non-patients. Permanent effect on the environment or is unlikely to recover.	Death or life threatening injury or illness causing hospitalisation of non-patients. Long term effect on the environment. The environment will only recover through external assistance / intervention (EPA)	Serious harm, injury or illness causing hospitalisation or multiple medical treatment cases for non-patients. Short term effect on the environment. Environment likely to make a full recovery through local planning and response measures.	Minor harm, injury or illness to a non-patient where treatment or First Aid is required. Minor effect on the environment. Environment to make a full recovery by routine procedures.	Harm, injury or illness not requiring immediate medical treatment. No lasting effect on the environment.
Green = Low (U - Y)	Manage by routine procedures Monitor trends.	Leadership and Management	Failure to meet critical priority KPI's included in the service's performance agreement. Sustained adverse national publicity. Significant loss of public confidence, loss of reputation and/or media interest across NSW in services.	Failure to meet a significant number of priority KPI's included in the service's performance agreement. Sustained adverse publicity at a state-wide level leading to the requirement for external intervention. Systemic and sustained loss of public support/opinion across a service.	Failure to meet a number of priority KPI's included in the service's performance agreement. Increasing and broadening adverse publicity at a local level, loss of consumer confidence, escalating patient/consumer complaints. Extended loss of public support/opinion for a Facility/Service.	Failure to meet one or more of the KPI's (including priority KPI's) included in the service's performance agreement. Periodic loss of public support.	Minimal impact on local operations, local management review and occasional adverse local publicity.
		Community Expectations					
		LIKELIHOOD	CONSEQUENCE RATINGS				
Probability	Frequency		Catastrophic	Major	Moderate	Minor	Minimal
> 95% to 100%	Several times a week	Almost certain	A	D	J	P	S
> 70% to 95 %	Monthly or several times a year	Likely	B	E	K	Q	T
> 30% to 70%	Once every 1 -2 years	Possible	C	H	M	R	W
> 5% to 30%	Once every 2 - 5 years	Unlikely	F	I	N	U	X
< 5%	Greater than once every 5 years	Rare	G	L	O	V	Y

Risk Area	Risk / Issue Description	Likelihood	Consequence	Risk Rating	Mitigation Strategy
Supervision, Training and Teaching	Current Radiologist FTE is insufficient to provide satisfactory trainee supervision and training.	<b>Almost Certain</b>	<b>Moderate</b>	<b>HIGH</b>	<ul style="list-style-type: none"> <li>Approval for recruitment of additional 4.0 FTE Radiologists. Unsuccessful recruitment thus far.</li> <li>Current vacancy is 6.0 FTE Radiologists. 2.0 FTE (currently on long term leave) expected to recommence Feb 2021. 1.0 FTE has expressed intention to return in 2021.</li> <li>Brief in progress to recruit VMO's to backfill current vacancies (related to resignations, extended sick and long service leave).</li> </ul>
Supervision, Training and Teaching	Current workload and staffing issues resulting in lack of protected teaching time expected by RANZCR.	<b>Likely</b>	<b>Moderate</b>	<b>HIGH</b>	<ul style="list-style-type: none"> <li>Commitment from Westmead Hospital to ensure protected trainee teaching time is a priority.</li> <li>Minimum 1 x tutorial/day (as per Westmead Registrar Tutorial Timetable)</li> <li>Additional tutorials for Part 2 exam candidates (including specialty areas)</li> <li>Teaching and training requirements are included in all Radiologist position descriptions</li> <li>With addition of SRMO's (see below), 4 hours of protected time will be included in all RANZCR Trainee rosters</li> <li>Appoint 0.6 FTE Research and Education Support Officer for Radiology in 2021</li> </ul>



Supervision, Training and Teaching	Inability to attract Radiologists. **National problem.	Likely	Moderate	HIGH	<ul style="list-style-type: none"> <li>Continue recruitment</li> </ul>
Trainee Well-being	Current working environment leading to a negative impact on the wellbeing of trainees	Likely	Moderate	HIGH	<ul style="list-style-type: none"> <li>In line with the NSW JMO Wellbeing and Support Plan 2017, Westmead Hospital will continue to improve the ways we work to better support the wellbeing and health of our trainees.</li> <li>Ensure regular feedback opportunities through different avenues (including WSLHD-wide “JMO Think Tank”) from trainees to shape the teaching and training program at a local level.</li> <li>Regular reassurance to trainees from WMH Executive and DoT that their opinions are valued. Provide encouragement for them to provide feedback.</li> </ul>
Trainee Well-being	Workload expectations for trainees. Potentially undertaking a greater load of reporting compared to workload expectations.	Almost Certain	Moderate	HIGH	<ul style="list-style-type: none"> <li>Commitment from Westmead Hospital to encourage trainees to leave work at a reasonable time and discourage unnecessary overtime.</li> <li>Use RANZCR recommendations as a guide to regulate work practices as a triage system, and to prioritise experiential work requirements.</li> <li>Brief approved (currently advertised) to recruit SRMO’s to reduce non-reporting duties of RANZCR Trainees.</li> <li>Recruitment to current Radiologist vacancies will likely reduce workload for Trainees.</li> </ul>

Trainee Well-being	Current workload requirements for trainees may be outside of the AMA Safe Working Hours and Public Hospital Medical Officers (State) Award 2018.	Possible	Moderate	MEDIUM	<ul style="list-style-type: none"> <li>• Commitment from Westmead Hospital to encourage trainees to leave work at a reasonable time and discourage unnecessary overtime.</li> <li>• Ensure Trainees are supported to record and submit overtime activity via UROC. Monitored at a District level and breaches of Safe Working hours followed up by Chief Medical Advisor.</li> <li>• Support ongoing checks around roster development for trainees to ensure achievement of reasonable shift coverage.</li> </ul>
Supervision, Training and Teaching	Capacity for the Director of Training (DoT) to undertake the requirements of the role, given workload.	Possible	Moderate	MEDIUM	<ul style="list-style-type: none"> <li>• 2 x Co-DoT currently.</li> <li>• Allocation of five (5) hours per week of Protected Time for each DoT, on days where there are &gt;5 Radiologists rostered.</li> <li>• If &lt;5 Radiologists onsite (due to unexpected leave etc), then DoT will be reallocated to reporting, however, will remain available to Trainees for education and support on an Ad Hoc basis.</li> </ul>
Trainee Wellbeing	Lack of access to appropriate equipment (eg; computer) in training spaces	Possible	Minor	MEDIUM	<ul style="list-style-type: none"> <li>• Dedicated computer placed in the Trainee space</li> <li>• Commitment from Westmead Hospital to ensure replacement of damaged equipment</li> </ul>
Trainee Wellbeing	Not utilising of the Performance and Progression (Clinical	Rare	Moderate	MEDIUM	<ul style="list-style-type: none"> <li>• Three (x3) trainees currently identified as requiring additional support and receiving additional supervision and support.</li> </ul>

Supervision, Training and Teaching	Radiology) Policy, the Remediation in Training (Clinical Radiology) and the Withdrawal from Training (Clinical Radiology) Policy to identify trainees requiring additional support.				<ul style="list-style-type: none"> <li>Ensure use of the appropriate policies, to allow for early identification and intervention for Trainees who may require additional support.</li> </ul>
Supervision, Training and Teaching	Lack of appropriate Patient Safety Training, Report Writing Module and Non-Medical Expert Role Training, for Trainees.	<b>Rare</b>	<b>Moderate</b>	<b>MEDIUM</b>	<ul style="list-style-type: none"> <li>DoT's to ensure all Trainees complete appropriate training on commencement, and ongoing training as required. DoT's to monitor and provide additional training as required.</li> </ul>
Consultant Wellbeing	Current working environment leading to a negative impact on the wellbeing of Radiologists.	<b>Likely</b>	<b>Moderate</b>	<b>HIGH</b>	<ul style="list-style-type: none"> <li>Regular meetings with the WMH Executive to ensure feedback is provided about concerns and/or recommendations for improvement</li> <li>Regular meetings with Head of Department and Chief Medical Advisor</li> <li>Recruitment to current vacancies to reduce workload and increase opportunity for research.</li> </ul>
Supervision, Training and Teaching	Current Radiologist staffing insufficient for expanded clinical Radiology Department, with the opening of the CASB	<b>Almost Certain</b>	<b>Moderate</b>	<b>HIGH</b>	<ul style="list-style-type: none"> <li>Request for additional Radiologist FTE being progressed</li> <li>CASB opening will be staged. Only ED Radiology service will be opened initially.</li> </ul>

<p>Trainee Well-being</p> <p>Radiologist Workload</p> <p>Supervision of Trainees</p>	<p>Inability to meet Accreditation expectations and recommendations in 2020/2021, resulting in loss of Accreditation</p>	<p><b>Possible</b></p>	<p><b>Major</b></p>	<p><b>HIGH</b></p>	<ul style="list-style-type: none"> <li>• If loss of accreditation occurs, Westmead Hospital will work with RANZCR to place trainees in other locations to ensure their training is completed.</li> </ul>
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**Debrief and Feedback from RANZCR Registrars re training experience at Westmead Hospital**

Dr David Farlow, Clinical Network Director, Diagnostics  
Dr Ros Crampton, Chief Medical Advisor, Westmead Hospital

6 Registrars present

16.06.21

**Improvements since 2019**

- More tutorials, particularly when preparing for examinations, format appropriate
- They have protected opportunity to attend, and now do not need to be called away from teaching time has improved. Other rotations have more planned tutorials but less opportunity to attend
- Even more convenient rotations have not provided the depth and breadth of experience at Westmead
- DOTs always accessible
- DOTs always aware of any individual matters requiring attention or support
- The one to one partnering with Consultant in the CASB as well as at Auburn is excellent experience
- Employment of SRMOs has markedly improved the non- training related workload and frequent interruptions of paging and telephone, now held by the junior medical officer
- The backlog at the end of each rostered shift has decreased, as additional scanner has allowed earlier release of studies while interventions occurring.
- The additional SRMO at Auburn was diluting teaching experience and has been removed.

**Suggestions were made for further improvement to the training environment**

- Clearing of backlog reporting
- Ensuring a consultant attended MDTs/Clinical Meetings where additional “cold” reporting opinions sought that had not been reviewed by a consultant radiologist.



**CURRENT DIRECT VS INDIRECT SUPERVISION OF TRAINEES IN  
WESTMEAD MEDICAL IMAGING DEPARTMENT**

*Current as of 18 May 2021*

**ONE ON ONE DIRECTLY SUPERVISED SHIFTS**

**Supervised hours: 0900 – 1700 (unless otherwise stated)**

**One consultant to one registrar +/- Fellow +/- SRMO**

1. CASB (ED/Trauma) 0900 – 1700hrs
2. AUBURN Hospital 0900 – 1700hrs
3. MRI
4. Fluoroscopy
5. Interventional Radiology
6. Breast Imaging (Westmead BCI)
7. Ultrasound (Nuclear Medicine & PET Dept)
8. General CT and XRAY – direct feedback will be provided at the end of a reporting shift when reports are signed off by signing Radiologist. See indirect supervision.

**INDIRECT SUPERVISION WITH ACCESS TO CONSULTANT RADIOLOGIST**

**Face-to-face access to Consultant Radiologist is available 24 hrs as per on call roster.**

1. General CT and XRAY – indirect feedback is provided for non-urgent feedback in the form of either follow up face to face session or via remote communication.

**From:** [Roslyn Crampton \(Western Sydney LHD\)](#)  
**To:** [Kate Hurlle \(Western Sydney LHD\)](#)  
**Subject:** FW: Radiology Service within CASB  
**Date:** Wednesday, 16 June 2021 5:29:38 PM

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**From:** Jennifer Johnson (Western Sydney LHD)  
**Sent:** Tuesday, 15 June 2021 1:22 PM  
**To:** Roslyn Crampton (Western Sydney LHD) [REDACTED]  
**Subject:** Radiology Service within CASB

Dear Ros

Regarding the Radiology service within the CASB

It is the EDs opinion that the co-location of CT/X-ray and US has led to an improvement in service provision with quicker turnaround times.

The current model of care which provides a consultant and SRMO within the ED had led to quicker reporting times, particularly for trauma, deteriorating and undifferentiated patients.

Additionally the improved accessibility of radiology staff has enabled better collaboration and therefore better imaging selection for various patient cohorts.

Kind Regards,

**Dr Matthew Vukasovic**

Director – Emergency Medicine | **Emergency Department | Westmead Hospital | WSLHD**  
PO Box 533 / Wentworthville NSW 2145  
Tel [REDACTED] | Fax [REDACTED] | Mobile [REDACTED]



**From:** Nandula Dantanarayana (Western Sydney LHD)  
[REDACTED]

**Sent:** Friday, 11 June 2021 10:35

**To:** David Farlow (Western Sydney LHD) [REDACTED]; Roslyn Crampton  
(Western Sydney LHD) [REDACTED]; Hinerau Rutene (Western  
Sydney LHD) [REDACTED]

**Subject:** Radiology registrar teaching

Hi all,

Our current radiology teaching is as follows:

-On average at least 5 hours of protected teaching per week (please refer to attached tutorial audit numbers). This is usually a tutorial run by one consultant and is attended by ALL registrars in the department on the day. Most commonly occur at 8 am - 9 am or 1 pm - 2 pm. Pre-exams the tutorial numbers are much higher (up to 5 hours on a single day in some cases). Please see the attached tutorial audit numbers.

-Departmental teaching session done once a week - run as a presentation done by an SRMO based on an interesting/relevant topic chosen by a consultant. Most consultants and registrars present on the day attend these. These run for 1 hour from 1 pm - 2 pm. Please see attached program.

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-Additional protected teaching time prior to exams - usually 2-4 weeks in total per exam candidate where the registrar is not allocated to any work shift. They can spend this time at hospital /film library studying or attending tutorials (usually a combination of both).

Almost all registrars have completed their Florida Mandatory report writing modules and their hospital E-learning modules. Please see Preeti's note.

Kind regards,

Nandu



## Presentations

Topic	Presenter	Date
Anaphylaxis and emergency treatment	Peter Brien	21/04/2021
AKI, iodinated and gadolinium contrast	Ebtesan Mardasi	28/04/2021
Lymph node stations in the neck	Marsa Afhagi	05/05/2021
Pulmonary lobule - imaging and pathology	Nigel McGregor	12/05/2021
Spaces in the neck	Andrew Cha	19/05/2021
RECIST reporting	Daniel Gao	26/05/2021
Abdominal spaces	Halal Baqer	02/06/2021
Celiac trunk variants	Paul Tran	
Lymph node stations in the thorax		
Paranasal sinus spaces/anatomy		
Healing fractures, malunion, nonunion		
Pre-medication for patients with known reactions.		
What is an HRCT. What are the indications	Vida Bella	
Pericardial recesses		
Abdominal hernias (including internal)		
PIRADS		
BIRADS		
LIRADS		
Suprasellar masses		
Position of cardiac valves and other devices on CXR		
Common orthopaedic hardware		

		Target	10		
		Up to (inclusive)	11/06/2021	Whole year (includes booked tutorials that have not occurred yet)	
Tutors	Short name	Tutorial Numbers (1 hour)	Did not attend numbers	Tutorial Numbers (1 hour)	Did not attend numbers
Nasreddine	Mo	1	0	1	0
Baker	Luke	0	0	6	0
Thambugala	Aruni	12	0	12	0
Dennien	Bruce	3	0	3	0
De Costa	Rob D	3	0	3	0
Gomes	Lavier	3	0	3	0
Mclvor	George	0	0	0	0
So	Simon	10	0	10	0
Young	Noel	9	0	10	0
O'Grady	Allan	0	0	0	0
Grayson	Susan	3	0	3	0
Schamschula	Rob S	0	0	0	0
Peduto	Tony	6	0	6	0
Karunaratne	Nisha	1	0	1	0
Lee	Raymond	11	0	11	0
Li	Jane	9	0	9	0
Ng	Kevin	6	0	6	0
Al-Asady	Rafid	1	0	1	0
Ramaswami	Geetha	6	0	6	0
Nguyen	Kimmy	9	0	9	0
Vowels	Michael	2	0	2	0
Jameel	Saif	2	0	2	0
Conyngham	Sam	1	0	1	0
Dantanarayana	Nandu	4	0	4	0
Tse	Roberta	4	0	4	0
Vladica	Phil	1	0	1	0
Wong	KP	6	0	11	0
<b>Total</b>		<b>107</b>	<b>0</b>	<b>114</b>	<b>0</b>

**Westmead Registrar Tutorial Timetable**

	AM	PM
Monday	Pathology Tutorial - Dr N Young (Fortnightly)	Raymond tutorial (weekly) - miscellaneous (abdo, MSK, Neuro)
Tuesday	Paeds - Dr Thambugala/ Alternate week Spine/Body - Dr Karunaratne	MSK - Dr T Peduto (weekly) Alternate week Abdo/Chest - Dr J Li
Wednesday	MRI meeting - monthly case review	1st year tutorials - Dr J Li (alternate week) Body/Neuro - Dr K Nguyen
Thursday	O& G (Karen from Maternity Fetal Med)	NICU meeting - Dr THambugala (monthly) Petrous temporal bone meeting & Neuro meeting - Dr L Gomes/ De Cruz (monthly)
Friday	Abdo/Intervention - Dr S So (weekly)	Angio - Dr KP Wong (weekly)

For Part 2 Exam candidates, there are additional tutorials by

Dr N Karunaratne\* Spine,

Dr Jane Li\*MSK/O&G,

Dr Rob De-Costa \*MSK,

Dr Michael Vowels \*Plain films,

Dr Kim-Son Nguyen\*Body,

Dr Mark Soo\*Neuro/spine

Prof Lavier Gomes \*Neuro/H&N

Dr Aruni Thambugala \*Paeds

## RADIOLOGISTS' ROSTER

Monday 7th June 2021

	a.m.		p.m.	
CASB CT/CR	0900-1300	BAKER/ EUGENE	1300-1700	SO/ EUGENE
*1 - On Site	*2 - Main Dept/Home	NGUYEN		GOMES
REPORTING	0900 - 1000	VLADICA	1400-1500	
*A&E reporting	1000 - 1100	VLADICA	1500-1600	PEDUTO
# Hot reporting	1100 - 1200		1600-1700	PEDUTO
	1200 - 1300			
ICU	1130	VLADICA	High Dep 1400-1500	PEDUTO
Mammo	a.m.	VOWELS, MILA	p.m.	VOWELS
ANGIO	a.m.	YOUNG, LI, GOOLAM, (DENNIEN)	p.m.	YOUNG, LI, GOOLAM, (DENNIEN), AL-ASADY(4-5pm)
CT	0800 - 0900	LIM	1300-1400	MILA
R = Reporting/ E= Enquires/ P=Procedures I=Interventional if reqd	0900 - 1300	AL-ASADY(I), SO, CHUA-E	1400-1700	AL-ASADY(I)(till 4pm), BAKER, KIRWAN- E
	1000	AL-ASADY - Inj	1700-2200	KIRWAN
			CT Interventional	
SCREENING + PLAIN FILMS + CT PROTOCOLS	a.m.	GAO sup GOMES	p.m.	GAO sup BAKER
MRI	0800 - 0900	LIM	1300-1400	MILA
	0900 - 1300	PEDUTO, GOMES, JAMEEL, MOHOTTI	1400-1700	NGUYEN, JAMEEL, MOHOTTI, MILA
			1700-2200	KIRWAN
ULTRASOUND	a.m.	HEYWORTH	p.m.	HEYWORTH/ CHUA
MEETINGS	0730	Breast Tumour -	1230	Rehab - MOHOTTI
	0700	Orthopaedics -	all day	Neuro/MSK - LIM
	0745	Upper GI MDT Mtg - SO	all day	Procedures - NANDU/ CONYNGHAM
	1200	Sarcoma - BAKER		
	1245-1400	Liver - PEDUTO/JAMEEL/AL-ASADY/SO		
TUTORIALS	0800	YOUNG - Pathology	1300-1400	
PT CONSULTS	AL-ASADY - 0930 & 1100			
OTHER HOSPITAL(S)	ZHU/ WANG			
AUBURN	NG/ WANG			

## Backlog Roster

ON CALL		ABSENT	
CT & General: Evening 1700 - 2200	A KIRWAN	All day	DE COSTA, NASREDDINE, O'GRADY, MCIVOR, GRAYSON, KARUNARATNE, LEE, SCHAMSCHULA, KHOO, (YEO)
CT & General: Night 2200 - 0800	G OTHMAN		
Angiography & Diagnostic	BAKER/ NG/ NANDU		
Radiographer	Per Roster	pm	VLADICA
CT Radiographer	F GALL		
Ang Radiographer	A DAO		
Registered Nurse	R NALLARETNAM		

## RADIOLOGISTS' ROSTER

Friday 4th June 2021

	a.m.		p.m.	
<b>CASB CT/CR</b>	0900-1300	DE COSTA/ KIRWAN	1300-1700	GOMES/ KIRWAN
*1 - On Site	*2 - Main Dept/Home	RAMASWAMI		RAMASWAMI
<b>REPORTING</b>	0900 - 1000	KARUNARATNE	1400-1500	
*A&E reporting	1000 - 1100	KARUNARATNE, KP WONG	1500-1600	DE COSTA
	1100 - 1200	KP WONG	1600-1700	DE COSTA
	1200 - 1300	KP WONG		
ICU	1130	KARUNARATNE	High Dep 1400-1500	DE COSTA
Mammo	a.m.	VOWELS, MILA	p.m.	VOWELS
<b>ANGIO</b>	a.m.	BAKER, (DENNIEN), O'GRADY, GOOLAM	p.m.	BAKER, (DENNIEN), O'GRADY, GOOLAM
<b>CT</b>	0800 - 0900	MOHOTTI	1300-1400	CONYNGHAM
R = Reporting	0900 - 1300	SO, GAO-E	1400-1700	SO(till 1600), LIM-E, GAO-R
E = Enquires			1700-2200	LIM
P= Procedure			CT Interventional	O'GRADY- Biopsy @ 1400
CT Interventional	1200	O'GRADY - Bx		
<b>SCREENING + PLAIN FILMS + CT PROTOCOLS</b>	a.m.	CHUA sup SO	p.m.	CHUA sup KARUNARATNE
<b>MRI</b>	0800 - 0900	MOHOTTI	1300-1400	CONYNGHAM
	0900 - 1300	GOMES(fr 1030), JAMEEL, MOHOTTI	1400-1700	KARUNARATNE, JAMEEL, MOHOTTI
			1700-2200	LIM
<b>ULTRASOUND</b>	a.m.	HEYWORTH	p.m.	HEYWORTH/ MILA
<b>MEETINGS</b>	0715	ENT - GOMES	all day	Procedures - NANDU & CONYNGHAM
	0800	Urology - VLADICA A6 Tutorial Rm		
	0730	GIT Lower MDT - JAMEEL	1600 - 1700	Upper GI MDT Prep - SO
	0800-1030	Head and Neck - GOMES/ MILA		
<b>TUTORIALS</b>	0800	SO	1300	KP WONG
<b>OTHER HOSPITAL(S)</b>	ZHU/ RUEBEN			
<b>AUBURN</b>	VLADICA/ EUGENE			

## BACKLOG ROSTER

ON CALL		ABSENT	
CT & General: Evening 1700 - 2200	R LIM	All day	YOUNG, SCHAMSHULA, NG, AL-ASADY, LI, MCIVOR, PEDUTO, NASREDDINE, LEE, GRAYSON, KHOO, WANG, (YEO)
CT & General: Night 2200 - 0800	G OTHMAN		
Angiography & Diagnostic	DENNIEN/GOOLAM/VOWELS/CONYNGHAM		
Radiographer	Per Roster		
CT Radiographer	B KIMBER		
Ang Radiographer	L ILIN		
Registered Nurse	D NITSOS		

## RADIOLOGISTS' ROSTER

**Wednesday 2nd June 2021**

	a.m.		p.m.	
<b>CASB CT/CR</b> *1 - On Site	0900 - 1300 *2 - Main Dept/ Home	KARUNARATNE(1)/ MILA DE COSTA(0900-1100)	1300-1700	GOMES(1)/ MILA NGUYEN
<b>REPORTING</b> *A&E reporting	0900 - 1000 1000 - 1100 1100 - 1200 1200 - 1300	GOMES GOMES	1400-1500 1500-1600 1600-1700	CHUA KARUNARATNE, CHUA KARUNARATNE, CHUA
ICU	1130	DE COSTA	High Dep 1400-1500	KARUNARATNE
Mammo	a.m.	VOWELS	p.m.	-----
<b>ANGIO</b>	a.m.	VLADICA, AL-ASADY, GOOLAM, (DENNIEN)	p.m.	VLADICA, AL-ASADY, GOOLAM, BAKER, (DENNIEN)
<b>CT</b>  R = Reporting/E = Enquiries/P=Procedure I = Interventional if reqd	0800 - 0900 0900 - 1300 1130	WANG BAKER, GAO-E, CHUA-R  BAKER - Bx	1300-1400 1400-1700 1700-2200 CT Interventional	CHUA VOWELS, CHUA-R, MOHOTTI-E, GAO-R MOHOTTI
<b>SCREENING + PLAIN FILMS + CT PROTOCOLS</b>	a.m.	KIRWAN sup NGUYEN	p.m.	KIRWAN sup DE COSTA
<b>MRI</b>	0800 - 0900 0900 - 1300	WANG PEDUTO, NGUYEN, JAMEEL, WANG	1300-1400 1400-1700 1700-2200	CHUA DE COSTA, JAMEEL, WANG MOHOTTI
<b>ULTRASOUND</b>	a.m.	HEYWORTH	p.m.	HEYWORTH
<b>MEETINGS</b>	0730 0830-0900 0900 0900 - 1000 1130	MRI Mtg - 1st week in month O & G Mtg - BAKER Haematology - WANG ED Mtg - None Neurology - GOMES(1)	all day 1400 1300	Procedures - NANDU/ CONYNGHAM Infectious Diseases - CHUA (1)  SRMO Inservice (1)
<b>TUTORIALS</b>	0800		1300-1400	NGUYEN
<b>OTHER HOSPITAL(S)</b>	ZHU/ RUEBEN			
<b>AUBURN</b>	YOUNG/ LIM			

### BACKLOG ROSTER

ON CALL	ABSENT	
CT & General: Evening 1700 - 2200	K MOHOTTI	All day
CT & General: Night 2200 - 0800	C YEO	
Angiography & Diagnostic	DENNIEN/ GOOLAM/ VOWELS/ CONYNGHAM	
Radiographer	per roster	pm PEDUTO
CT Radiographer	K DADGAR	
Ang Radiographer	L ILIN	
Registered Nurse	V JEROME	

## RADIOLOGISTS' ROSTER

Friday 28th May 2021

	a.m.		p.m.	
<b>CASB CT/CR</b> *1 - On Site	0900-1300 *2 - Main Dept/Home	SO(1)/ KIRWAN KARUNARATNE	1300-1700	RAMASWAMI(1)/ KIRWAN VLADICA
<b>REPORTING</b> *A&E.reporting	0900 - 1000 1000 - 1100 1100 - 1200 1200 - 1300	RAMASWAMI, HEYWORTH RAMASWAMI, HEYWORTH HEYWORTH HEYWORTH	1400-1500 1530-1600 1600-1700	LEE LEE
ICU	1130	RAMASWAMI	High Dep 1300-1330	LEE
Mammo	a.m.	VOWELS	p.m.	VOWELS
<b>ANGIO</b>	a.m.	BAKER, O'GRADY,	p.m.	BAKER, O'GRADY
<b>CT</b> R = Reporting E = Enquires P= Procedure CT Interventional	0800 - 0900 0900 - 1300 1300	SHIV VLADICA(CTCA), SHIV-E BAKER - Bx	1300-1400 1400-1700 1700-2200 CT Interventional	CHUA SO, HEYWORTH-R, MILA-E MILA SO/O'GRADY-Lumber Puncture -1400
<b>SCREENING + PLAIN FILMS + CT PROTOCOLS</b>	a.m.	CHUA/GAO sup VLADICA	p.m.	CHUA/GAO sup KARUNARATNE
<b>MRI</b>	0800 - 0900 0900 - 1300	SHIV LEE, O, WANG	1300-1400 1400-1700 1700-2200	CHUA KARUNARATNE, WANG MILA
<b>ULTRASOUND</b>	a.m.		p.m.	SHIV
<b>MEETINGS</b>	0730 - 0935 0730	Uro Oncology MDT - VLADICA ftnly GIT Lower MDT - LEE	all day	Body - NANDU
<b>TUTORIALS</b>	0800	SO	1300	
<b>PT CONSULTS</b>	VLADICA @ 1200			
<b>OTHER HOSPITAL(S)</b>	ZHU, RUEBEN, LIM			
<b>AUBURN</b>	DE COSTA/ OTHMAN			

## BACKLOG ROSTER

ON CALL	ABSENT
CT & General: Evening 1700 - 2200	MILA
CT & General: Night 2200 - 0800	C YEO
Angiography & Diagnostic	YOUNG/ PEDUTO/ NANDU
Radiographer	Per Roster
CT Radiographer	S SAGHRI
Ang Radiographer	S NGUYEN
Registered Nurse	K NEANG
	LEE(away 1330 - 1530)

## RADIOLOGISTS' ROSTER

Tuesday 25th May 2021

	a.m.		p.m.	
<b>CASB CT/CR</b> *1 - On Site	0900-1300 *2 - Main Dept/Home	GRAYSON(1)/ OTHMAN LI(when available)	1300-1700	VLADICA(1)/ OTHMAN VOWELS
<b>REPORTING</b> *A&E reporting	0900 - 1000 1000 - 1100 1100 - 1200 1200 - 1300	DE COSTA DE COSTA	1400-1500 1500-1600 1600-1700	LEE, GRAYSON LEE, GRAYSON GRAYSON
<b>ICU</b>	1130	DE COSTA	High Dep 1400-1500	LEE
<b>Mammo</b>	a.m.	TSE	p.m.	-----
<b>ANGIO</b>	a.m.	BAKER, GOOLAM, O'GRADY		BAKER, GOOLAM, O'GRADY
<b>CT</b> R = Reporting/ E = Enquiries/P=Procedure I=Interventional	0800 - 0900 0900 - 1300 1000	OTHMAN VLADICA(I), VOWELS, KIRWAN/GAO-E VLADICA - Bx	1300-1400 1400-1700 1700-2200 CT Interventional	HEYWORTH LI(I), TSE, YEO/GAO-E YEO
<b>SCREENING + PLAIN FILMS + CT PROTOCOLS</b>	a.m.	HEPWORTH sup LEE	p.m.	HEYWORTH sup PEDUTO
<b>MRI</b>	0800 - 0900 0900 - 1300	OTHMAN LEE, MILA	1300-1400 1400-1700 1700-2200	HEYWORTH DE COSTA, PEDUTO, KIRWAN YEO
<b>ULTRASOUND</b>	a.m.		p.m.	MILA
<b>MEETINGS</b>	0800 0800 0900 0830 - 1300	Nephrology - MILA Angio Mtg - 2nd Tues Month(2) Lymphoma - HEYWORTH Interviewing - PEDUTO	1300 1400 pm 1800	Radiation/Oncology-Fortnight(2) Rheumatology - DE COSTA(1) Research - JAMEEL Physics Course (1)
<b>TUTORIALS</b>	0800		1300	LI
<b>PT CONSULTS</b>	LI - 1000 & 1030 /VLADICA - 1100			
<b>OTHER HOSPITAL(S)</b>	ZHU/ RUEBEN/ LIM			
<b>AUBURN</b>	THAMBUGALA/ WANG			

## BACKLOG ROSTER

ON CALL		ABSENT	
CT & General: Evening 1700 - 2200	C YEO	All day	GOMES, MCIVOR, SO, YOUNG(Uni), NASREDDINE, NG, AL-ASADY, KARUNARATNE, SCHAMSCHULA, DENNIEN, CONYNGHAM, NANDU, MOHOTTI, CHUA, KHOO, JAMEEL, (SHIV)
CT & General: Night 2200 - 0800	EUGENE		
Angiography & Diagnostic	YOUNG/ PEDUTO/ NANDU		
Radiographer	Per Roster		
CT Radiographer	K CHEN HUILIN		
Ang Radiographer	G HINKLEY		
Registered Nurse	V JEROME		



## RADIOLOGISTS' ROSTER

Monday 24th May 2021

	a.m.		p.m.	
<b>CASB CT/CR</b>	0900-1300	NGUYEN(1)/ YEO	1300-1700	LEE(1)/ YEO
*1 - On Site	*2 - Main Dept/Home	BAKER		SO
<b>REPORTING</b>	0900 - 1000	SO	1400-1500	
*A&E reporting	1000 - 1100	SO	1500-1600	PEDUTO
# Hot reporting	1100 - 1200		1600-1700	PEDUTO
	1200 - 1300			
ICU	1130	SO	High Dep 1400-1500	PEDUTO
Mammo	a.m.	SCHAMSCHULA	p.m.	SCHAMSCHULA
<b>ANGIO</b>	a.m.	YOUNG, LI, GOOLAM, (VLADICA)	p.m.	YOUNG, LI, GOOLAM
<b>CT</b>	0800 - 0900	YEO	1300-1400	MILA
R = Reporting/ E= Enquires/ P=Procedures I=Interventional if reqd	0900 - 1300	AL-ASADY(I), MILA-E, GAO-R	1400-1700	AL-ASADY(I), BAKER, WANG-E, GAO-R
	1000	AL-ASADY - Bx	1700-2200	WANG
			CT Interventional	AL-ASADY - MWA @ 1400
<b>SCREENING + PLAIN FILMS + CT PROTOCOLS</b>	a.m.	HEYWORTH sup AL-ASADY	p.m.	HEYWORTH sup NGUYEN
<b>MRI</b>	0800 - 0900	YEO	1300-1400	MILA
	0900 - 1300	PEDUTO, LEE, OTHMAN	1400-1700	NGUYEN, OTHMAN
			1700-2200	WANG
<b>ULTRASOUND</b>	a.m.		p.m.	MILA
<b>MEETINGS</b>	0730	Breast Tumour -	all day	NANDU - Body
	0700	Orthopaedics -		
	0745	Upper GI MDT Mtg - AL-ASADY	1500	Trauma Scorpio Lecture - SOWANG
	1200	Sarcoma - BAKER		
	1245-1400	Liver - PEDUTO/NANDU/AL-ASADY/SO		
<b>TUTORIALS</b>	0800	YOUNG - Pathology	1300-1400	
<b>PT CONSULT</b>	AL-ASADY @ 1100			
<b>OTHER HOSPITAL(S)</b>	ZHU/REUBEN/LIM			
<b>AUBURN</b>	VOWELS/ KIRWAN			

## Backlog Roster

ON CALL		ABSENT	
CT & General: Evening 1700 - 2200	J WANG	All day	DE COSTA, NASREDDINE, O'GRADY, MCIVOR, GRAYSON, GOMES, KARUNARATNE, NG, DENNIEN, CONYNGHAM, JAMEEL, MOHOTTI, CHUA, KHOO, (SHIV)
CT & General: Night 2200 - 0800	EUGENE		
Angiography & Diagnostic	YOUNG/ PEDUTO/ NANDU		
Radiographer	Per Roster	pm	
CT Radiographer	J BUTERIN		
Ang Radiographer	R WAGENER		
Registered Nurse	L TSANG		

# RADIOLOGISTS' ROSTER

Tuesday 18th May 2021

	a.m.		p.m.	
CASB CT/CR	0900-1300	THAMBU(9-11)/TSE(11-13)/ WANG	1300-1700	THAMBUGALA(1)/ WANG
*1 - On Site	*2 - Main Dept/Home	TSE(0900-1100)/WANG		VOWELS
REPORTING	0900 - 1000	PEDUTO, KIRWAN	1400-1500	
*A&E reporting	1000 - 1100	PEDUTO, KIRWAN	1500-1600	DE COSTA
	1100 - 1200	KIRWAN	1600-1700	DE COSTA
	1200 - 1300	KIRWAN		
ICU	1130	PEDUTO	High Dep	DE COSTA
Mammo	a.m.	No Mammo's	1400-1500	
			p.m.	-----
ANGIO	a.m.	AL-ASADY, LI, GOOLAM, (VLADICA)		AL-ASADY, GOOLAM, (VLADICA)
CT	0800 - 0900	HEYWORTH	1300-1400	NANDU
R = Reporting/ E = Enquiries/P=Procedure	0900 - 1300	VOWELS, HEYWORTH-E	1400-1700	LI(I), KARUNARATNE (1500-1600), HEYWORTH-R, OTHMAN-E
I=Interventional			1700-2200	OTHMAN
			CT Interventional	
SCREENING + PLAIN FILMS + CT PROTOCOLS	a.m.	EUGENE sup KARUNARATNE	p.m.	EUGENE sup TSE
	0800 - 0900	HEYWORTH	1300-1400	NANDU
MRI	0900 - 1300	KARUNARATNE, DE COSTA, JAMEEL, ZHU	1400-1700	GRAYSON, PEDUTO, TSE, ZHU
			1700-2200	OTHMAN
ULTRASOUND	a.m.		p.m.	KIRWAN
	0730	Neurosurgical - WANG	1300	Radiation/Oncology-Fortnight(2)
MEETINGS	0800	Nephrology - EUGENE	all day	Procedures - NANDU
	0900 - 1300	DOT Duties - GRAYSON		
	0900	Lymphoma - HEYWORTH	pm	Research - JAMEEL
TUTORIALS	0800 - 0900	TSE	1300 - 1400	LI
	1100 - 1300	THAMBUGALA	1300 - 1500	KARUNARATNE
PT CONSULT	LI @ 1400			
OTHER HOSPITAL(S)	RUEBEN/ LIM			
AUBURN	DENNIEN/ MILA			

## BACKLOG ROSTER

ON CALL		ABSENT	
CT & General: Evening 1700 - 2200	G OTHMAN	All day	GOMES, MCIVOR, SO, YOUNG(Uni), NASREDDINE, BAKER, LEE, NG, SCHAMSCHULA, CONYNGHAM, MAOHOTTI, CHUA, KHOO, O'GRADY, (YEO)
CT & General: Night 2200 - 0800	SHIV		
Angiography & Diagnostic	BAKER/ GOOLAM/ NGUYEN/ JAMEEL		
Radiographer	Per Roster		
CT Radiographer	A CHAN		
Ang Radiographer	A DAO		
Registered Nurse	K TORIO		

## RADIOLOGISTS' ROSTER

### Monday 17th May 2021 Version 2

	a.m.		p.m.	
<b>CASB CT/CR</b>	0900-1300	DENNIEN(1), KIRWAN	1300-1700	SO(1)/ KIRWAN
*1 - On Site	*2 - Main Dept/Home	NGUYEN(0900-1100)		DENNIEN
<b>REPORTING</b>	0900 - 1000	OTHMAN	1400-1500	
*A&E reporting	1000 - 1100	OTHMAN	1500-1600	LEE
# Hot reporting	1100 - 1200	OTHMAN	1600-1700	LEE
	1200 - 1300	OTHMAN		
ICU	1130	NGUYEN	High Dep 1400-1500	LEE
Mammo	a.m.	VOWELS	p.m.	VOWELS
<b>ANGIO</b>	a.m.	YOUNG, LI, GOOLAM, O'GRADY, (AL-ASADY)	p.m.	YOUNG, LI, GOOLAM, O'GRADY, (AL-ASADY)
<b>CT</b>	0800 - 0900	WANG	1300-1400	HEYWORTH
R = Reporting/ E= Enquires/ P=Procedures I=Interventional if reqd	0900 - 1300	BAKER(I), SO, EUGENE-E	1400-1700	BAKER, EUGENE-R, MILA-E
	1030	BAKER - Bx	1700-2200	MILA
			CT Interventional	YOUNG - Bx @ 1500
<b>SCREENING + PLAIN FILMS + CT PROTOCOLS</b>	a.m.	HEYWORTH sup SO	p.m.	HEYWORTH sup PEDUTO
<b>MRI</b>	0800 - 0900 0900 - 1300	WANG PEDUTO, LEE, JAMEEL, WANG	1300-1400 1400-1700 1700-2200	HEYWORTH NGUYEN, PEDUTO, JAMEEL, WANG MILA
<b>ULTRASOUND</b>	a.m.		p.m.	OTHMAN
<b>MEETINGS</b>	0730 0700 0745 1200 1245-1400	Breast Tumour - Orthopaedics - Upper GI MDT Mtg - LI Sarcoma - BAKER Liver - PEDUTO/JAMEEL/SO	all day	Procedures - NANDU
<b>TUTORIALS</b>	0800		1300-1400 1700	LEE NGUYEN
<b>PT CONSULTS</b>	BAKER @ 1000			
<b>OTHER HOSPITAL(S)</b>	RUEBEN/ LIM			
<b>AUBURN</b>	KARUNARATNE/ ZHU			

### Backlog Roster

ON CALL		ABSENT	
CT & General: Evening 1700 - 2200	MILA	All day	DE COSTA, NASREDDINE, MCIVOR, GRAYSON, GOMES, NG, SCHAMSCHULA, GRAYSON, CONYNGHAM, MOHOTTI, CHUA, KHOO, (YEO), VLADICA
CT & General: Night 2200 - 0800	SHIV		
Angiography & Diagnostic	VLADICA/ GOOLAM/ NGUYEN/ JAMEEL		
Radiographer	Per Roster		
CT Radiographer	F GALL		
Ang Radiographer	JAE PARK		
Registered Nurse	S VILLARYATTON		

## RADIOLOGISTS' ROSTER

### Friday 14th May 2021 Version 2

	a.m.		p.m.	
<b>CASB CT/CR</b>	0900-1300	KARUNARATNE(1)/ MOHOTTI	1300-1700	RAMASWAM(1)/ MOHOTTI
*1 - On Site	*2 - Main Dept/Home	DE COSTA		LEE(1500-1700)
<b>REPORTING</b>	0900 - 1000		1400-1500	
*A&E reporting	1000 - 1100	K P WONG	1500-1600	
	1100 - 1200	KP WONG	1600-1700	
	1200 - 1300	KP WONG(til 1400)		
<b>ICU</b>	1130	RAMASWAMI	High Dep	LEE
<b>Mammo</b>	a.m.	VOWELS, ZHU	1400-1500	
			p.m.	VOWELS
<b>ANGIO</b>	a.m.	BAKER	p.m.	BAKER
<b>CT</b>	0800 - 0900	MOHOTTI	1300-1400	ZHU
R = Reporting	0900 - 1300	RAMASWAMI(0900-1100),	1400-1700	DE COSTA, KIRWAN-E, HEYWORTH-R
E = Enquires		HEYWORTH-E	1700-2200	KIRWAN
P= Procedure			CT Interventional	
CT Interventional				
<b>SCREENING + PLAIN FILMS + CT PROTOCOLS</b>	a.m.	OTHMAN sup LEE	p.m.	OTHMAN sup DE COSTA
<b>MRI</b>	0800 - 0900	MOHOTTI	1300-1400	ZHU
	0900 - 1300	LEE, JAMEEL	1400-1700	KARUNARATNE, JAMEEL
			1700-2200	KIRWAN
<b>ULTRASOUND</b>	a.m.		p.m.	ZHU
<b>MEETINGS</b>	0730 - 0830	Clinical Council - DE COSTA		
	0730 - 0900	Uro Oncology MDT -		
	0730	GIT Lower MDT - LEE		
<b>TUTORIALS</b>	0800		1300	RAMASWAMI
<b>all day</b>	Teaching(CHUA)/ MSK(CONYNGHAM)/ Procedures(NANDU)			
<b>OTHER HOSPITAL(S)</b>	RUEBEN/ LIM			
<b>AUBURN</b>	SO/ EUGENE			

#### BACKLOG ROSTER

ON CALL		ABSENT	
CT & General: Evening 1700 - 2200	A KIRWAN	All day	YOUNG, SCHAMSCHULA, NG, AL-ASADY, LI, O'GRADY, MCIVOR, PEDUTO, NASREDDINE, DENNIEN, GOMES, GRAYSON, KHOO, WANG, MILA, (YEO), VLADICA(Sick Leave), GOOLAM
CT & General: Night 2200 - 0800	SHIV		
Angiography & Diagnostic	AL-ASADY/ GRAYSON/ CONYNGHAM		
Radiographer	Per Roster		
CT Radiographer	S SAGHRI		
Ang Radiographer	R WAGENER		
Registered Nurse	J SARA		

## RADIOLOGISTS' ROSTER

Thursday 13th May 2021

	a.m.		p.m.	
<b>CASB CT/CR</b>	0900-1300	SCHAMSCHULA/EUGENE	1300-1700	GOMES/EUGENE
*1 - On Site	*2 - Main/ Dept/Home	YOUNG		PEDUTO
<b>REPORTING</b>	0900 - 1000	PEDUTO	1400-1500	THAMBUGALA(NICU)
*A&E reporting	1000 - 1100	PEDUTO	1500-1600	LEE, THAMBUGALA
# Hot reporting	1100 - 1200		1600-1700	LEE, THAMBUGALA
	1200 - 1300			
<b>ICU</b>	1130	PEDUTO	High Dep	LEE
<b>Mammo</b>	a.m.	GRAYSON	1400-1500	
			p.m.	
<b>ANGIO</b>	a.m.	SO, LI, GOOLAM	p.m.	SO, LI, GOOLAM
<b>CT</b>	0800 - 0900	MILA	1300-1400	NANDU
R = Reporting/ E = Enquiries/P=Procedure/ I=Interventional	0900 - 1300	LEE, THAMBUGALA, HEYWORTH-E	1400-1700	AL-ASADY(I), GRAYSON, SHIV-E, HEYWORTH-R,
			1700-2200	SHIV
			CT Interventional	1300 Microwave Ablation--AL-ASADY
<b>SCREENING + PLAIN FILMS + CT PROTOCOLS</b>	a.m.	MILA Sup YOUNG	p.m.	MILA Sup LEE
<b>MR</b>	0800 - 0900	MILA	1300-1400	NANDU
	0900 - 1300	GOMES, DE COSTA, ZHU, JAMEEL	1400-1700	YOUNG, SCHAMSCHULA, NANDU
			1700-2200	SHIV
<b>ULTRASOUND</b>	a.m.		p.m.	ZHU
<b>MEETINGS</b>	0730	Vascular - YOUNG(1)	1230	Endocrine Mtg - GOOLAM
	0800	Respiratory - CONYNGHAM	all day	Teaching(CHUA)/MSK(CONYNGHAM)
	0830	Gastro - YOUNG/SO(1)	1500	Medical Oncology - YOUNG(2)
	0915	Geriatrics - YOUNG(1)	am	Procedures(NANDU)
	0730	Melanoma Mtg - BAKER	pm	Research - JAMEEL
	1100-1130	Meeting with Dean - YOUNG	1300	PTB Mtg - GOMES (1)
<b>TUTORIALS</b>	0800-0900	GRAYSON	1300-1400 1700 - 1915	PEDUTO THAMBUGALA
<b>PATIENT CONSULT</b>	1230 AL-ASADY			
<b>OTHER HOSPITAL</b>	RUEBEN/LIM			
<b>AUBURN</b>	RAMASWAMI/KIRWAN			

## BACKLOG ROSTER

AT 9-11.15 pm.

ON CALL		ABSENT	
CT & General: Evening 1700 - 2200	SHIV	All day	VLADICA, KARUNARATNE, BAKER, O'GRADY, DENNIEN, VOWELS, MCIVOR, NASREDDINE, KHOO, (WANG), OTHMAN, NG, MOHOTTI(Sick leave)
CT & General: Night 2200 - 0800	C YEO		
Angiography & Diagnostic	AL-ASADY/GRAYSON/CONYNGHAM		
Radiographer	Per Roster	am	AL-ASADY(Sick Leave)
CT Radiographer	M MEAS		
Ang Radiographer	A CAMBORDA	pm	DE COSTA
Registered Nurse	K TORIO		

## RADIOLOGISTS' ROSTER

### Wednesday 12th May 2021 Versio 2

	a.m.		p.m.	
<b>CASB CT/CR</b>	0900 - 1300	BAKER(1)/ HEYWORTH	1300-1700	NGUYEN(1)/HEYWORTH
*1 - On Site	*2 - Main Dept/ Home	VOWELS(2)		SO(2)
<b>REPORTING</b>	0900 - 1000	SCHAMSCHULA	1400-1500	MOHOTTI
*A&E reporting	1000 - 1100	SCHAMSCHULA	1500-1600	LI, MOHOTTI
	1100 - 1200		1600-1700	LI, MOHOTTI
	1200 - 1300			
<b>ICU</b>	1130	SCHAMSCHULA	High Dep	LI
<b>Mammo</b>	a.m.	GRAYSON	1400-1500	
			p.m.	
<b>ANGIO</b>	a.m.	VLADICA, AL-ASADY, GOOLAM	p.m.	VLADICA, AL-ASADY, GOOLAM
<b>CT</b>	0800 - 0900	HEYWORTH	1300-1400	MOHOTTI
R = Reporting/E = Enquiries/P=Procedure I = Interventional if reqd	0900 - 1300	LI, SO, NGUYEN, KIRWAN-E	1400-1700	BAKER(I), VOWELS, DE COSTA, OTHMAN-E
			1700-2200	OTHMAN
			CT Interventional	
<b>SCREENING + PLAIN FILMS + CT PROTOCOLS</b>	a.m.	MOHOTTI sup SO	p.m.	MOHOTTI sup LI
<b>MRI</b>	0800 - 0900	HEYWORTH	1300-1400	MOHOTTI
	0900 - 1300	PEDUTO, DE COSTA (9-11), KARUNARATNE, JAMEEL	1400-1700	GRAYSON, SCHAMSCHULA, JAMEEL
	1000-1100	NGUYEN(Cardiac MRI)	1700-2200	OTHMAN
<b>ULTRASOUND</b>	a.m.		p.m.	KIRWAN
<b>MEETINGS</b>	0830-0900	O & G Mtg - BAKER	1300-1400	Oncology Clinic (every 2nd Wednesday)
	0900	Haematology - MOHOTTI	1300	SRMO Inservice (1)
	1100-1200	IEM - DE COSTA	1400	Infectious Diseases - NANDU
	1130	Neurology - NANDU	1500-1700	ELR - KARUNARATNE
			1400	Staff Specialist Meeting (1)
<b>TUTORIALS</b>	0800	HETI	1300-1400	LI
<b>all day</b>	Teaching(CHUA)/ MSK(CONYNGHAM)/ Procedures(NANDU)			
<b>PT CONSULTS</b>	BAKER	1000		
<b>OTHER HOSPITAL(S)</b>	RUEBEN/ LIM			
<b>AUBURN</b>	YOUNG/MILA			

ON CALL		ABSENT	
CT & General: Evening 1700 - 2200	G OTHMAN	All day	LEE, O'GRADY, MCIVOR, NASREDDINE, NG, DENNIEN, KHOO, SHIV, ZHU (WANG), GOMES(Sick Leave), EUGENE(Sick Leave)
CT & General: Night 2200 - 0800	C YEO		
Angiography & Diagnostic	AL-ASADY/GRAYSON/CONYNGHAM		
Radiographer	per roster	pm	PEDUTO
CT Radiographer	N SOUTHWELL		
Ang Radiographer	Y ALIZADOHY		
Registered Nurse	L TSANG		

## RADIOLOGISTS' ROSTER

Tuesday 11th May 2021

	a.m.		p.m.	
<b>CASB CT/CR</b>	0900-1300	PEDUTO(1)/ ZHU	1300-1700	KARUNARATNE(1)/ ZHU(GRAYSON 2-3)
*1 - On Site	*2 - Main Dept/Home	GRAYSON(2)		THAMBUGALA(2)(NICU)
<b>REPORTING</b>	0900 - 1000	VOWELS, MOHOTTI	1400-1500	OTHMAN
*A&E reporting	1000 - 1100	VOWELS, MOHOTTI	1500-1600	GRAYSON, OTHMAN
	1100 - 1200	MOHOTTI	1600-1700	GRAYSON, OTHMAN
	1200 - 1300	MOHOTTI		
ICU	1130	VOWELS	High Dep 1400-1500	GRAYSON
Mammo	a.m.	TSE	p.m.	-----
<b>ANGIO</b>	a.m.	BAKER, GOOLAM		BAKER, GOOLAM
<b>CT</b>	0800 - 0900	KIRWAN	1300-1400	EUGENE
R = Reporting/ E = Enquiries/P=Procedure	0900 - 1300	VLADICA(I), LI, OTHMAN-E	1400-1700	LI(I), VOWELS, PEDUTO, MILA-E
I=Interventional	0900	VLADICA-Cholonography	1700-2200	MILA
	1200	LI - MWA	CT Interventional	LI - Lumber Puncture @ 1400
<b>SCREENING + PLAIN FILMS + CT PROTOCOLS</b>	a.m.	EUGENE sup THAMBUGALA	p.m.	EUGENE sup VOWELS
<b>MRI</b>	0800 - 0900	KIRWAN	1300-1400	EUGENE
	0900 - 1300	KARUNARATNE, JAMEEL, THAMBUGALA, KIRWAN	1400-1700	TSE, VLADICA, KIRWAN
			1700-2200	MILA
<b>ULTRASOUND</b>	a.m.		p.m.	MOHOTTI
<b>MEETINGS</b>	0730	Neurosurgical -	1300	Radiation/Oncology-Fortnight(2)
	0800	Nephrology - OTHMAN	1400	Rheumatology - KARUNARATNE (1)
	0800	Angio Mtg - 2nd Tues Month(2)	all day	Teaching(CHUA)/ Chest(CONYNGHAM)
	0900	Lymphoma - KIRWAN	pm	Research - JAMEEL
	all day	Interviews C/Hospital - DE COSTA		
<b>TUTORIALS</b>	0800	TSE	1300	THAMBUGALA
<b>PT CONSULTS</b>	LI - 1000/1100 & 1130(3x)			
<b>OTHER HOSPITAL(S)</b>	RUEBEN/ LIM			
<b>AUBURN</b>	LEE/ HEYWORTH			

## BACKLOG ROSTER

ON CALL		ABSENT	
CT & General: Evening 1700 - 2200	MILA	All day	GOMES, MCIVOR, SO, YOUNG(Uni), O'GRADY, NG, NASREDDINE, AL-ASADY, SCHAMSHULA, DENNIEN, NANDU, KHOO, SHIV, (WANG)
CT & General: Night 2200 - 0800	C YEO		
Angiography & Diagnostic	AL-ASADY/ GRAYSON/ CONYNGHAM		
Radiographer	Per Roster		
CT Radiographer	J WONG		
Ang Radiographer	L ILIN		
Registered Nurse	D O'NEILL		

## RADIOLOGISTS' ROSTER

### Monday 10th May 2021 Version 2

	a.m.		p.m.	
CASB CT/CR	0900-1300	VOWELS(1)/ MILA	1300-1700	SO(1)/ MILA
*1 - On Site	*2 - Main Dept/Home	VLADICA		VOWELS
REPORTING	0900 - 1000	SO	1400-1500	KIRWAN
*A&E reporting	1000 - 1100	SO	1500-1600	NGUYEN, KIRWAN
# Hot reporting	1100 - 1200		1600-1700	NGUYEN, KIRWAN
	1200 - 1300			
ICU	1130	SO	High Dep	NGUYEN
Mammo	a.m.	SCHAMSCHULA	1400-1500	SCHAMSCHULA
			p.m.	
ANGIO	a.m.	YOUNG, GOOLAM, (LI)	p.m.	YOUNG, GOOLAM, (LI)
CT	0800 - 0900	HEYWORTH	1300-1400	KIRWAN
R = Reporting/ E= Enquires/ P=Procedures	0900 - 1300	AL-ASADY(I), NGUYEN, KIRWAN-E	1400-1700	AL-ASADY(I), GOMES, EUGENE-E
I=Interventional if reqd	1000	AL-ASADY - Injection	1700-2200	EUGENE
			CT Interventional	AL-ASADY - MWA @ 1400
SCREENING + PLAIN FILMS + CT PROTOCOLS	a.m.	HEYWORTH sup NGUYEN	p.m.	HEYWORTH sup GOMES
MRI	0800 - 0900	HEYWORTH	1300-1400	KIRWAN
	0900 - 1300	LEE, GOMES, JAMEEL, ZHU	1400-1700	LEE, JAMEEL
			1700-2200	EUGENE
ULTRASOUND	a.m.		p.m.	ZHU
MEETINGS	0730	Breast Tumour -	all day	Teaching - CHUA
	0700	Orthopaedics -	all day	MSK- CONYNGHAM/ Procedures- NANDU
	0745	Upper GI MDT Mtg - SO		
	1200	Sarcoma -		
	1245-1400	Liver - JAMEEL/AL-ASADY/SO		
TUTORIALS	0800	YOUNG - Pathology	1300-1400	LEE
OTHER HOSPITAL(S)	RUEBEN/ LIM			
AUBURN	BAKER/ OTHMAN			

#### Backlog Roster

ON CALL		ABSENT	
CT & General: Evening 1700 - 2200	EUGENE	All day	DE COSTA, NASREDDINE, O'GRADY, MCIVOR, GRAYSON, KARUNARATNE, NG, DENNINE, KHOO, SHIV, (WANG), PEDUTO(Sick Leave), MOHOTTI(Sick leave)
CT & General: Night 2200 - 0800	C YEO		
Angiography & Diagnostic	AL-ASADY/ GRAYSON/ CONYNGHAM		
Radiographer	Per Roster	pm	VLADICA
CT Radiographer	K CHEN HUILIN		
Ang Radiographer	S NGUYEN		
Registered Nurse	D O'NEIL		



## RADIOLOGISTS' ROSTER

### Friday 7th May 2021 Version 2

	a.m.		p.m.	
<b>CASB CT/CR</b>	0900-1300	SO(1)/ MOHOTTI	1300-1700	DE COSTA(1)/ MOHOTTI
<b>*1 - On Site</b>	<b>*2 - Main Dept/Home</b>	GOMES(1100 -1300)		RAMASWAMI(when available)
<b>REPORTING</b>	0900 - 1000	KARUNARATNE	1400-1500	
*A&E reporting	1000 - 1100	KARUNARATNE, KP WONG, EUGENE	1500-1600	RAMASWAMI
	1100 - 1200	KP WONG, EUGENE	1600-1700	RAMASWAMI
	1200 - 1300	KP WONG(til 2pm), EUGENE		
<b>ICU</b>	1130	KARUNARATNE	High Dep	RAMASWAMI
<b>Mammo</b>	a.m.	VOWELS	1400-1500	
			p.m.	VOWELS
<b>ANGIO</b>	a.m.	BAKER, GOOLAM	p.m.	BAKER, GOOLAM
<b>CT</b>	0800 - 0900	KIRWAN	1300-1400	ZHU
R = Reporting	0900 - 1300	DE COSTA, GRAYSON, ZHU-E	1400-1700	SO(I), ZHU-R, MILA-E
E = Enquires			1700-2200	MILA
P= Procedure			CT Interventional	SO - Bx & Drainage - 1400/1500
CT Interventional				
<b>SCREENING + PLAIN FILMS + CT PROTOCOLS</b>	a.m.	KIRWAN sup DE COSTA	p.m.	KIRWAN sup RAMASWAMI
<b>MRI</b>	0800 - 0900	KIRWAN	1300-1400	ZHU
	0900 - 1300	RAMASWAMI, JAMEEL	1400-1700	KARUNARATNE, GOMES(fr 3pm), JAMEEL
			1700-2200	MILA
<b>ULTRASOUND</b>	a.m.		p.m.	EUGENE
<b>MEETINGS</b>	0715	ENT - GOMES	all day	CONYNGHAM(Chest)/ NANDU(Procedures)
	0800	Urology - None		
	all day	Teaching - CHUA		
	0730	GIT Lower MDT - LEE		
	0800-1030	Head and Neck - GOMES/EUGENE		
<b>TUTORIALS</b>	0800	SO	1300 1400 - 1500	RAMASWAMI GOMES
<b>OTHER HOSPITAL(S)</b>	LIM/ RUEBEN			
<b>AUBURN</b>	LEE/ HEYWORTH			

#### BACKLOG ROSTER

ON CALL		ABSENT	
CT & General: Evening 1700 - 2200	MILA	All day	YOUNG, SCHAMSCHULA, NG, AL-ASADY, LI, O'GRADY, MCIVOR, PEDUTO, NASREDDINE, DENNIEN, SHIV, KHOO, (WANG), VLADICA(Sick Leave), OTHMAN(Sick Leave)
CT & General: Night 2200 - 0800	C YEO		
Angiography & Diagnostic	LI/ TSE/ NANDU		
Radiographer	Per Roster	pm	GRAYSON
CT Radiographer	J HICKS		
Ang Radiographer	L ILIN		
Registered Nurse	J SANCHEZ		

## RADIOLOGISTS' ROSTER

### Thursday 6th May 2021 Version 2

	a.m.		p.m.	
<b>CASB CT/CR</b>	0900-1300	RAMASWAMI/HEYWORTH	1300-1700	PEDUTO/HEYWORTH
*1 - On Site	*2 - Main/ Dept/Home	LEE		RAMASWAMI
<b>REPORTING</b>	0900 - 1000		1400-1500	
*A&E reporting	1000 - 1100		1500-1600	LEE
# Hot reporting	1100 - 1200		1600-1700	LEE
	1200 - 1300			
ICU	1130	DE COSTA	High Dep 1400-1500	LEE
Mammo	a.m.	GRAYSON	p.m.	-----
<b>ANGIO</b>	a.m.	SO, LI, GOOLAM	p.m.	SO, LI, GOOLAM
<b>CT</b>	0800 - 0900	HEYWORTH	1300-1400	EUGENE
R = Reporting/ E = Enquiries/P=Procedure/ I=Interventional	0900 - 1300	DE COSTA(9-11), EUGENE-E	1400-1700	NG, YEO-E
			1700-2200	YEO
			CT Interventional	
<b>SCREENING + PLAIN FILMS + CT PROTOCOLS</b>	a.m.	OTHRMAN Sup GOMES	p.m.	OTHRMAN Sup NG
<b>MRI</b>	0800 - 0900	HEYWORTH	1300-1400	EUGENE
	0900 - 1300	GOMES, NANDU	1400-1700	GRAYSON (+ Breast Bx), NANDU
		PEDUTO (+ Procedure)	1700-2200	YEO
<b>ULTRASOUND</b>	a.m.		p.m.	CONYNGHAM
<b>MEETINGS</b>	0730	Vascular -LI(1)		
	0800	Respiratory - CONYNGHAM		
	0830	Gastro - SO (1)		
	0915	Geriatrics - (1)	1400-1700	Head & Neck MDT Prep - GOMES/ EUGENE
	1000	ILD - CONYNGHAM		
	0730	Melanoma Mtg - BAKER		
<b>TUTORIALS</b>	0800-0900	GRAYSON	1300-1400 - 1700	1600 PEDUTO NG
<b>O &amp; G Consult</b>	LEE @ 1000			
TEACHING ALL DAY: (CHUA) / MSK(CONYNGHAM) am				
<b>OTHER HOSPITAL</b>	RUEBEN, LIM			
<b>AUBURN</b>	THAMBUGALA/MOHOTTI			

#### BACKLOG ROSTER

ON CALL		ABSENT	
CT & General: Evening 1700 - 2200	C YEO	All day	VLADICA, KARUNARATNE, BAKER, O'GRADY, DENNIEN, VOWELS, MCIVOR, NASREDDINE, AL-ASADY, SCHAMSHULA, YOUNG, KHOO, (MILA), SHIV, ZHU(Sick Leave), KIRWAN(Carers Leave), JAMEEL(Sick leave)
CT & General: Night 2200 - 0800	J WANG		
Angiography & Diagnostic	LI/TSE/NANDU		
Radiographer	Per Roster	am	NG
CT Radiographer	S RAJAPAKSE	pm	DE COSTA
Ang Radiographer	J PARK		
Registered Nurse	R NALLARETNAM		

## RADIOLOGISTS' ROSTER

### Tuesday 4th May 2021 Version 2

	a.m.		p.m.	
<b>CASB CT/CR</b>	0900-1300	NG(1)/ ZHU	1300-1700	THAMBUGALA(1)(NICU)/ ZHU
*1 - On Site	*2 - Main Dept/Home	THAMBUGALA(2)(NICU)		KARUNARATNE(2)
<b>REPORTING</b>	0900 - 1000	DE COSTA, EUGENE, MOHOTTI	1400-1500	KIRWAN
*A&E reporting	1000 - 1100	DE COSTA, EUGENE, MOHOTTI	1500-1600	VLADICA, KIRWAN
	1100 - 1200	EUGENE, MOHOTTI	1600-1700	VLADICA, KIRWAN
	1200 - 1300	EUGENE, MOHOTTI		
ICU	1130	DE COSTA	High Dep 1400-1500	VLADICA
Mammo	a.m.	No Mammo's	p.m.	-----
<b>ANGIO</b>	a.m.	AL-ASADY, GOOLAM, (JL)		AL-ASADY, GOOLAM, (JL)
<b>CT</b>	0800 - 0900	MOHOTTI	1300-1400	NANDU
R = Reporting/ E = Enquiries/P=Procedure	0900 - 1300	VLADICA(I), TSE, KIRWAN-E	1400-1700	GRAYSON, SHIV-E, MOHOTTI-R
=Interventional	0900	VLADICA - RFA	1700-2200	SHIV
			CT Interventional	
<b>SCREENING + PLAIN FILMS + CT PROTOCOLS</b>	a.m.	HEYWORTH sup TSE	p.m.	HEYWORTH sup VLADICA
<b>MRI</b>	0800 - 0900	MOHOTTI	1300-1400	NANDU
	0900 - 1300	KARUNARATNE, JAMEEL OTHMAN	1400-1700	TSE, NG(2-4), OTHMAN
			1700-2200	SHIV
<b>ULTRASOUND</b>	a.m.		p.m.	EUGENE
<b>MEETINGS</b>	0730	Neurosurgical - EUGENE	pm	Admin Duties - DE COSTA
	0800	Nephrology - KIRWAN	all day	Chest(CONYNGHAM)
	0800	Angio Mtg - None	all day	Teaching(CHUA)/MSK(NANDU)
	0900	Lymphoma - HEYWORTH	pm	Research - JAMEEL
	1100 - 1300	Admin - VLADICA	1800	Physics Course (1)
<b>TUTORIALS</b>	0800		1300-1400	THAMBUGALA
	1200-1300	TSE	1600 - 1700	NG
<b>OTHER HOSPITAL(S)</b>	RUEBEN/ LIM			
<b>AUBURN</b>	VOWELS/ YEO			

#### BACKLOG ROSTER

ON CALL		ABSENT	
CT & General: Evening 1700 - 2200	SHIV	All day	GOMES, MCIVOR, SO, YOUNG(Uni), O'GRADY, NASREDDINE, BAKER, LEE, PEDUTO, SCHAMSCHULA, DENNIEN, KHOO, (MILA)
CT & General: Night 2200 - 0800	J WANG		
Angiography & Diagnostic	LI/ TSE/ NANDU		
Radiographer	Per Roster	am	GRAYSON
CT Radiographer	F GALL		
Ang Radiographer	Y ALIZADEHY		
Registered Nurse	H BONOVAS		

## RADIOLOGISTS' ROSTER

Monday 3rd May 2021

	a.m.		p.m.	
<b>CASB CT/CR</b>	0900-1300	KARUNARATNE(1)/OTHTMAN	1300-1700	LEE(1)/OTHTMAN
*1 - On Site	*2 - Main Dept/Home	NGUYEN(2)		BAKER(2)
<b>REPORTING</b>	0900 - 1000	VLADICA	1400-1500	
*A&E reporting	1000 - 1100	VLADICA	1500-1600	KARUNARATNE
# Hot reporting	1100 - 1200		1600-1700	KARUNARATNE
	1200 - 1300			
ICU	1130	VLADICA	High Dep 1400-1500	KARUNARATNE
Mammo	a.m.	VOWELS	p.m.	VOWELS
<b>ANGIO</b>	a.m.	YOUNG, LI, GOOLAM, (SO)	p.m.	YOUNG, LI, GOOLAM, (SO)
<b>CT</b>	0800 - 0900	YEO	1300-1400	KIRWAN
R = Reporting/ E= Enquires/ P=Procedures I=Interventional if reqd	0900 - 1300	AL-ASADY(I), BAKER, KIRWAN-R, HEYWORTH-E	1400-1700	AL-ASADY(I), SHIV-E, HEYWORTH-R
	1000,1100, 1300	AL-ASADY - Biopsies (3x)	1700-2200	SHIV
			CT Interventional	AL-ASADY - Bx @ 1400
<b>SCREENING + PLAIN FILMS + CT PROTOCOLS</b>	a.m.	YEO sup NGUYEN	p.m.	YEO sup KARUNARATNE
<b>MRI</b>	0800 - 0900	YEO	1300-1400	KIRWAN
	0900 - 1300	LEE, JAMEEL, EUGENE	1400-1700	NGUYEN, JAMEEL, EUGENE
			1700-2200	SHIV
<b>ULTRASOUND</b>	a.m.		p.m.	KIRWAN
<b>MEETINGS</b>	0730	Breast Tumour -	1230	Rehab - KIRWAN
	0700	Orthopaedics -	all day	Teaching(CHUA/ Chest(CONYNGHAM)
	0745	Upper GI MDT Mtg -	all day	Procedures(NANDU)
	1200	Sarcoma - BAKER		
	1245-1400	Liver - JAMEEL/AL-ASADY / NK		
<b>TUTORIALS</b>	0800		1300-1400	LEE
<b>PT CONSULTS</b>	BAKER	0930, 1000, & 1030 (3x)		AL-ASADY @ 1200 (1x)
<b>OTHER HOSPITAL(S)</b>	RUEBEN/ LIM/ ZHU			
<b>AUBURN</b>	NG/ MOHOTTI			

## Backlog Roster

ON CALL		ABSENT	
CT & General: Evening 1700 - 2200	SHIV	All day	DE COSTA, NASREDDINE, O'GRADY, MCIVOR, GRAYSON, GOMES, DENNIEN, PEDUTO, SCHAMSCHULA, GRAYSON, KHOO, (MILA)
CT & General: Night 2200 - 0800	J WANG		
Angiography & Diagnostic	LI/ TSE/ NANDU		
Radiographer	Per Roster	pm	VLADICA
CT Radiographer	T MCCOSKER		
Ang Radiographer	L ILIN		
Registered Nurse	D O'NEILL		

## RADIOLOGISTS' ROSTER

Friday 30th April 2021

	a.m.		p.m.	
<b>CASB CT/CR</b>	0900-1300	DE COSTA(1)/ KIRWAN	1300-1700	VLADICA(1)/ KIRWAN
*1 - On Site	*2 - Main Dept/Home	VOWELS(0900-1100)		GRAYSON(2)
<b>REPORTING</b>	0900 - 1000	ZHU	1400-1500	SHIV
*A&E reporting	1000 - 1100	KP WONG, ZHU	1500-1600	RAMASWAMI, SHIV
	1100 - 1200	KP WONG, ZHU	1600-1700	RAMASWAMI, SHIV
	1200 - 1300	KP WONG(till 1400), ZHU		
ICU	1130	VOWELS	High Dep 1400-1500	RAMASWAMI
Mammo	a.m.	GRAYSON	p.m.	VOWELS
<b>ANGIO</b>	a.m.	BAKER, GOOLAM, (SO)	p.m.	BAKER, GOOLAM, (SO)
<b>CT</b>	0800 - 0900	ZHU	1300-1400	RUEBEN
R = Reporting	0900 - 1300	VLADICA(CTCA), SHIV-E	1400-1700	LEE, EUGENE-E
E = Enquires			1700-2200	EUGENE
P= Procedure	1300	VLADICA - Drainage	CT Interventional	
CT Interventional				
<b>SCREENING + PLAIN FILMS + CT PROTOCOLS</b>	a.m.	RUEBEN sup VLADICA	p.m.	RUEBEN sup LEE
<b>MRI</b>	0800 - 0900	ZHU	1300-1400	RUEBEN
	0900 - 1300	LEE, RAMASWAMI, JAMEEL	1400-1700	DE COSTA, JAMEEL, ZHU
			1700-2200	EUGENE
<b>ULTRASOUND</b>	a.m.	OTHMAN(N/Med)	p.m.	OTHMAN
<b>MEETINGS</b>	0730 - 0900	Uro Oncology MDT - VLADICA ftnly	all day	Teaching(CHUA)/ MSK(CONYNGHAM)
	0730	GIT Lower MDT - LEE	all day	Procedures(NANDU)
	1000 - 1100	Admin - VLADICA		
<b>TUTORIALS</b>	0800	GRAYSON	1300	
<b>OTHER HOSPITAL(S)</b>	YEO/ LIM			
<b>AUBURN</b>	KARUNARATNE/ HEYWORTH			

## BACKLOG ROSTER

ON CALL		ABSENT	
CT & General: Evening 1700 - 2200	EUGENE	All day	YOUNG, SCHAMSCHULA, NG, AL-ASADY, LI, O'GRADY, MCIVOR, PEDUTO, NASREDDINE, DENNIEN,GOMES, MOHOTTI, KHOO, (MILA)
CT & General: Night 2200 - 0800	J WANG		
Angiography & Diagnostic	SO/ KARUNARATNE/ CONYNGHAM		
Radiographer	Per Roster		
CT Radiographer	S SAGHRI		
Ang Radiographer	Y ALIZADEHY		
Registered Nurse	K TORIO		





LAN /Sites	First Name	Last Name	LAN	03-Feb	09-Feb	17-Feb	23-Feb	03-Mar	09-Mar	17-Mar	23-Mar	31-Mar	04/06/2021	14/4/21	20-Apr	28/4	04-May	12-May	18-May
Westmead	Alexander	Kirwan	LAN 2	x	x	x	x	x		x (late)		x	x 8.32	x	x			x	x
Westmead	Cheng	Yeo	LAN 2		A	x	A	x	x	x		x	x 8.24	x	x	x	x		x
Westmead	Eugene	Ng	LAN 2	x	x	x	x	x	x	x	x	x	x	x			x	x	x
Westmead	Jing Zhu	Zhou	LAN 2	x	x	x	x	x	x	x	x	x		x		x	x	x	x
Westmead	Mila	Dimitrijevic	LAN 2	x	x	x	x	x	x			x	x	x	Apology-M	x	x	x	x
Westmead	Rueben	Ganeshalingam	LAN 2	A	x	x	x	x	x	x	x		x 8.32	x	x	x		x	x
Westmead	Ghadah	Othman	LAN 2	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x

Key	Attended	x
	Apology	A
	Absent without notification	Blank





**WESTMEAD HOSPITAL DEPARTMENT MEDICAL IMAGING TUTORIAL ROSTER AS OF MAY 2021**

Please note, some Staff Specialists and VMOs will be replaced when on leave.

**Monday am**

**Monday pm** Dr R Lee

**Tuesday am** HETI/ Dr R Tse / Dr A Thambugala

**Tuesday pm** Dr J Li

**Wednesday am** HETI

**Wednesday pm** SRMO Seminar Series

**Part Ii candidates** - Dr K Nguyen, Dr K Ng

**Thursday am** Dr S Grayson

**Thursday pm** Dr T Peduto

**Friday am** Dr S So

**Friday pm** Dr KP Wong



**WMH DEPARTMENT MEDICAL IMAGING TUTORIAL ROSTER**

**WEDNESDAY LUNCHTIME INSERVICE/TEACHING**

**Presentations**

Topic	Presenter	Date
Anaphylaxis and emergency treatment	Peter Brien	21/04/2021
AKI, iodinated and gadolinium contrast	Ebtesan Mardasi	28/04/2021
Lymph node stations in the neck	Marsa Afhagi	
Pulmonary lobule - imaging and pathology	Nigel McGregor	
Spaces in the neck	Andrew Cha	
RECIST reporting	Daniel Gao	
Abdominal spaces	Halah Baqer	
Celiac trunk variants	Paul Tran	
Lymph node stations in the thorax		
Paranasal sinus spaces/anatomy		
Healing fractures, malunion, nonunion		
Pre-medication for patients with known reactions.		
What is an HRCT. What are the indications		
Pericardial recesses		
Abdominal hernias (including internal)		
PIRADS		
BIRADS		
LIRADS		
Suprasellar masses		

**Up to date as of 18 May 2021**





LAN /Sites	First Name	Last Name	LAN	03-Feb	09-Feb	17-Feb	23-Feb	03-Mar	09-Mar	17-Mar	23-Mar	31-Mar	04/06/2021	14/4/21	20-Apr	28/4	04-May	12-May	18-May
Westmead	Alexander	Kirwan	LAN 2	x	x	x	x	x		x (late)		x	x 8.32	x	x			x	x
Westmead	Cheng	Yeo	LAN 2		A	x	A	x	x	x		x	x 8.24	x	x	x	x		x
Westmead	Eugene	Ng	LAN 2	x	x	x	x	x	x	x	x	x	x	x			x	x	x
Westmead	Jing Zhu	Zhou	LAN 2	x	x	x	x	x	x	x	x	x		x		x	x	x	x
Westmead	Mila	Dimitrijevic	LAN 2	x	x	x	x	x	x			x	x	x	Apology-M	x	x	x	x
Westmead	Rueben	Ganeshalingam	LAN 2	A	x	x	x	x	x	x	x		x 8.32	x	x	x		x	x
Westmead	Ghadah	Othman	LAN 2	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x

Key	Attended	x
	Apology	A
	Absent without notification	Blank

Dear College,

I am one of the current 5<sup>th</sup> year radiology registrars at Westmead Hospital. I am writing this to give you my perspectives on Westmead Hospital as a radiology training site. I have undertaken rotations to Concord/Canterbury hospitals and Westmead Children's hospital, as well as personally knowing several radiology registrars from other training sites in Sydney. Westmead Hospital is an overall excellent place to train and I would not swap to another training site even if given the option. There are several reasons for this:

- Excellent radiology teaching – I believe that we have fantastic education and teaching available to registrars. One objective measurement of this is our results in the standardised Part 1 and 2 RANZCR examinations. I believe our examination results as a cohort can match or exceed most centres in Sydney that I am aware of. Personally, I passed all components of the Part 1 and Part 2 RANZCR examinations on my first attempt as well as receiving the MGF Donnan Prize for the Part 2 examinations in 2020, and I attribute a large portion of this success to my training at Westmead Hospital. Some of the teaching opportunities we get include:
  - Regular tutorials run by consultants, fellows or senior registrars with a particularly high volume prior to exams. This includes tutorials runs by RANZCR examiners that work at our institution. On average we receive > 5 hours of tutorials a week with the pre-examination period sometimes having up to 5 hours of tutorials on a single day.
  - Protected teaching time prior to exams - usually 2-4 weeks in total per exam candidate where the registrar is not allocated to any work shift. They can spend this time at hospital /film library studying or attending tutorials (usually a combination of both). This is in addition to being able to take at least 4 weeks of annual/study leave prior to exams.
  - Approachable consultants – for day to day reporting dilemmas and on the job learning.
- High volume centre – Westmead Hospital is a large tertiary referral centre receiving a large inpatient and outpatient work. This allows registrars to gain a large amount of imaging experience important for both real life and examination settings.
- Senior registrar opportunity – As a 5<sup>th</sup> year radiology registrar we get the chance to spend the year off the general radiology registrar roster and work on an interest area or weakness. Past registrars have spent this time doing interventional radiology work whilst others have focused on other systems e.g. body imaging. I believe this is one of the single best reasons to train at Westmead Hospital differentiating it from other sites.

I acknowledge there are some deficits at Westmead Hospital. But in my opinion these pale in comparison to its strengths. These deficits include:

- Busy after hours shifts. This is a double edged sword as we are often working full throttle in these periods, but are also exposed to a range of pathologies. It also teaches us to work efficiently, which is particularly important as radiology consultant.

Several recent improvements have been made, including:

- Departmental teaching sessions done once a week – 1 hour presentation done by an SRMO based on an interesting/relevant topic chosen by a consultant. Most consultants and registrars present on the day attend these.
- Hiring of 10 new SRMOs to help with the workload in the department. This addition has allowed delegation of some tasks that registrars previously had to do, allowing registrars further freedom to learn and perform high yield activities.
- Hiring of several new consultants in the department to reduce workload for the registrars.

I have enjoyed my time at Westmead Hospital so much that I hope stay on as the MRI fellow next year. I would also be keen to return as a consultant at Westmead Hospital one day and help the next generation of radiology registrars training at this great site.

Kind regards,

Nandula Dantanarayana (5<sup>th</sup> year radiology registrar, Westmead Hospital).

**From:** [david.farlow](#)  
**To:** [Kate Hurlle \(Western Sydney LHD\)](#)  
**Subject:** Fwd: Radiology registrar training experience at Westmead Hospital  
**Date:** Thursday, 17 June 2021 10:05:16 PM  
**Attachments:** [Radiology registrar training experience at Westmead.docx](#)

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feedback

david

----- Original message -----

From: Rebecca Lim <[REDACTED]>  
To: david.farlow <[REDACTED]>  
Cc: [REDACTED]  
Subject: Radiology registrar training experience at Westmead Hospital  
Date: Thursday, June 17, 2021 9:34 PM

Dear David,

Please see attached letter detailing my training experience at Westmead Hospital.

Good luck with the meeting tomorrow!

Kind regards,  
Rebecca



Virus-free. [www.avg.com](http://www.avg.com)

Dear Dr. Farlow,

**Re: Radiology registrar training experience at Westmead Hospital**

As a final year trainee who has worked at Westmead Hospital for the last 4 or so years, and who has cleared 9 out of 10 components of the RANZCR Part 2 examinations in a single attempt, I believe that training at Westmead Hospital, while imperfect, does have a lot of merit.

The good:

- The volume and breadth of work - We are exposed to a wide variety of pathologies from day 1 of training, which helps us to become well-rounded radiologists. The volume of work that we do (upwards of 40 CTs on a busy 12 hour weekend shift) ensures that we become efficient.
- Excellent teaching – Westmead radiology department has the benefit of having numerous world-class subspecialty radiologists, many of whom are keen to teach. During my time as an exam candidate, I found organising tutorials very easy, with most consultants being generous with their time. In the lead up to the exam, we received >5 tutorials a week, sometimes having up to 5 hours of tutorials on a single day. Our stellar performance in the part 1 and part 2 examinations proves this point.
- Protected teaching time prior to exams – Westmead radiology department has had a good track record with supporting candidates through the fellowship exams in this regard. Each first-time candidate gets at least 4 weeks of leave in total in the months leading up to the exam.
- Recent hiring of 10 SRMOs – this means that registrars are freed up to attend learning activities (i.e. tutorials). Also, when rostered on shifts such as MRI, having an SRMO around for a multitude of simple tasks (i.e. cannula insertion, Buscopan injection) that previously required a registrar's attention means that we can actually focus on learning radiology. I believe this has dramatically improved registrar learning.
- Senior registrar opportunity – in our final year of training, we get to spend the year working in an area of interest. For example, I am currently gaining further experience in neuro/MSK MRI and hope to spend time learning PET/CT and body imaging later in the year.

The bad:

- Busy after hours shifts – these have gotten significantly better with having an SRMO holding the liaison pager.
- Clinical meetings – the registrars bear the brunt of attending clinical meetings on behalf of the department, often without a radiology consultant present. Whilst this makes us very comfortable with presenting at meetings by the time we reach our final year of training, I believe that for medicolegal reasons and for optimal patient care, radiology consultant support at these meetings could be improved.
- Huge volume of unreported studies – we have in excess of 3000 unreported studies (700 of which are CTs, and 140 of which are MRIs); this is not only



detrimental to patient care, but also reduces our productivity by having to field numerous phone calls from referring clinicians requesting urgent verbal report on staging scans performed 3 months prior. This problem can be solved by outsourcing our backlog and by hiring more consultant radiologists and registrars.

Overall, I think Westmead Hospital provides a good quality training program, especially given the significant improvements that have been made since 2019.

Kind regards,

Dr. Rebecca Lim  
MBBS (Hons), MSurg (Hons)

**From:** [David Farlow \(Western Sydney LHD\)](#)  
**To:** [Kate Hurlle \(Western Sydney LHD\)](#)  
**Cc:** [Hinerau Rutene \(Western Sydney LHD\)](#)  
**Subject:** Fw: reminder  
**Date:** Thursday, 24 June 2021 9:32:57 AM

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fyi

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**From:** Samuel Conyngham (Western Sydney LHD) <[REDACTED]>  
**Sent:** Thursday, 24 June 2021 09:31  
**To:** David Farlow (Western Sydney LHD) <[REDACTED]>  
**Subject:** Re: reminder

David,

A few thoughts on radiology training at westmead.

I have done terms at RPA and at the Childrens hospital at Westmead as comparison sites.

Overall I think Westmead is a great place to train. I agree with Nandu's points that we get excellent pre exam teaching with high volume tutes, significant protected time before exams, access to high calibre teaching consultants and that the variety of pathology seen at high volume centre helps with learning. I also agree that the 5th spent on areas of interest is a fantastic opportunity.

More tutorials are always of benefit and more rostered teaching time, especially for the more junior registrars, would be a definite improvement. This has got better in the last year.

More consultants to help with the work load and teaching would also be an improvement and this has already started recently.

I think the true testament to my appreciation of Westmead as a training site came in my second year when I thought deeply about transferring to RPA which is situated 10 minutes from my home but decided overall that the extra travel well well worth it to stay with Westmead.

-sam

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**From:** David Farlow (Western Sydney LHD) <[REDACTED]>  
**Sent:** Monday, June 21, 2021 11:32  
**To:** Samuel Conyngham (Western Sydney LHD) <[REDACTED]>  
**Subject:** reminder

Hello Sam

just a reminder ... you are invited to send an email to me ... on a purely voluntary basis ... setting out the good the bad and the ugly of training at Westmead, and specifically whether there has been recent deterioration or improvement ...

with thanks

david

## 2.2.4 – Appendix 3 – confirmation of administrative support for research activities

**From:** [George Mcivor \(Western Sydney LHD\)](#)  
**To:** [Preeti Saraswati \(Western Sydney LHD\)](#); [Mohamed Nasreddine \(Western Sydney LHD\)](#); [Jane Li \(Western Sydney LHD\)](#); [Amy Manos \(Western Sydney LHD\)](#); [Peter Hockey \(Western Sydney LHD\)](#)  
**Subject:** RANZCR Item 1.6.2: Administration Support for Advanced Radiology Trainees  
**Date:** Thursday, 5 November 2020 4:31:29 PM  
**Attachments:** [image001.png](#)

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Hi All,

Attached is Pam Dougan's consent to act as Registrar Research Assistant: the agreement is to provide this service for one year or until a Research and Education 0.6 FTE position is appointed.

Please note that Pam and Hinerau have agreed to extend Pam's duties to assist for one year.

Regards,  
 George

**Dr George McIvor**

Clinical Director, Radiology Dept | **Medical Imaging**

Level 2 - Westmead Hospital, Westmead, NSW 2145

Tel [REDACTED] | Fax [REDACTED] | Mob [REDACTED] | [REDACTED]




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**From:** Pamela Dougan (Western Sydney LHD)  
**Sent:** Monday, August 17, 2020 3:16 PM  
**To:** George Mcivor (Western Sydney LHD) <[REDACTED]>  
**Cc:** Hinerau Rutene (Western Sydney LHD) <[REDACTED]>  
**Subject:** Re: Administration Support for Advanced Radiology Trainees

Dear George

Yes, I am happy with this arrangement.

kind regards

pam

**Pamela Dougan**

Administrative Research Assistant | **Medical Imaging**

Westmead Hospital, Hawkesbury Road, Westmead, 2145

Tel (02) [REDACTED] | Fax (02) [REDACTED] | [REDACTED]

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**From:** George Mcivor (Western Sydney LHD)  
**Sent:** Monday, 17 August 2020 14:59  
**To:** Pamela Dougan (Western Sydney LHD)  
**Cc:** Hinerau Rutene (Western Sydney LHD)  
**Subject:** Administration Support for Advanced Radiology Trainees

Hi Pam,

The RANZCR has recommended that we employ a 1.0 FTE Administration Support Officer. I have observed you assist the Radiology Registrars with their research and some training aspects.

Hinerau has specified that the daily Registrar roster of duties should continue to be provided by the Dept Secretaries. The Registrars do their own on-call rosters.

The Registrars will discuss specific LAN 2 requirements with the ESO and Network Director.

Pam will assist with the 2x research projects that each Registrar completes over their 5-year training period and any other administrative support as required.

Can I please confirm that you are both happy with this arrangement?

Regards,  
George  
**George McIvor**

Clinical Director, Radiology Dept | **Medical Imaging**

Level 2 - Westmead Hospital, Westmead, NSW 2145

Tel [REDACTED] | Fax [REDACTED] | Mob [REDACTED] | [REDACTED]





# The Royal Australian and New Zealand College of Radiologists\*

The Faculty of Clinical Radiology

## Director of Training Nomination Form

(To be completed by the Head of Department)

### DETAILS OF NOMINEE FOR DIRECTOR OF TRAINING (DoT)

Name of Nominee for Director of Training: Dr Susan Grayson

Date Fellowship of RANZCR Awarded: \_\_\_\_\_

### DETAILS OF TRAINING SITE

Training Site Name: Westmead Hospital

Head of Department Name: Robert De Costa

Is this site currently applying for accreditation?  Yes  No

If **NO** does this site already have Full or Linked (Partial) Accreditation?

Please specify which one: Full (currently undergoing review)

Is this nominee replacing a current DoT?  Yes  No

If yes, name the outgoing DoT: Dr Mohammed Nasreddine

If no, name the Co-DoT: \_\_\_\_\_

### EXPERIENCE & SENIORITY (please tick/cross the appropriate box)

Has the nominee been practicing as a Fellow for a period of two years full-time or three years part-time?  Yes  No

If **NO** please provide below an explanation as to why you think the nominated individual is suitable for the position of Director of Training.

### TIME ALLOCATION

Please advise how many hours of protected time per week will be allocated to the Director of Training role:

up to 5hrs as required.

Please indicate the FTE engagement of the nominee each day of the week:

Monday	Tuesday	Wednesday	Thursday	Friday
	0.2	0.2	0.2	0.1

0.1 FTE = half a day, 0.2 FTE = full day

Please indicate below the current number of trainees in your Department and what support mechanisms will be provided to assist the nominee in their role:

14.

Briefly outline below why you think this nominee is suitable for the role of Director of Training:

previous DOT. Returning after some time away.

\*\*\* Please attach the nominee's Curriculum Vitae \*\*\*

DECLARATIONS:

Head of Department: I, ROBERT DE COSTA hereby nominate SUSAN GRAYSON

for the role of Director of Training at (name of training site) WESTMEAD

Signature: [Signature]

Date: 18/5/21

Nominee: I, Susan Grayson hereby confirm that I agree to be nominated for the role of Director of Training at (name of training site) Westmead Hospital

Signature: [Signature]

Date: 18 May 2021

# DR SUSAN GRAYSON

[REDACTED]  
[REDACTED]  
[REDACTED]

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## CURRENT ROLES

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- 1FTE Staff Specialist Radiologist, Westmead Hospital; *Apr 2021 – current*
- Assessment Radiologist, BreastScreen North Coast NSW *June 2020 - current*
- Designated Radiologist; Reading and Assessment Radiologist; BreastScreen Sydney West / Westmead BCI; *May 2018 – current*
  - Breast Imaging Advanced Trainee Supervisor 2016 – Dec 2019.
- Radiologist, Specialist Army Reserves, rank MAJ – *April 2019 – current*

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## STRENGTHS IN CURRENT & PREVIOUS ROLES

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- Department Trainee and Staff Administration & Supervision
  - Previous RANZCR Accredited Director of Training, Westmead Hospital (May 2018 – Dec 2019); Previous Director of Training GCUH Feb 2020 – Match 2021.
    - Shared role between multiple DoTs
    - Experience in Trainee in Difficulty pathways
    - Special Interest in Trainee wellbeing
  - Supervisor to the Breast Imaging Advanced Trainee (BCI) = 2016 – current
  - Subspecialty Director in Breast Imaging
    - Designated radiologist BSSW
      - management of 18 VMO Radiologists on reading and assessment rosters
      - quarterly audit of Radiologist performance/performance managing tasks.
      - Managing business cases for Trainee/Fellowship grant applications; updating equipment applications
      - Policy/protocol updates
- Breast Imaging
  - All aspects of diagnostic & screening breast imaging including breast MRI.
  - All breast intervention including ROLLIS localizations and MRI-guided biopsy.
- CT Cardiac Imaging
  - Level A Accredited CTCA reporter.
- General Paediatric Radiology.



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## PRIOR EXPERIENCE

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- Perm 1FTE Staff Specialist Radiologist Gold Coast University Hospital Jan 2020 – March 2021.
  - Director of Training.
- Perm 1FTE Staff Specialist Radiologist, Westmead Hospital (04/03/2016 – current (currently on long service leave))
  - Acting Head of Breast Imaging
  - RANZCR Director of Training
- Paediatric Imaging Fellow, PT, Feb 2019 – Dec 2019
- VMO Nepean Hospital 13 Sept 2016 – June 2017; Breast and Emergency Imaging.
- Radiologist, Castlereagh Imaging Feb 2017 – Oct 2017
- **FRANZCR 24 FEB 2016**
- Paediatric Imaging Fellow, CHW Aug 2015 – Feb 2017
- Breast Imaging Advanced Trainee, Breast Cancer Institute Westmead, Aug 2014 – Jan 2015
- Radiology Trainee, Westmead Hospital.

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## CPD

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Up to date as per RANZCR requirements. Examples of regular contributions:

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## FURTHER EDUCATION

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- Executive Ready Leadership Program – Women in Leadership Australia: Feb 2018 - Jan 2019
- DoT Workshop Sydney June 2018
- 'Mastering Clinical Coaching & Feedback' – December 2018 – Cognitive Institute for WSLHD.

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## RESEARCH

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- *'A rare double whammy'* case study for primary angiosarcoma of the breast. E-poster National Womens of Womens Imaging. Sept 2019.
- TROG 12.02 PET LABRADOR - involvement
- BaROQUE project (quantifying lymphedema in the treated breast) – protocol development

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## REFEREES

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Dr George McIvor

Previous Director of Medical Imaging

Staff Specialist Radiologist

Westmead & Auburn Hospitals

Ph. [REDACTED]

[REDACTED]

[REDACTED]

Dr Nirmala Pathmanathan

Director of Westmead Breast Cancer Institute

Crown Princess Mary Cancer Centre, Westmead Hospital

Ph. [REDACTED]

[REDACTED]

**2.2.4 - Appendix 2 – Establishing  
Rostering Principles for DoT's**

**From:** George McIvor (Western Sydney LHD)  
**Sent:** Monday, March 23, 2020 3:56 PM  
**To:** 'Bruce Dennien'; 'George - Home'; 'Jane Li'; 'Kevin Ng - Home'; Kevin Ng (Western Sydney LHD); 'Lavier Gomes - Home'; Lavier Gomes (Western Sydney LHD); Luke Baker (Western Sydney LHD); 'Michael Vowels - Home'; 'Mohamed Nasreddine - Home'; Mohamed Nasreddine (Western Sydney LHD); 'Nisha - Home'; Nishantha Karunaratne (Western Sydney LHD); 'Noel Young'; 'Philip Vladica - Home'; 'Rafid Al-Asady'; Raymond Lee (Central Coast LHD); 'Rob Schamschula'; 'Robert de Costa'; 'Simon so'; 'Susan Grayson'; 'Tony Peduto - Home'  
**Cc:** [REDACTED]  
**Subject:** Director of Training Protected Time

Hi Kevin, Raymond,

In order to comply with the 2019 Accreditation Site Visit Report (attached), the Directors of Training are required to be rostered for five (5) hours each per week as Protected Time.

In order to comply: on days where there are > 5 Radiologists rostered, can you please roster Jane to five (5) hours per week Protected Time.

When Mohamed is appointed, this will also extend to him: I will let you know when the College confirms his appointment.

Please note: if staff numbers fall below 5 Radiologists due to COVID-19 infection on the day that they would have been rostered to Protected Time, please assign the Radiologist to reporting duties. Radiology Registrars will be able to still communicate with them on an ad hoc basis.

Thank you.

Regards,

George

**Dr George McIvor**

Clinical Director, Radiology Dept | **Medical Imaging**

Level 2 - Westmead Hospital, Westmead, NSW 2145

Tel [REDACTED] | Fax [REDACTED] | Mob [REDACTED] | [REDACTED] |



## RADIOLOGISTS' ROSTER

Wednesday 16 June 2021

VERSION 3

	a.m.		p.m.	
<b>CASB CT/CR</b>	0900 - 1300	KARUNARATNE/KIRWAN	1300-1700	NGUYEN/KIRWAN
*1 - On Site	*2 - Main Dept/ Home	O'GRADY		DENNIEN
<b>REPORTING</b>	0900 - 1000	GOMES,DENNIEN	1400-1500	KARUNARATNE KARUNARATNE
*A&E reporting	1000 - 1100	GOMES,DENNIEN	1500-1600	
	1100 - 1200		1600-1700	
	1200 - 1300			
<b>ICU</b>	1130	DENNIEN	High Dep 1400-1500	KARUNARATNE
<b>Mammo</b>	a.m.	GRAYSON	p.m.	-----
<b>ANGIO</b>	a.m.	VLADICA, AL-ASADY, GOOLAM	p.m.	VLADICA, AL-ASADY, GOOLAM
<b>CT</b>	0800 - 0900	EUGENE	1300-1400	MILA
R = Reporting/E = Enquiries/P=Procedure I = Interventional if reqd	0900 - 1300	BAKER, MOHOTTI-E	1400-1700	BAKER(I), O'GRADY, YEO-E
	1130	BAKER - biopsy	1700-2200	YEO
			CT Interventional	
<b>SCREENING + PLAIN FILMS + CT PROTOCOLS</b>	a.m.	MILA Sup O'GRADY	p.m.	MILA SUP DENNIEN
<b>MRI</b>	0800 - 0900	EUGENE	1300-1400	MILA
	0900 - 1300	NGUYEN, JAMEEL,EUGENE	1400-1700	GOMES, JAMEEL, EUGENE
			1700-2200	YEO
<b>ULTRASOUND</b>	a.m.		p.m.	MOHOTTI
<b>MEETINGS</b>	0830-0900	O & G Mtg - BAKER	1400	Infectious Diseases - MILA (1)
	0900	Haematology - EUGENE (1)	1300	SRMO Inservice (1)
	1130	Neurology - GOMES(1)	1400-1700	DOT - GRAYSON
<b>TUTORIALS</b>	0800		1300-1400	
<b>PROCEDURES</b>	NANDU/CONYNGHAM - ALL DAY		MSK/NEURO	LIM - ALL DAY
<b>OTHER HOSPITAL(S)</b>	ZHU/RUEBEN			
<b>AUBURN</b>	VOWELS, GAO			

## BACKLOG ROSTER

ON CALL		ABSENT	
CT & General: Evening 1700 - 2200	C YEO	All day	LEE, MCIVOR, NASREDDINE,DE COSTA,NG,LI,SO,YOUNG,HEYWORTH,WANG,KHOO (OTHMAN)PEDUTO, SCHAMSCHULA
CT & General: Night 2200 - 0800	J CHUA		
Angiography & Diagnostic	SO/KARUNARATNE/JAMEEL		
Radiographer	per roster	pm	
CT Radiographer	K DADGAR		
Ang Radiographer	R WAGNER		
Registered Nurse	V JEROME		

## RADIOLOGISTS' ROSTER

Thursday 24th June 2021

	a.m.		p.m.	
<b>CASB CT/CR</b>	0900-1300	BAKER/ MILA	1300-1700	SCHAMSCHULA/ MILA
*1 - On Site	*2 - Main/ Dept/Home	YOUNG		RAMASWAMI
<b>REPORTING</b>	0900 - 1000	LEE, MOHOTTI	1400-1500	
*A&E reporting	1000 - 1100	LEE, MOHOTTI	1500-1600	LEE
# Hot reporting	1100 - 1200	MOHOTTI	1600-1700	LEE
	1200 - 1300	MOHOTTI		
ICU	1130	LEE	High Dep	LEE
Mammo	a.m.	SCHAMSCHULA	1400-1500	-----
			p.m.	
<b>ANGIO</b>	a.m.	SO, LI, GOOLAM	p.m.	SO, LI, GOOLAM
<b>CT</b>	0800 - 0900	MOHOTTI	1300-1400	YEO
R = Reporting/ E = Enquiries/P=Procedure/ I=Interventional	0900 - 1300	AL-ASADY(I), YAM, GAO-E	1400-1700	AL-ASADY(I), BAKER, GAO-R, WANG-E
	1030 & 1200	AL-ASADY-Biopsy & Drainage	1700-2200	WANG
			CT Interventional	AL-ASADY - MWA @ 1300
<b>SCREENING + PLAIN FILMS + CT PROTOCOLS</b>	a.m.	YEO sup YAM	p.m.	YEO sup BAKER
<b>MRI</b>	0800 - 0900	MOHOTTI	1300-1400	YEO
	0900 - 1300	GRAYSON(H), RAMASWAMI, JAMEEL, KIRWAN	1400-1700	YOUNG, YAM, KIRWAN
			1700-2200	WANG
<b>ULTRASOUND</b>	a.m.	HEYWORTH	p.m.	HEYWORTH/ MOHOTTI
<b>MEETINGS</b>	0730	Vascular - YOUNG(1)	pm	DOT's - GRAYSON(H)
	0800	Respiratory - CONYNGHAM (1)		
	0830	Gastro - YOUNG/SO(1)	1500	Medical Oncology - YOUNG(2)
	0915	Geriatrics - YOUNG(1)		
	0730	Melanoma Mtg - BAKER	pm	Research - JAMEEL
<b>TUTORIALS</b>	0800-0900		1300-1400	
<b>PT CONSULTS</b>	AL-ASADY - 0930 & 1000			
<b>ALL DAY</b>	CONYNGHAM-MSK	NANDU - Procedures		
<b>OTHER HOSPITAL</b>	ZHU/ REUBEN			
<b>AUBURN</b>	THAMBUGALA/ OTHMAN			

## BACKLOG ROSTER

ON CALL		ABSENT	
CT & General: Evening 1700 - 2200	J WANG	All day	VLADICA, KARUNARATNE, O'GRADY, DENNIEN, VOWELS, MCIVOR, NASREDDINE, DE COSTA, GOMES, PEDUTO, NG, EUGENE, (CHUA)
CT & General: Night 2200 - 0800	R LIM		
Angiography & Diagnostic	LI/ GOMES/ CONYNGHAM		
Radiographer	Per Roster		
CT Radiographer	T MCCOSKER		
Ang Radiographer	S NGUYEN		
Registered Nurse	N GAHATRAJ		

## RADIOLOGISTS' ROSTER

Tuesday 29th June 2021

	a.m.		p.m.	
<b>CASB CT/CR</b>	0900-1300	TSE/ EUGENE	1300-1700	DENNIEN/ EUGENE
*1 - On Site	*2 - Main Dept/Home	GRAYSON(H)		GRAYSON(H)
<b>REPORTING</b>	0900 - 1000	DENNIEN, WANG	1400-1500	VOWELS, WANG
*A&E reporting	1000 - 1100	DENNIEN, WANG	1500-1600	VOWELS, WANG
	1100 - 1200	WANG	1600-1700	WANG
	1200 - 1300	WANG		WANG
ICU	1130	DENNIEN	High Dep	VOWELS
Mammo	a.m.	No Mammo's - OTHMAN	1400-1500	
			p.m.	----- OTHMAN
<b>ANGIO</b>	a.m.	O'GRADY, GOOLAM		O'GRADY, GOOLAM
<b>CT</b>	0800 - 0900	YEO	1300-1400	CONYNGHAM
R = Reporting/ E = Enquiries/P=Procedure	0900 - 1300	VOWELS, YEO-E	1400-1700	LI(I), PEDUTO, CHUA/HEYWORTH-E
I=Interventional	1000	O'GRADY - Bx	1700-2200	CHUA/ HEYWORTH
			CT Interventional	
<b>SCREENING + PLAIN FILMS + CT PROTOCOLS</b>	a.m.	GAO sup PEDUTO	p.m.	GAO sup TSE
<b>MR</b>	0800 - 0900	YEO	1300-1400	CONYNGHAM
	0900 - 1300	PEDUTO, JAMEEL, MILA	1400-1700	TSE, MILA
			1700-2200	CHUA/ HEYWORTH
<b>ULTRASOUND</b>	a.m.		p.m.	YEO
<b>MEETINGS</b>	0730	Neurosurgical - MILA	1300	Radiation/Oncology-Fortnight(2)
	0800	Nephrology - EUGENE	am	DOT's - LI
	0900	Lymphoma - YEO	pm	Research - JAMEEL
<b>TUTORIALS</b>	0800		1300	
<b>all day</b>	Procedures - NANDU/ CONYNGHAM			
<b>OTHER HOSPITAL(S)</b>	ZHU / RUEBEN			
<b>AUBURN</b>	SCHAMSCHULA/ MOHOTTI			

## BACKLOG ROSTER

ON CALL	ABSENT	
CT & General: Evening 1700 - 2200	J L CHUA/ A HEYWORTH	All day
CT & General: Night 2200 - 0800	A KIRWAN	
Angiography & Diagnostic	O'GRADY/ GRAYSON/ NANDU	
Radiographer	Per Roster	
CT Radiographer	A CHAN	
Ang Radiographer	L ILIN	
Registered Nurse	K TORIO	
	GOMES, MCIVOR, SO, YOUNG(Uni), NASREDDINE, BAKER, AL-ASADY, DE COSTA, KARUNARATNE, LEE, NG, VLADICA, KHOO, THAMBUGALA, (LIM)	

## RADIOLOGISTS' ROSTER

### Friday 2nd July 2021

	a.m.		p.m.	
<b>CASB CT/CR</b>	0900-1300	RAMASWAMI/GAO	1300-1700	SO/GAO
*1 - On Site	*2 - Main Dept/Home	GRAYSON (H)		GRAYSON (H)
<b>REPORTING</b>	0900 - 1000	KP WONG(fr 0800),WANG	1400-1500	WANG
*A&E reporting	1000 - 1100	GOMES(fr 1030),KP WONG,WANG,CHU	1500-1600	LEE, WANG
	1100 - 1200	KP WONG, WANG, CHUA	1600-1700	LEE, WANG
	1200 - 1300	WANG, CHUA		
ICU	1130	GOMES	High Dep	LEE
Mammo	a.m.	VOWELS	1400-1500	VOWELS
			p.m.	
<b>ANGIO</b>	a.m.	O'GRADY, BAKER	p.m.	O'GRADY, BAKER
<b>CT</b>	0800 - 0900	NANDU	1300-1400	CHUA
R = Reporting	0900 - 1300	SO, NANDU-E	1400-1700	RAMASWAMI, EUGENE/HEYWORTH-E
E = Enquires			1700-2200	EUGENE/HEYWORTH
P= Procedure			CT Interventional	
CT Interventional	1130	SO - Bx		
<b>SCREENING + PLAIN FILMS + CT PROTOCOLS</b>	a.m.	MOHOTTI sup SO	p.m.	MOHOTTI sup GOMES
<b>MRI</b>	0800 - 0900	NANDU	1300-1400	CHUA
	0900 - 1300	LEE, JAMEEL	1400-1700	GOMES, JAMEEL
			1700-2200	EUGENE/HEYWORTH
<b>ULTRASOUND</b>	a.m.		p.m.	CHUA
<b>MEETINGS</b>	0715	ENT - GOMES	1300-1700	DOT - GRAYSON
	0800	Urology - A6 Tutorial Rm		
	0730	GIT Lower MDT - LEE		
	0800-1030	Head and Neck - GOMES/CHUA		
<b>TUTORIALS</b>	0800	SO	1300	
<b>all day</b>	Procedures - CONYNGHAM		pm - Body - NANDU	
<b>OTHER HOSPITAL(S)</b>	ZHU/ RUEBEN			
<b>AUBURN</b>	DENNIEN/MILA			

#### BACKLOG ROSTER

ON CALL	ABSENT	
CT & General: Evening 1700 - 2200	EUGENE & HEYWORTH	All day
CT & General: Night 2200 - 0800	C YEO	
Angiography & Diagnostic	O'GRADY/ GRAYSON/ NANDU	YOUNG, SCHAMSCHULA, NG, AL-ASADY, LI, MCIVOR, PEDUTO, NASREDDINE, DE COSTA, KARUNARATNE, VLADICA, LIM, OTHMAN, KHOO, (KIRWAN), GOOLAM(Sick Leave)
Radiographer	Per Roster	
CT Radiographer	T MCCOSKER	
Ang Radiographer	L ILIN	
Registered Nurse	J QUETULA	



## STAFF POSITION DESCRIPTION TEMPLATE

**2.2.4 – Appendix 1 – Westmead Hospital ESO (0.4FTE) position description**

<b>POSITION TITLE</b>	<b>Education Support Officer – Clinical Radiology</b>
<b>AWARD</b>	Does this role require Multiple Awards? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	Award: Health Managers (State) Award
	Classification: Health Manager 2
<b>SUPERVISORY</b>	Does this role manage or supervise others? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

<b>PRIMARY PURPOSE</b>	<p>This position sits within the WSLHD Research and Education Network (REN) and is responsible for managing the coordination and facilitation of medical training programs in consultation with the Radiology Training Directors. Organise meetings, educational workshops, seminars, forums, trial exams and other network training events as required liaising with internal and external stakeholders across numerous facilities.</p> <p>The position will contribute to the overall strategic direction of the networks and provide support to the network's Local Training Network Governance Committee.</p>
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<b>KEY ACCOUNTABILITIES</b>	<p>Manage and coordinate recruitment of trainees including projecting vacancies, liaising with LHDs, applicants, coordinating interviews and developing position descriptions and advertisements.</p> <p>In conjunction with the Directors of Training, support the management of matters relating to the recruitment and allocation of trainees including term allocations, secondments, analysis and resolution of recruitment and retention issues, problem solving and considering alternatives while maintaining adequate staffing levels.</p> <p>Provide high level reports to Directors of Training, Medical JMO Managers, and Manager Clinical &amp; Corporate Education in relation to position establishment, recruitment and vacancy status.</p> <p>Manage the coordination and facilitation of training programs across multiple sites by liaising with the Directors of Training, Directors of Training and other relevant hospital and LHD staff including weekly lectures, grand rounds, journal clubs, workshops and examination preparation courses for trainees.</p> <p>Ensure all educational programs are promoted to trainees, and coordinated; such as collating registrations for trainers and documenting feedback forms from all education sessions into a central database.</p> <p>Organise the resources for the delivery of the training program, including assistance with web-based teaching material.</p> <p>Co-ordinate and organise an orientation program for trainees each year to cover mandatory core year teaching topics</p> <p>Manage the day to day performance of the trainees within the site to ensure they meet the experiential training requirements.</p>
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## STAFF POSITION DESCRIPTION TEMPLATE

	<p>Lead and develop formal and informal feedback and assessments of trainees each term on rotation. Coordinate feedback from trainees in regards to formal evaluation feedback and assessments after each rotational term within the network.</p> <p>Work closely with stakeholders to ensure education is prioritised to foster a culture of learning.</p> <p>Keep abreast of best evidence in adult education principles; models of best-practice in training; trainee terms and placements; workforce; education and training program development as required, in order to support and improve delivery of the training programs.</p> <p>Ensure awareness of relevant College(s) training policies and procedures and relevant NSW Health/District Health Service policy directives. Develop local policies for training networks in accordance with College, NSW Health/District Health Service policy directives and adhering to any State Training Council guidelines. In conjunction with the Directors of Training and REN prepare for accreditation of training programs.</p>
<b>WSLHD Standard Key Accountabilities that apply to all staff who do not manage people (not to be removed)</b>	<ul style="list-style-type: none"> <li>• Understand and practice person centred care. Participate in quality improvement activities. Work in partnership with consumers on improving and evaluating the delivery of services. Ensure timely and accurate reporting of near or actual incidents or patient safety concerns.</li> <li>• You must take all reasonable care for yourself and others and comply with any reasonable instruction, policies and procedures relating to work health safety and wellbeing</li> <li>• Risk Management – Staff should actively identify, communicate and escalate risks and understand their responsibility to manage risk in their day-to-day roles.</li> </ul>

<b>KEY CHALLENGES</b>	<ul style="list-style-type: none"> <li>• Working in a demanding, busy and complex environment where meeting clinical services demands often interrupts training requirements.</li> <li>• Working across facilities and training networks.</li> </ul>
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WHO YOU ARE WORKING WITH	WHO	WHY
Internal Relationships	Manager Medical Education.	Line management.
	Directors of Training	Work together to support training
	Clinicians.	Involved in teaching and supervising trainees.
External Relationships	Colleges.	Responsible for accreditation.
	HETI.	Reporting.

## STAFF POSITION DESCRIPTION TEMPLATE

<b>FINANCIAL DELEGATION</b>	<input checked="" type="checkbox"/> As per Delegations manual														
<b>Job Requirements</b>  <i>This will be used to ensure the position is appropriately marked in StaffLink and informs the advertisement</i>	<p>Is the position targeted to 'eligible persons' under the Government Sector Employment Rule 26 – please indicate below:</p> <table border="1" style="margin-left: 20px;"> <tr> <td></td> <td style="text-align: center;"><b>Aboriginal /Torres Strait Islander</b></td> </tr> <tr> <td style="text-align: center;"><b>Targeted</b></td> <td></td> </tr> <tr> <td style="text-align: center;"><b>Identified</b></td> <td></td> </tr> </table> <table border="1" style="margin-left: 20px;"> <tr> <td style="text-align: center;"><b>Disability</b></td> <td style="text-align: center;"><b>Refugee</b></td> <td style="text-align: center;"><b>Gender</b></td> <td style="text-align: center;"><b>&lt;25</b></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </table>		<b>Aboriginal /Torres Strait Islander</b>	<b>Targeted</b>		<b>Identified</b>		<b>Disability</b>	<b>Refugee</b>	<b>Gender</b>	<b>&lt;25</b>				
	<b>Aboriginal /Torres Strait Islander</b>														
<b>Targeted</b>															
<b>Identified</b>															
<b>Disability</b>	<b>Refugee</b>	<b>Gender</b>	<b>&lt;25</b>												
<b>ESSENTIAL REQUIREMENTS</b>  <i>Circle/X the relevant requirements</i>	<p>Vaccination category: B National Police Check</p> <p><input type="checkbox"/> License: <a href="#">Click here to enter text.</a></p> <p><input type="checkbox"/> Qualification: <a href="#">Click here to enter text.</a></p> <p><input type="checkbox"/> Registration: <a href="#">Click here to enter text.</a></p> <p><input type="checkbox"/> Evidence of Diversity claim if applicable (state which category): <a href="#">Click here to enter text.</a></p>														
<b>SELECTION CRITERIA</b> <i>A maximum of 8</i>  <b>Some tips:</b> <i>One knowledge, skills and experience per criterion</i>  <i>Avoid merging multiple selection criteria into one</i>  <i>Selection criteria should describe applied knowledge or demonstrated ability</i>	<p>Relevant qualifications or equivalent experience in adult education, with previous experience in the coordination, management, development and evaluation of education programs.</p> <p>Understanding and demonstrated experience with Medical College Training requirements and knowledge of Medical College criteria for trainees and accreditation i.e. core and non-core terms.</p> <p>Demonstrated experience in education/administrative management of medical staff including advanced experience in rostering of staff.</p> <p>Demonstrated excellent communication skills (verbal and written) including problem solving and conflict resolution skills.</p> <p>Strong personal organisational skills and proven experience in the management of complex projects and multiple tasks in a timely manner, in a high pressure, high volume work environment to meet assigned deadlines.</p> <p>Demonstrated ability to compose draft reports, and briefing papers, develop policies, guidelines and procedures and provide advice to senior and line management.</p> <p>Proven ability to work independently and to meet tight deadlines whilst undertaking several projects at any one time.</p> <p>Demonstrated advanced knowledge and practical skills with Microsoft office software to implement and tracking of high level issues as well as the ability to participate in the preparation and maintenance of complex rostering systems.</p>														

## STAFF POSITION DESCRIPTION TEMPLATE

JOB DEMANDS CHECK LIST - Note information below!	
•	This list helps both applicant and manager understand the physical/emotional requirements of a role.
•	This list can be the basis for a pre-employment medical assessment, so if it is not accurate then there could be implications for both the employee and the manager/team if capacity is either not there, or is impacted by the work.
•	All WSLHD employees have a development plan – this list can inform what training may be needed for someone to manage risks identified.
•	During the first 90 days of employment (induction and on-boarding) and regularly thereafter, each position should be assessed at the site as to the incumbent's (or future incumbent's) WHS responsibilities specific to the position.

Job Demands Frequency Key	
I = Infrequent	intermittent activity exists for a short time on a very infrequent basis
O = Occasional	activity exists up to 1/3 of the time when performing the job
F = Frequent	activity exists between 1/3 and 2/3 of the time when performing the job
C = Constant	activity exists for more than 2/3 of the time when performing the job
R = Repetitive	activity involved repetitive movements
N = Not Applicable	activity is not required to perform the job

**Note:** any entries not assigned a value will be automatically set to "N"

Click on the right hand column "Not Applicable" to make a selection from the drop box. There is a new section for "Other" at the end of this section ie additional demands not clearly included in the lists below.

PHYSICAL DEMANDS – description (Comment)	FREQUENCY
	<b>Job Demands Frequency Key</b>
<b>Sitting</b> – remaining in a seated position to perform tasks	Frequent
<b>Standing</b> – remaining in a standing without moving about to perform tasks	Occasional
<b>Walking</b> – floor type; even/uneven/slippy, indoors/outdoors, slopes	Frequent
<b>Running</b> – floor type; even/uneven/slippy, indoors/outdoors, slopes	Not Applicable
<b>Bend/Lean Forward from Waist</b> – Forward bending from the waist to perform tasks	Occasional
<b>Trunk Twisting</b> – turning from the waist while sitting or standing to performance tasks	Occasional
<b>Kneeling</b> – remaining in a kneeling posture to perform tasks	Occasional
<b>Squatting/Crouching</b> – adopting a squatting or crouching posture to perform tasks	Occasional
<b>Leg/Foot Movement</b> – use of leg and or foot to operate machinery	Not Applicable
<b>Climbing (stairs/ladders)</b> – ascend/descend stairs, ladders, steps	Frequent
<b>Lifting/Carrying</b> – light lifting and carrying (0 to 9kg)	Frequent
<b>Lifting/Carrying</b> – moderate lifting and carrying (10 to 15kg)	Infrequent
<b>Lifting/Carrying</b> – light lifting and carrying (16kg and above)	Not Applicable

## STAFF POSITION DESCRIPTION TEMPLATE

<b>Reaching</b> – arms fully extended forward to raise above shoulder	Occasional
<b>Pushing/Pulling/Restraining</b> – using force to hold/restrain or move objects toward or away from the body	Occasional
<b>Head/Neck Postures</b> – holding head in a position other than neutral (facing forward)	Occasional
<b>Hand and Arm Movements</b> – repetitive movements of hands and arms	Frequent
<b>Grasping/Fine Manipulations</b> – gripping, holding, clasping with fingers or hands	Frequent
<b>Working at Heights</b> – using ladders, footstools, scaffolding, or other objects to perform work	Not Applicable
<b>Driving/Riding</b> – controlling the operation of a vehicle (e.g. car, truck, bus, motorcycle, bicycle.)	Occasional
<b>SENSORY DEMANDS</b> – Description (comment)	<b>FREQUENCY</b>
<b>Sight</b> – use of sight is an integral part of work performance (e.g. viewing of X-rays, computer screen)	Constant
<b>Hearing</b> – use of hearing is an integral part of work performance (e.g. phone enquiries)	Constant
<b>Smell</b> – use of smell is an integral part of work performance (e.g. working with chemicals)	Not Applicable
<b>Taste</b> – use of taste is an integral part of work performance (e.g. food preparation)	Not Applicable
<b>Touch</b> – use of touch is an integral part of work performance	Constant
<b>PSYCHOSOCIAL DEMANDS</b> – Description (comment)	<b>FREQUENCY</b>
<b>Distressed People</b> – e.g. emergency or grief situations	Not Applicable
<b>Aggressive and Uncooperative People</b> – e.g. drug/alcohol, dementia, mental illness	Not Applicable
<b>Unpredictable People</b> – e.g. dementia, mental illness, head injuries	Not Applicable
<b>Restraining</b> – involvement in physical containment of patient/clients	Not Applicable
<b>Exposure to Distressing Situations</b> – child abuse, viewing dead/mutilated bodies	Not Applicable
<b>ENVIRONMENTAL DEMANDS</b> – Description (comment)	<b>FREQUENCY</b>
<b>Dust</b> – exposure to atmospheric dust	Not Applicable
<b>Gases</b> – working with explosive or flammable gases requiring precautionary measures	Not Applicable
<b>Fumes</b> – exposure to noxious or toxic fumes	Not Applicable
<b>Liquids</b> – working with corrosive, toxic or poisonous liquids or chemicals requiring personal protective equipment (PPE)	Not Applicable
<b>Hazardous Substances</b> – e.g. dry chemicals, glues	Not Applicable
<b>Noise</b> – environmental/background noise necessitates people raise their voice to be heard	Not Applicable
<b>Inadequate Lighting</b> – risk of trip, falls or eyestrain	Not Applicable
<b>Sunlight</b> – risk of sunburn exists from spending more than 10 minutes per day in sunlight	Not Applicable
<b>Extreme Temperatures</b> – environmental temperatures are less than 15°C or more than 35°C	Not Applicable

## STAFF POSITION DESCRIPTION TEMPLATE

<b>Confined Spaces</b> – areas where only one egress (escape route) exists	Not Applicable
<b>Slippery or Uneven Surfaces</b> - greasy or wet floor surfaces, ramps, uneven ground	Not Applicable
<b>Inadequate Housekeeping</b> - obstructions to walkways and work areas cause trips and falls	Not Applicable
<b>Working At Heights</b> – ladders/stepladders/scaffolding are required to perform tasks	Not Applicable
<b>Biological Hazards</b> – exposure to body fluids, bacteria, infectious diseases	Not Applicable
<b>Other Demands -Description</b>	
(consider if there are other particular issues not clearly described in the categories above)	

**For further assistance please contact:** Human Resources Business Partners – People and Culture

Save final version in HRC (formerly known as HRPM or TRIM) Your HR Business Partner should note in the HRC notes section that they have undertaken a review of the PD.

## 2.2.7 - Appendix 1 - Diagnostic &amp; IR

Name	FTE/ Hrs (Staff Specialists)*	Sessions (VMO's)	FRANZCR (Y/N)	IMG (Y/N)	Skill Set / Area of Interest
Bruce DENNIEN	1		Y	N	General
Kevin NG	1		Y	N	Neuroradiology

Lavier GOMES	1		Y	N	Neuroradiology
Michael VOWELS	1		Y	N	General, Breast imaging
Nisha KARUNARATNE	1		Y	N	Spine, Body imaging
Raymond LEE	1		Y	N	Body, Neuroradiology
Rob SCHAMSCHULA	1		Y	N	General, Breast imaging
Robert DE COSTA	1		Y	N	MSK imaging
Susan GRAYSON	1		Y	N	Breast, Body, Paediatric,
Tony PEDUTO	1		Y	N	MSK, Body imaging
Mohamed NASREDDINE	1		Y	N	Chest, Breast imaging
George McIVOR	0		Y	N	Administration, Cardiac, On
Farah AL-MAHDAWI	0.15	2	Y	N	Breast, General
Aruni THAMBUGALA	0.52	4	Y	N	Paediatric, Neuroradiology
Kim-Son NGUYEN	0.13	4	Y	N	Body, chest imaging
KP WONG	0.15	2	Y	N	1 session General (retired IR)
Mitchell YAM	0.32	2	Y	N	Breast, General
Suang Kiat LAU	0.32	2	Y	N	General
Suchitra MANTRALA	0.32	2	Y	N	General
Geetha RAMASWAMI	0.64	4	Y	N	Breast, General
Roberta Man Yee TSE	0.32	2	Y	N	Breast, General
Mark Soo	0.15		Y	Y	Resigned, hours re-allocated to

Name	FTE/ Hrs	Sessions	FRANZCR (Y/N)	IMG (Y/N)	Skill Set / Area of Interest
Jane LI	1		Y	N	3 sessions IR, Body imaging,
Luke BAKER	1		Y	N	3 sessions IR, Body imaging

Philip VLADICA	1		Y	N	2 sessions IR, Body, Cardiac
Simon So	1		Y	N	2 sessions IR, Body imaging
Alan O'Grady	1		Y	N	3 session IR, Body imaging,
Noel Young	0.5		Y	N	IR transitioning to DR
Izzy Goolam	0.44				
Saif Jameel	0.64				

\* Under the radiology agreement which is current subject to Industrial Relations processes, the Staff Specialists appointed under the agreement are required to attend Westmead Hospital 0.7 FTE



## TRAINEE COMPLETION LIST as at 09/06/2021

TRAINEE	TRG YEAR	PATIENT SAFETY	REPORT WRITING MODULE	NON-MEDICAL EXPERT ROLE
Daniel Gao (joined May 2021)	1	Pending	Pending	Pending
Ashley Heyworth	1	Pending	Commenced Feb 2021	Pending
Alexander Kirwan	2	Completed	Completed	Completed
Cheng Yeo	2	Completed	Completed	Completed
Mila Dimitrijevic	3	Most modules completed	Completed	Most modules completed
Rueben Ganeshalingham	3	Completed	Completed	Completed
Eugene Ng	3	Completed	Completed	Completed
Jing Zhou	3	Most modules completed	Completed	Most modules completed
Jeewaka Mohotti	4	Completed	Completed	Completed
Jia Lin Chua	4	Most modules completed	Completed	Most modules completed
Sam Conyngham	5	Completed	Completed	Completed
Nandu Dantan	5	Most modules completed	Completed	Most modules completed
Rebecca Lim	5	Completed	Completed	Completed
Jeff Wang – non network	7	Most modules completed	Not specified on TIMS	Most modules completed
Amy Khoo ( <i>on Mat Leave</i> )	7+	Most modules completed	Not specified on TIMS	Most modules completed



Username	Full Name	Requirement	Status
60000884	Aggarwala, Shiv	Fire and Evacuation	Expired
60000884	Aggarwala, Shiv	Open Disclosure	Not Attempted
60000884	Aggarwala, Shiv	Basic Life Support - Adult	Expired
60000884	Aggarwala, Shiv	Aboriginal Culture - Respecting the Difference	Not Attempted
60000884	Aggarwala, Shiv	Between the Flags - Tier 2: Case Studies (ADULT) - Nursing, Medical and Allied Health	Not Attempted
60000884	Aggarwala, Shiv	Between the Flags - Tier 2: Communication, Teamwork and Documentation	Not Attempted
60000884	Aggarwala, Shiv	Between the Flags - Tier 2: Systematic Assessment (ADULT)	Not Attempted
60000884	Aggarwala, Shiv	Between the Flags - Tier 2 workshop (ADULT - DETECT) - Nursing and Medical	Not Attempted
60000884	Aggarwala, Shiv	Fire Safety & Evacuation - Practical	Expired
60000884	Aggarwala, Shiv	Basic Life Support Assessment	Expired
60000884	Aggarwala, Shiv	Care Coordination for Medical Officers	Not Attempted
60000884	Aggarwala, Shiv	Infection Prevention Strategies for Medical Officers	Not Attempted
60000884	Aggarwala, Shiv	Safety and Quality for Medical Officers	Not Attempted
60000884	Aggarwala, Shiv	Violence Prevention and Management for Medical Officers	Not Attempted
60000884	Aggarwala, Shiv	Child Wellbeing and Child Protection - Part 1	Not Attempted
60000884	Aggarwala, Shiv	Child Wellbeing and Child Protection - Part 2	Not Attempted
60000884	Aggarwala, Shiv	Child Wellbeing and Child Protection - Part 3	Not Attempted
60000884	Aggarwala, Shiv	Violence Prevention and Management - Personal Safety - face to face workshop	Not Attempted
60000884	Aggarwala, Shiv	Aggarwala, Shiv	Not Attempted
60000884	Aggarwala, Shiv	Cyber Security Fundamentals	Expired
60000884	Aggarwala, Shiv	ims+ How to Notify an Incident	Not Attempted
60000884	Aggarwala, Shiv	Between the Flags - Tier 1: Awareness, Charts and Escalation	Completed
60000884	Aggarwala, Shiv	Hand Hygiene Australia - Medical	Completed
60000884	Aggarwala, Shiv	Privacy - It's Yours to Keep	Completed
60000884	Aggarwala, Shiv	Respecting the Difference - face to face training	Completed
60000884	Aggarwala, Shiv	Work Health and Safety for Medical Officers	Completed
60000884	Aggarwala, Shiv	Code of Conduct	Not Attempted
60000884	Aggarwala, Shiv	Hand Hygiene	Expired
60000884	Aggarwala, Shiv	Security Awareness - All Staff	Not Attempted
60000884	Aggarwala, Shiv	Waste Management	Not Attempted
60000884	Aggarwala, Shiv	Enterprise Risk Management - an overview	Not Attempted
60000884	Aggarwala, Shiv	COM1489 - WSLHD Orientation	Completed
60000884	Aggarwala, Shiv	Work Health and Safety and hazardous manual tasks	Completed
60062536	Chua, Jia Lin	Between the Flags - Tier 2 workshop (ADULT - DETECT) - Nursing and Medical	Not Attempted
60062536	Chua, Jia Lin	Fire Safety & Evacuation - Practical	Expired
60062536	Chua, Jia Lin	Violence Prevention and Management - Personal Safety - face to face workshop	Not Attempted
60062536	Chua, Jia Lin	Basic Life Support Assessment	Expired
60062536	Chua, Jia Lin	ims+ How to Notify an Incident	Not Attempted
60062536	Chua, Jia Lin	Cyber Security Fundamentals	Expired
60062536	Chua, Jia Lin	Fire and Evacuation	Expired
60062536	Chua, Jia Lin	Basic Life Support - Adult	Current
60062536	Chua, Jia Lin	Between the Flags - Tier 1: Awareness, Charts and Escalation	Completed
60062536	Chua, Jia Lin	Between the Flags - Tier 2: Case Studies (ADULT) - Nursing, Medical and Allied Health	Completed
60062536	Chua, Jia Lin	Between the Flags - Tier 2: Communication, Teamwork and Documentation	Completed
60062536	Chua, Jia Lin	Between the Flags - Tier 2: Systematic Assessment (ADULT)	Completed
60062536	Chua, Jia Lin	Care Coordination for Medical Officers	Completed
60062536	Chua, Jia Lin	Child Wellbeing and Child Protection - Part 1	Completed
60062536	Chua, Jia Lin	Child Wellbeing and Child Protection - Part 2	Completed
60062536	Chua, Jia Lin	Child Wellbeing and Child Protection - Part 3	Completed
60062536	Chua, Jia Lin	Hand Hygiene Australia - Medical	Completed
60062536	Chua, Jia Lin	Infection Prevention Strategies for Medical Officers	Completed
60062536	Chua, Jia Lin	Open Disclosure	Completed
60062536	Chua, Jia Lin	Personal protective equipment for combined transmission-based precautions	Completed
60062536	Chua, Jia Lin	Privacy - It's Yours to Keep	Completed
60062536	Chua, Jia Lin	Safety and Quality for Medical Officers	Completed
60062536	Chua, Jia Lin	Violence Prevention and Management for Medical Officers	Completed
60062536	Chua, Jia Lin	Work Health and Safety for Medical Officers	Completed
60062536	Chua, Jia Lin	Security Awareness - All Staff	Not Attempted

60062536	Chua, Jia Lin	Enterprise Risk Management - an overview	Not Attempted
60062536	Chua, Jia Lin	Waste Management	Not Attempted
60062536	Chua, Jia Lin	Work Health and Safety and hazardous manual tasks	Not Attempted
60062536	Chua, Jia Lin	Hand Hygiene	Current
60062536	Chua, Jia Lin	COM1489 - WSLHD Orientation	Completed
60062536	Chua, Jia Lin	Code of Conduct	Completed
40045678	Conyngham, Samuel	Respecting the Difference - face to face training	Not Attempted
40045678	Conyngham, Samuel	Between the Flags - Tier 2 workshop (ADULT - DETECT) - Nursing and Medical	Not Attempted
40045678	Conyngham, Samuel	Violence Prevention and Management - Personal Safety - face to face workshop	Not Attempted
40045678	Conyngham, Samuel	Fire and Evacuation	Expired
40045678	Conyngham, Samuel	Basic Life Support - Adult	Expired
40045678	Conyngham, Samuel	Fire Safety & Evacuation - Practical	Expired
40045678	Conyngham, Samuel	Cyber Security Fundamentals	Expired
40045678	Conyngham, Samuel	ims+ How to Notify an Incident	Not Attempted
40045678	Conyngham, Samuel	Basic Life Support Assessment	Current
40045678	Conyngham, Samuel	Aboriginal Culture - Respecting the Difference	Completed
40045678	Conyngham, Samuel	Between the Flags - Tier 1: Awareness, Charts and Escalation	Completed
40045678	Conyngham, Samuel	Between the Flags - Tier 2: Case Studies (ADULT) - Nursing, Medical and Allied Health	Completed
40045678	Conyngham, Samuel	Between the Flags - Tier 2: Communication, Teamwork and Documentation	Completed
40045678	Conyngham, Samuel	Between the Flags - Tier 2: Systematic Assessment (ADULT)	Completed
40045678	Conyngham, Samuel	Care Coordination for Medical Officers	Completed
40045678	Conyngham, Samuel	Child Wellbeing and Child Protection - Part 1	Completed
40045678	Conyngham, Samuel	Child Wellbeing and Child Protection - Part 2	Completed
40045678	Conyngham, Samuel	Child Wellbeing and Child Protection - Part 3	Completed
40045678	Conyngham, Samuel	Hand Hygiene Australia - Medical	Completed
40045678	Conyngham, Samuel	Infection Prevention Strategies for Medical Officers	Completed
40045678	Conyngham, Samuel	Open Disclosure	Completed
40045678	Conyngham, Samuel	Personal protective equipment for combined transmission-based precautions	Completed
40045678	Conyngham, Samuel	Privacy - It's Yours to Keep	Completed
40045678	Conyngham, Samuel	Safety and Quality for Medical Officers	Completed
40045678	Conyngham, Samuel	Violence Prevention and Management for Medical Officers	Completed
40045678	Conyngham, Samuel	Work Health and Safety for Medical Officers	Completed
40045678	Conyngham, Samuel	Waste Management	Not Attempted
40045678	Conyngham, Samuel	Hand Hygiene	Current
40045678	Conyngham, Samuel	COM1489 - WSLHD Orientation	Completed
40045678	Conyngham, Samuel	Code of Conduct	Completed
40045678	Conyngham, Samuel	Enterprise Risk Management - an overview	Completed
40045678	Conyngham, Samuel	Security Awareness - All Staff	Completed
40045678	Conyngham, Samuel	Work Health and Safety and hazardous manual tasks	Completed
40045609	Dantanarayana, Nandula	Respecting the Difference - face to face training	Not Attempted
40045609	Dantanarayana, Nandula	Violence Prevention and Management - Personal Safety - face to face workshop	Not Attempted
40045609	Dantanarayana, Nandula	Basic Life Support Assessment	Expired
40045609	Dantanarayana, Nandula	Fire and Evacuation	Expired
40045609	Dantanarayana, Nandula	Fire Safety & Evacuation - Practical	Expired
40045609	Dantanarayana, Nandula	Cyber Security Fundamentals	Expired
40045609	Dantanarayana, Nandula	ims+ How to Notify an Incident	Not Attempted
40045609	Dantanarayana, Nandula	Basic Life Support - Adult	Current
40045609	Dantanarayana, Nandula	Aboriginal Culture - Respecting the Difference	Completed
40045609	Dantanarayana, Nandula	Between the Flags - Tier 1: Awareness, Charts and Escalation	Completed
40045609	Dantanarayana, Nandula	Between the Flags - Tier 2 workshop (ADULT - DETECT) - Nursing and Medical	Completed
40045609	Dantanarayana, Nandula	Between the Flags - Tier 2: Case Studies (ADULT) - Nursing, Medical and Allied Health	Completed
40045609	Dantanarayana, Nandula	Between the Flags - Tier 2: Communication, Teamwork and Documentation	Completed
40045609	Dantanarayana, Nandula	Between the Flags - Tier 2: Systematic Assessment (ADULT)	Completed
40045609	Dantanarayana, Nandula	Care Coordination for Medical Officers	Completed
40045609	Dantanarayana, Nandula	Child Wellbeing and Child Protection - Part 1	Completed
40045609	Dantanarayana, Nandula	Child Wellbeing and Child Protection - Part 2	Completed
40045609	Dantanarayana, Nandula	Child Wellbeing and Child Protection - Part 3	Completed
40045609	Dantanarayana, Nandula	Hand Hygiene Australia - Medical	Completed
40045609	Dantanarayana, Nandula	Infection Prevention Strategies for Medical Officers	Completed

40045609	Dantanarayana, Nandula	Open Disclosure	Completed
40045609	Dantanarayana, Nandula	Personal protective equipment for combined transmission-based precautions	Completed
40045609	Dantanarayana, Nandula	Privacy - It's Yours to Keep	Completed
40045609	Dantanarayana, Nandula	Safety and Quality for Medical Officers	Completed
40045609	Dantanarayana, Nandula	Violence Prevention and Management for Medical Officers	Completed
40045609	Dantanarayana, Nandula	Work Health and Safety for Medical Officers	Completed
40045609	Dantanarayana, Nandula	Code of Conduct	Not Attempted
40045609	Dantanarayana, Nandula	Waste Management	Not Attempted
40045609	Dantanarayana, Nandula	Work Health and Safety and hazardous manual tasks	Not Attempted
40045609	Dantanarayana, Nandula	Hand Hygiene	Current
40045609	Dantanarayana, Nandula	COM1489 - WSLHD Orientation	Completed
40045609	Dantanarayana, Nandula	Enterprise Risk Management - an overview	Completed
40045609	Dantanarayana, Nandula	Security Awareness - All Staff	Completed
60168138	Dimitrijevic, Mila	Between the Flags - Tier 2 workshop (ADULT - DETECT) - Nursing and Medical	Not Attempted
60168138	Dimitrijevic, Mila	Between the Flags - Tier 2: Case Studies (ADULT) - Nursing, Medical and Allied Health	Not Attempted
60168138	Dimitrijevic, Mila	Between the Flags - Tier 2: Communication, Teamwork and Documentation	Not Attempted
60168138	Dimitrijevic, Mila	Between the Flags - Tier 2: Systematic Assessment (ADULT)	Not Attempted
60168138	Dimitrijevic, Mila	Fire and Evacuation	Expired
60168138	Dimitrijevic, Mila	Basic Life Support - Adult	Expired
60168138	Dimitrijevic, Mila	Child Wellbeing and Child Protection - Part 1	Not Attempted
60168138	Dimitrijevic, Mila	Child Wellbeing and Child Protection - Part 2	Not Attempted
60168138	Dimitrijevic, Mila	Child Wellbeing and Child Protection - Part 3	Not Attempted
60168138	Dimitrijevic, Mila	Care Coordination for Medical Officers	Not Attempted
60168138	Dimitrijevic, Mila	Infection Prevention Strategies for Medical Officers	Not Attempted
60168138	Dimitrijevic, Mila	Safety and Quality for Medical Officers	Not Attempted
60168138	Dimitrijevic, Mila	Violence Prevention and Management for Medical Officers	Not Attempted
60168138	Dimitrijevic, Mila	Work Health and Safety for Medical Officers	Not Attempted
60168138	Dimitrijevic, Mila	Violence Prevention and Management - Personal Safety - face to face workshop	Not Attempted
60168138	Dimitrijevic, Mila	Basic Life Support Assessment	Expired
60168138	Dimitrijevic, Mila	Personal protective equipment for combined transmission-based precautions	Not Attempted
60168138	Dimitrijevic, Mila	Aboriginal Culture - Respecting the Difference	Not Attempted
60168138	Dimitrijevic, Mila	Respecting the Difference - face to face training	Not Attempted
60168138	Dimitrijevic, Mila	Between the Flags - Tier 2 workshop (PAEDIATRIC - DETECT junior) - Nursing and Medical	Not Attempted
60168138	Dimitrijevic, Mila	Between the Flags - Tier 2: Systematic Assessment (PAEDIATRIC)	Not Attempted
60168138	Dimitrijevic, Mila	Between the Flags - Tier 2: eLearning Case Studies - Nursing & Medical (PAEDIATRIC)	Not Attempted
60168138	Dimitrijevic, Mila	Child Protection targeted training	Not Attempted
60168138	Dimitrijevic, Mila	ims+ How to Notify an Incident	Not Attempted
60168138	Dimitrijevic, Mila	Cyber Security Fundamentals	Expired
60168138	Dimitrijevic, Mila	Privacy - It's Yours to Keep	Not Attempted
60168138	Dimitrijevic, Mila	Fire Safety & Evacuation - Practical	Current
60168138	Dimitrijevic, Mila	Between the Flags - Tier 1: Awareness, Charts and Escalation	Completed
60168138	Dimitrijevic, Mila	Hand Hygiene Australia - Medical	Completed
60168138	Dimitrijevic, Mila	Open Disclosure	Completed
60168138	Dimitrijevic, Mila	Enterprise Risk Management - an overview	Not Attempted
60168138	Dimitrijevic, Mila	Code of Conduct	Not Attempted
60168138	Dimitrijevic, Mila	Security Awareness - All Staff	Not Attempted
60168138	Dimitrijevic, Mila	Waste Management	Not Attempted
60168138	Dimitrijevic, Mila	Hand Hygiene	Expired
60168138	Dimitrijevic, Mila	Weight4KIDS - Core Module	Not Attempted
60168138	Dimitrijevic, Mila	Fire Safety and Awareness - Local Evacuation	Expired
60168138	Dimitrijevic, Mila	Work Health and Safety and hazardous manual tasks	Not Attempted
60168138	Dimitrijevic, Mila	Better Together: Preventing and managing bullying, harassment and discrimination	Not Attempted
60168138	Dimitrijevic, Mila	COM1489 - WSLHD Orientation	Completed
60130039	Gao, Daniel	Child Wellbeing and Child Protection - Part 3	Incomplete
60130039	Gao, Daniel	Violence Prevention and Management - Personal Safety - face to face workshop	Not Attempted
60130039	Gao, Daniel	Personal protective equipment for combined transmission-based precautions	Not Attempted
60130039	Gao, Daniel	Fire and Evacuation	Expired

60130039	Gao, Daniel	ims+ How to Notify an Incident	Not Attempted
60130039	Gao, Daniel	Basic Life Support Assessment	Expired
60130039	Gao, Daniel	Child Protection targeted training	Not Attempted
60130039	Gao, Daniel	Local Induction to Personal Protective Equipment	Expired
60130039	Gao, Daniel	Cyber Security Fundamentals	Expired
60130039	Gao, Daniel	Injury Management	Not Attempted
60130039	Gao, Daniel	Fire Safety & Evacuation - Practical	Current
60130039	Gao, Daniel	Basic Life Support - Adult	Current
60130039	Gao, Daniel	Between the Flags - Tier 1: Awareness, Charts and Escalation	Completed
60130039	Gao, Daniel	Between the Flags - Tier 2 workshop (ADULT - DETECT) - Nursing and Medical	Completed
60130039	Gao, Daniel	Between the Flags - Tier 2: Case Studies (ADULT) - Nursing, Medical and Allied Health	Completed
60130039	Gao, Daniel	Between the Flags - Tier 2: Communication, Teamwork and Documentation	Completed
60130039	Gao, Daniel	Between the Flags - Tier 2: Systematic Assessment (ADULT)	Completed
60130039	Gao, Daniel	Care Coordination for Medical Officers	Completed
60130039	Gao, Daniel	Child Wellbeing and Child Protection - Part 1	Completed
60130039	Gao, Daniel	Child Wellbeing and Child Protection - Part 2	Completed
60130039	Gao, Daniel	Hand Hygiene Australia - Medical	Completed
60130039	Gao, Daniel	Infection Prevention Strategies for Medical Officers	Completed
60130039	Gao, Daniel	Open Disclosure	Completed
60130039	Gao, Daniel	Privacy - It's Yours to Keep	Completed
60130039	Gao, Daniel	Safety and Quality for Medical Officers	Completed
60130039	Gao, Daniel	Violence Prevention and Management for Medical Officers	Completed
60130039	Gao, Daniel	Work Health and Safety for Medical Officers	Completed
60130039	Gao, Daniel	Code of Conduct	Not Attempted
60130039	Gao, Daniel	Security Awareness - All Staff	Not Attempted
60130039	Gao, Daniel	Waste Management	Not Attempted
60130039	Gao, Daniel	Person Centred Care	Not Attempted
60130039	Gao, Daniel	Working in Culturally Diverse Contexts	Not Attempted
60130039	Gao, Daniel	Foundations for Healthcare Safety and Quality - Effectiveness and Appropriateness	Not Attempted
60130039	Gao, Daniel	Foundations for Healthcare Safety and Quality - An Introduction	Not Attempted
60130039	Gao, Daniel	Foundations for Healthcare Safety and Quality - Efficiency	Not Attempted
60130039	Gao, Daniel	Foundations for Healthcare Safety and Quality - Equity	Not Attempted
60130039	Gao, Daniel	Foundations for Healthcare Safety and Quality - Patient Centred Care	Not Attempted
60130039	Gao, Daniel	Foundations for Healthcare Safety and Quality - Safety	Not Attempted
60130039	Gao, Daniel	Foundations for Healthcare Safety and Quality - The Six Dimensions of Healthcare Quality	Not Attempted
60130039	Gao, Daniel	Foundations for Healthcare Safety and Quality - Timeliness and Accessibility	Not Attempted
60130039	Gao, Daniel	Work Health and Safety and hazardous manual tasks	Not Attempted
60130039	Gao, Daniel	Hand Hygiene	Expired
60130039	Gao, Daniel	COM1489 - WSLHD Orientation	Completed
60130039	Gao, Daniel	Enterprise Risk Management - an overview	Completed
60057377	Heyworth, Ashley Peter	Fire Safety & Evacuation - Practical	Expired
60057377	Heyworth, Ashley Peter	ims+ How to Notify an Incident	Not Attempted
60057377	Heyworth, Ashley Peter	Violence Prevention and Management - Personal Safety - face to face workshop	Not Attempted
60057377	Heyworth, Ashley Peter	Cyber Security Fundamentals	Expired
60057377	Heyworth, Ashley Peter	Basic Life Support Assessment	Expired
60057377	Heyworth, Ashley Peter	Fire and Evacuation	Expired
60057377	Heyworth, Ashley Peter	Basic Life Support - Adult	Current
60057377	Heyworth, Ashley Peter	Between the Flags - Tier 1: Awareness, Charts and Escalation	Completed
60057377	Heyworth, Ashley Peter	Between the Flags - Tier 2 workshop (ADULT - DETECT) - Nursing and Medical	Completed
60057377	Heyworth, Ashley Peter	Between the Flags - Tier 2: Case Studies (ADULT) - Nursing, Medical and Allied Health	Completed
60057377	Heyworth, Ashley Peter	Between the Flags - Tier 2: Communication, Teamwork and Documentation	Completed
60057377	Heyworth, Ashley Peter	Between the Flags - Tier 2: Systematic Assessment (ADULT)	Completed
60057377	Heyworth, Ashley Peter	Care Coordination for Medical Officers	Completed
60057377	Heyworth, Ashley Peter	Child Wellbeing and Child Protection - Part 1	Completed
60057377	Heyworth, Ashley Peter	Child Wellbeing and Child Protection - Part 2	Completed
60057377	Heyworth, Ashley Peter	Child Wellbeing and Child Protection - Part 3	Completed
60057377	Heyworth, Ashley Peter	Hand Hygiene Australia - Medical	Completed

60057377	Heyworth, Ashley Peter	Infection Prevention Strategies for Medical Officers	Completed
60057377	Heyworth, Ashley Peter	Open Disclosure	Completed
60057377	Heyworth, Ashley Peter	Personal protective equipment for combined transmission-based precautions	Completed
60057377	Heyworth, Ashley Peter	Privacy - It's Yours to Keep	Completed
60057377	Heyworth, Ashley Peter	Safety and Quality for Medical Officers	Completed
60057377	Heyworth, Ashley Peter	Violence Prevention and Management for Medical Officers	Completed
60057377	Heyworth, Ashley Peter	Work Health and Safety for Medical Officers	Completed
60057377	Heyworth, Ashley Peter	Enterprise Risk Management - an overview	Not Attempted
60057377	Heyworth, Ashley Peter	Hand Hygiene	Expired
60057377	Heyworth, Ashley Peter	COM1489 - WSLHD Orientation	Not Attempted
60057377	Heyworth, Ashley Peter	Work Health and Safety and hazardous manual tasks	Not Attempted
60057377	Heyworth, Ashley Peter	Code of Conduct	Completed
60057377	Heyworth, Ashley Peter	Security Awareness - All Staff	Completed
60057377	Heyworth, Ashley Peter	Waste Management	Completed
60085070	Kirwan, Alexander	Between the Flags - Tier 2 workshop (ADULT - DETECT) - Nursing and Medical	Not Attempted
60085070	Kirwan, Alexander	Basic Life Support Assessment	Expired
60085070	Kirwan, Alexander	Fire and Evacuation	Expired
60085070	Kirwan, Alexander	Fire Safety & Evacuation - Practical	Expired
60085070	Kirwan, Alexander	Cyber Security Fundamentals	Expired
60085070	Kirwan, Alexander	ims+ How to Notify an Incident	Not Attempted
60085070	Kirwan, Alexander	Basic Life Support - Adult	Current
60085070	Kirwan, Alexander	Between the Flags - Tier 1: Awareness, Charts and Escalation	Completed
60085070	Kirwan, Alexander	Between the Flags - Tier 2: Case Studies (ADULT) - Nursing, Medical and Allied Health	Completed
60085070	Kirwan, Alexander	Between the Flags - Tier 2: Communication, Teamwork and Documentation	Completed
60085070	Kirwan, Alexander	Between the Flags - Tier 2: Systematic Assessment (ADULT)	Completed
60085070	Kirwan, Alexander	Care Coordination for Medical Officers	Completed
60085070	Kirwan, Alexander	Child Wellbeing and Child Protection - Part 1	Completed
60085070	Kirwan, Alexander	Child Wellbeing and Child Protection - Part 2	Completed
60085070	Kirwan, Alexander	Child Wellbeing and Child Protection - Part 3	Completed
60085070	Kirwan, Alexander	Hand Hygiene Australia - Medical	Completed
60085070	Kirwan, Alexander	Infection Prevention Strategies for Medical Officers	Completed
60085070	Kirwan, Alexander	Open Disclosure	Completed
60085070	Kirwan, Alexander	Personal protective equipment for combined transmission-based precautions	Completed
60085070	Kirwan, Alexander	Privacy - It's Yours to Keep	Completed
60085070	Kirwan, Alexander	Safety and Quality for Medical Officers	Completed
60085070	Kirwan, Alexander	Violence Prevention and Management - Personal Safety - face to face workshop	Completed
60085070	Kirwan, Alexander	Violence Prevention and Management for Medical Officers	Completed
60085070	Kirwan, Alexander	Work Health and Safety for Medical Officers	Completed
60085070	Kirwan, Alexander	Hand Hygiene	Current
60085070	Kirwan, Alexander	COM1489 - WSLHD Orientation	Completed
60085070	Kirwan, Alexander	Code of Conduct	Completed
60085070	Kirwan, Alexander	Enterprise Risk Management - an overview	Completed
60085070	Kirwan, Alexander	Security Awareness - All Staff	Completed
60085070	Kirwan, Alexander	Waste Management	Completed
60085070	Kirwan, Alexander	Work Health and Safety and hazardous manual tasks	Completed
60083114	Lim, Rebecca	Between the Flags - Tier 2 workshop (ADULT - DETECT) - Nursing and Medical	Not Attempted
60083114	Lim, Rebecca	Between the Flags - Tier 2: Case Studies (ADULT) - Nursing, Medical and Allied Health	Incomplete
60083114	Lim, Rebecca	Violence Prevention and Management - Personal Safety - face to face workshop	Not Attempted
60083114	Lim, Rebecca	Basic Life Support Assessment	Expired
60083114	Lim, Rebecca	Respecting the Difference - face to face training	Not Attempted
60083114	Lim, Rebecca	Fire Safety & Evacuation - Practical	Expired
60083114	Lim, Rebecca	Fire and Evacuation	Expired
60083114	Lim, Rebecca	Cyber Security Fundamentals	Expired
60083114	Lim, Rebecca	ims+ How to Notify an Incident	Not Attempted
60083114	Lim, Rebecca	Basic Life Support - Adult	Current
60083114	Lim, Rebecca	Aboriginal Culture - Respecting the Difference	Completed
60083114	Lim, Rebecca	Between the Flags - Tier 1: Awareness, Charts and Escalation	Completed
60083114	Lim, Rebecca	Between the Flags - Tier 2: Communication, Teamwork and Documentation	Completed

60083114	Lim, Rebecca	Between the Flags - Tier 2: Systematic Assessment (ADULT)	Completed
60083114	Lim, Rebecca	Care Coordination for Medical Officers	Completed
60083114	Lim, Rebecca	Child Wellbeing and Child Protection - Part 1	Completed
60083114	Lim, Rebecca	Child Wellbeing and Child Protection - Part 2	Completed
60083114	Lim, Rebecca	Child Wellbeing and Child Protection - Part 3	Completed
60083114	Lim, Rebecca	Hand Hygiene Australia - Medical	Completed
60083114	Lim, Rebecca	Infection Prevention Strategies for Medical Officers	Completed
60083114	Lim, Rebecca	Open Disclosure	Completed
60083114	Lim, Rebecca	Personal protective equipment for combined transmission-based precautions	Completed
60083114	Lim, Rebecca	Privacy - It's Yours to Keep	Completed
60083114	Lim, Rebecca	Safety and Quality for Medical Officers	Completed
60083114	Lim, Rebecca	Violence Prevention and Management for Medical Officers	Completed
60083114	Lim, Rebecca	Work Health and Safety for Medical Officers	Completed
60083114	Lim, Rebecca	Hand Hygiene	Expired
60083114	Lim, Rebecca	Waste Management	Not Attempted
60083114	Lim, Rebecca	COM1489 - WSLHD Orientation	Completed
60083114	Lim, Rebecca	Code of Conduct	Completed
60083114	Lim, Rebecca	Enterprise Risk Management - an overview	Completed
60083114	Lim, Rebecca	Security Awareness - All Staff	Completed
60083114	Lim, Rebecca	Work Health and Safety and hazardous manual tasks	Completed
60113672	Mohotti, Jeewaka	Between the Flags - Tier 2 workshop (ADULT - DETECT) - Nursing and Medical	Not Attempted
60113672	Mohotti, Jeewaka	Child Protection targeted training	Not Attempted
60113672	Mohotti, Jeewaka	Violence Prevention and Management - Personal Safety - face to face workshop	Not Attempted
60113672	Mohotti, Jeewaka	Respecting the Difference - face to face training	Not Attempted
60113672	Mohotti, Jeewaka	Between the Flags - Tier 2 workshop (PAEDIATRIC - DETECT junior) - Nursing and Medical	Not Attempted
60113672	Mohotti, Jeewaka	Between the Flags - Tier 2: Systematic Assessment (PAEDIATRIC)	Not Attempted
60113672	Mohotti, Jeewaka	Between the Flags - Tier 2: eLearning Case Studies - Nursing & Medical (PAEDIATRIC)	Not Attempted
60113672	Mohotti, Jeewaka	ims+ How to Notify an Incident	Not Attempted
60113672	Mohotti, Jeewaka	Basic Life Support Assessment	Expired
60113672	Mohotti, Jeewaka	Fire and Evacuation	Expired
60113672	Mohotti, Jeewaka	Fire Safety & Evacuation - Practical	Expired
60113672	Mohotti, Jeewaka	Cyber Security Fundamentals	Expired
60113672	Mohotti, Jeewaka	Basic Life Support - Adult	Current
60113672	Mohotti, Jeewaka	Aboriginal Culture - Respecting the Difference	Completed
60113672	Mohotti, Jeewaka	Between the Flags - Tier 1: Awareness, Charts and Escalation	Completed
60113672	Mohotti, Jeewaka	Between the Flags - Tier 2: Case Studies (ADULT) - Nursing, Medical and Allied Health	Completed
60113672	Mohotti, Jeewaka	Between the Flags - Tier 2: Communication, Teamwork and Documentation	Completed
60113672	Mohotti, Jeewaka	Between the Flags - Tier 2: Systematic Assessment (ADULT)	Completed
60113672	Mohotti, Jeewaka	Care Coordination for Medical Officers	Completed
60113672	Mohotti, Jeewaka	Child Wellbeing and Child Protection - Part 1	Completed
60113672	Mohotti, Jeewaka	Child Wellbeing and Child Protection - Part 2	Completed
60113672	Mohotti, Jeewaka	Child Wellbeing and Child Protection - Part 3	Completed
60113672	Mohotti, Jeewaka	Hand Hygiene Australia - Medical	Completed
60113672	Mohotti, Jeewaka	Infection Prevention Strategies for Medical Officers	Completed
60113672	Mohotti, Jeewaka	Open Disclosure	Completed
60113672	Mohotti, Jeewaka	Personal protective equipment for combined transmission-based precautions	Completed
60113672	Mohotti, Jeewaka	Privacy - It's Yours to Keep	Completed
60113672	Mohotti, Jeewaka	Safety and Quality for Medical Officers	Completed
60113672	Mohotti, Jeewaka	Violence Prevention and Management for Medical Officers	Completed
60113672	Mohotti, Jeewaka	Work Health and Safety for Medical Officers	Completed
60113672	Mohotti, Jeewaka	Code of Conduct	Not Attempted
60113672	Mohotti, Jeewaka	Fire Safety and Awareness - Local Evacuation	Expired
60113672	Mohotti, Jeewaka	Waste Management	Not Attempted
60113672	Mohotti, Jeewaka	Work Health and Safety and hazardous manual tasks	Not Attempted
60113672	Mohotti, Jeewaka	Better Together: Preventing and managing bullying, harassment and discrimination	Not Attempted
60113672	Mohotti, Jeewaka	Hand Hygiene	Current
60113672	Mohotti, Jeewaka	COM1489 - WSLHD Orientation	Completed
60113672	Mohotti, Jeewaka	Enterprise Risk Management - an overview	Completed
60113672	Mohotti, Jeewaka	Security Awareness - All Staff	Completed

60113672	Mohotti, Jeewaka	Weight4KIDS - Core Module	Completed
60063250	Ng, Eugene	Between the Flags - Tier 2 workshop (ADULT - DETECT) - Nursing and Medical	Not Attempted
60063250	Ng, Eugene	Respecting the Difference - face to face training	Not Attempted
60063250	Ng, Eugene	Violence Prevention and Management - Personal Safety - face to face workshop	Not Attempted
60063250	Ng, Eugene	Fire Safety & Evacuation - Practical	Expired
60063250	Ng, Eugene	Basic Life Support Assessment	Expired
60063250	Ng, Eugene	Fire and Evacuation	Expired
60063250	Ng, Eugene	Cyber Security Fundamentals	Expired
60063250	Ng, Eugene	ims+ How to Notify an Incident	Not Attempted
60063250	Ng, Eugene	Basic Life Support - Adult	Current
60063250	Ng, Eugene	Aboriginal Culture - Respecting the Difference	Completed
60063250	Ng, Eugene	Between the Flags - Tier 1: Awareness, Charts and Escalation	Completed
60063250	Ng, Eugene	Between the Flags - Tier 2: Case Studies (ADULT) - Nursing, Medical and Allied Health	Completed
60063250	Ng, Eugene	Between the Flags - Tier 2: Communication, Teamwork and Documentation	Completed
60063250	Ng, Eugene	Between the Flags - Tier 2: Systematic Assessment (ADULT)	Completed
60063250	Ng, Eugene	Care Coordination for Medical Officers	Completed
60063250	Ng, Eugene	Child Wellbeing and Child Protection - Part 1	Completed
60063250	Ng, Eugene	Child Wellbeing and Child Protection - Part 2	Completed
60063250	Ng, Eugene	Child Wellbeing and Child Protection - Part 3	Completed
60063250	Ng, Eugene	Hand Hygiene Australia - Medical	Completed
60063250	Ng, Eugene	Infection Prevention Strategies for Medical Officers	Completed
60063250	Ng, Eugene	Open Disclosure	Completed
60063250	Ng, Eugene	Personal protective equipment for combined transmission-based precautions	Completed
60063250	Ng, Eugene	Privacy - It's Yours to Keep	Completed
60063250	Ng, Eugene	Safety and Quality for Medical Officers	Completed
60063250	Ng, Eugene	Violence Prevention and Management for Medical Officers	Completed
60063250	Ng, Eugene	Work Health and Safety for Medical Officers	Completed
60063250	Ng, Eugene	Hand Hygiene	Expired
60063250	Ng, Eugene	Waste Management	Not Attempted
60063250	Ng, Eugene	Work Health and Safety and hazardous manual tasks	Not Attempted
60063250	Ng, Eugene	COM1489 - WSLHD Orientation	Completed
60063250	Ng, Eugene	Code of Conduct	Completed
60063250	Ng, Eugene	Enterprise Risk Management - an overview	Completed
60063250	Ng, Eugene	Security Awareness - All Staff	Completed
40053505	Othman, Ghadah	Fire and Evacuation	Expired
40053505	Othman, Ghadah	Fire Safety & Evacuation - Practical	Expired
40053505	Othman, Ghadah	Basic Life Support Assessment	Expired
40053505	Othman, Ghadah	Respecting the Difference - face to face training	Not Attempted
40053505	Othman, Ghadah	Between the Flags - Tier 1: Awareness, Charts and Escalation	Not Attempted
40053505	Othman, Ghadah	Between the Flags - Tier 2: Case Studies (ADULT) - Nursing, Medical and Allied Health	Incomplete
40053505	Othman, Ghadah	Basic Life Support - Adult	Expired
40053505	Othman, Ghadah	Infection Prevention Strategies for Medical Officers	Not Attempted
40053505	Othman, Ghadah	Safety and Quality for Medical Officers	Not Attempted
40053505	Othman, Ghadah	Violence Prevention and Management for Medical Officers	Not Attempted
40053505	Othman, Ghadah	Child Wellbeing and Child Protection - Part 1	Not Attempted
40053505	Othman, Ghadah	Child Wellbeing and Child Protection - Part 2	Not Attempted
40053505	Othman, Ghadah	Child Wellbeing and Child Protection - Part 3	Not Attempted
40053505	Othman, Ghadah	Personal protective equipment for combined transmission-based precautions	Not Attempted
40053505	Othman, Ghadah	Cyber Security Fundamentals	Expired
40053505	Othman, Ghadah	ims+ How to Notify an Incident	Not Attempted
40053505	Othman, Ghadah	Aboriginal Culture - Respecting the Difference	Completed
40053505	Othman, Ghadah	Between the Flags - Tier 2 workshop (ADULT - DETECT) - Nursing and Medical	Completed
40053505	Othman, Ghadah	Between the Flags - Tier 2: Communication, Teamwork and Documentation	Completed
40053505	Othman, Ghadah	Between the Flags - Tier 2: Systematic Assessment (ADULT)	Completed
40053505	Othman, Ghadah	Care Coordination for Medical Officers	Completed
40053505	Othman, Ghadah	Hand Hygiene Australia - Medical	Completed
40053505	Othman, Ghadah	Open Disclosure	Completed
40053505	Othman, Ghadah	Privacy - It's Yours to Keep	Completed
40053505	Othman, Ghadah	Violence Prevention and Management - Personal Safety - face to face workshop	Completed
40053505	Othman, Ghadah	Work Health and Safety for Medical Officers	Completed
40053505	Othman, Ghadah	Enterprise Risk Management - an overview	Not Attempted
40053505	Othman, Ghadah	Hand Hygiene	Expired
40053505	Othman, Ghadah	Security Awareness - All Staff	Not Attempted

40053505	Othman, Ghadah	COM1489 - WSLHD Orientation	Completed
40053505	Othman, Ghadah	Code of Conduct	Completed
40053505	Othman, Ghadah	Waste Management	Completed
40053505	Othman, Ghadah	Work Health and Safety and hazardous manual tasks	Completed
60129998	Wang, Jeffery	Fire Safety & Evacuation - Practical	Expired
60129998	Wang, Jeffery	ims+ How to Notify an Incident	Not Attempted
60129998	Wang, Jeffery	Fire and Evacuation	Expired
60129998	Wang, Jeffery	Personal protective equipment for combined transmission-based precautions	Not Attempted
60129998	Wang, Jeffery	Cyber Security Fundamentals	Expired
60129998	Wang, Jeffery	Basic Life Support Assessment	Current
60129998	Wang, Jeffery	Basic Life Support - Adult	Current
60129998	Wang, Jeffery	Between the Flags - Tier 1: Awareness, Charts and Escalation	Completed
60129998	Wang, Jeffery	Between the Flags - Tier 2 workshop (ADULT - DETECT) - Nursing and Medical	Completed
60129998	Wang, Jeffery	Between the Flags - Tier 2: Case Studies (ADULT) - Nursing, Medical and Allied Health	Completed
60129998	Wang, Jeffery	Between the Flags - Tier 2: Communication, Teamwork and Documentation	Completed
60129998	Wang, Jeffery	Between the Flags - Tier 2: Systematic Assessment (ADULT)	Completed
60129998	Wang, Jeffery	Care Coordination for Medical Officers	Completed
60129998	Wang, Jeffery	Child Wellbeing and Child Protection - Part 1	Completed
60129998	Wang, Jeffery	Child Wellbeing and Child Protection - Part 2	Completed
60129998	Wang, Jeffery	Child Wellbeing and Child Protection - Part 3	Completed
60129998	Wang, Jeffery	Hand Hygiene Australia - Medical	Completed
60129998	Wang, Jeffery	Infection Prevention Strategies for Medical Officers	Completed
60129998	Wang, Jeffery	Open Disclosure	Completed
60129998	Wang, Jeffery	Privacy - It's Yours to Keep	Completed
60129998	Wang, Jeffery	Safety and Quality for Medical Officers	Completed
60129998	Wang, Jeffery	Violence Prevention and Management - Personal Safety - face to face workshop	Completed
60129998	Wang, Jeffery	Violence Prevention and Management for Medical Officers	Completed
60129998	Wang, Jeffery	Work Health and Safety for Medical Officers	Completed
60129998	Wang, Jeffery	Enterprise Risk Management - an overview	Not Attempted
60129998	Wang, Jeffery	Waste Management	Not Attempted
60129998	Wang, Jeffery	Hand Hygiene	Expired
60129998	Wang, Jeffery	Code of Conduct	Not Attempted
60129998	Wang, Jeffery	COM1489 - WSLHD Orientation	Not Attempted
60129998	Wang, Jeffery	Work Health and Safety and hazardous manual tasks	Not Attempted
60129998	Wang, Jeffery	Security Awareness - All Staff	Completed
60023729	Wang, Jeffrey	Aboriginal Culture - Respecting the Difference	Not Attempted
60023729	Wang, Jeffrey	Respecting the Difference - face to face training	Not Attempted
60023729	Wang, Jeffrey	Fire and Evacuation	Expired
60023729	Wang, Jeffrey	Open Disclosure	Not Attempted
60023729	Wang, Jeffrey	Basic Life Support - Adult	Expired
60023729	Wang, Jeffrey	Between the Flags - Tier 1: Awareness, Charts and Escalation	Not Attempted
60023729	Wang, Jeffrey	Between the Flags - Tier 2: Case Studies (ADULT) - Nursing, Medical and Allied Health	Not Attempted
60023729	Wang, Jeffrey	Between the Flags - Tier 2: Communication, Teamwork and Documentation	Not Attempted
60023729	Wang, Jeffrey	Between the Flags - Tier 2: Systematic Assessment (ADULT)	Not Attempted
60023729	Wang, Jeffrey	Between the Flags - Tier 2 workshop (ADULT - DETECT) - Nursing and Medical	Not Attempted
60023729	Wang, Jeffrey	Hand Hygiene Australia - Medical	Not Attempted
60023729	Wang, Jeffrey	Care Coordination for Medical Officers	Not Attempted
60023729	Wang, Jeffrey	Infection Prevention Strategies for Medical Officers	Not Attempted
60023729	Wang, Jeffrey	Safety and Quality for Medical Officers	Not Attempted
60023729	Wang, Jeffrey	Violence Prevention and Management for Medical Officers	Not Attempted
60023729	Wang, Jeffrey	Work Health and Safety for Medical Officers	Not Attempted
60023729	Wang, Jeffrey	Child Wellbeing and Child Protection - Part 1	Not Attempted
60023729	Wang, Jeffrey	Child Wellbeing and Child Protection - Part 2	Not Attempted
60023729	Wang, Jeffrey	Child Wellbeing and Child Protection - Part 3	Not Attempted
60023729	Wang, Jeffrey	Violence Prevention and Management - Personal Safety - face to face workshop	Not Attempted
60023729	Wang, Jeffrey	Fire Safety & Evacuation - Practical	Expired
60023729	Wang, Jeffrey	Basic Life Support Assessment	Expired
60023729	Wang, Jeffrey	Personal protective equipment for combined transmission-based precautions	Not Attempted



60023729	Wang, Jeffrey	Cyber Security Fundamentals	Expired
60023729	Wang, Jeffrey	ims+ How to Notify an Incident	Not Attempted
60023729	Wang, Jeffrey	Privacy - It's Yours to Keep	Not Attempted
60023729	Wang, Jeffrey	Code of Conduct	Not Attempted
60023729	Wang, Jeffrey	Enterprise Risk Management - an overview	Not Attempted
60023729	Wang, Jeffrey	Security Awareness - All Staff	Not Attempted
60023729	Wang, Jeffrey	Waste Management	Not Attempted
60023729	Wang, Jeffrey	Hand Hygiene	Expired
60023729	Wang, Jeffrey	Work Health and Safety and hazardous manual tasks	Not Attempted
60023729	Wang, Jeffrey	COM1489 - WSLHD Orientation	Completed
60044585	Yeo, Cheng Hong	Between the Flags - Tier 2 workshop (ADULT - DETECT) - Nursing and Medical	Not Attempted
60044585	Yeo, Cheng Hong	Fire Safety & Evacuation - Practical	Expired
60044585	Yeo, Cheng Hong	Care Coordination for Medical Officers	Not Attempted
60044585	Yeo, Cheng Hong	Infection Prevention Strategies for Medical Officers	Not Attempted
60044585	Yeo, Cheng Hong	Safety and Quality for Medical Officers	Not Attempted
60044585	Yeo, Cheng Hong	Violence Prevention and Management for Medical Officers	Not Attempted
60044585	Yeo, Cheng Hong	Work Health and Safety for Medical Officers	Not Attempted
60044585	Yeo, Cheng Hong	Child Wellbeing and Child Protection - Part 1	Not Attempted
60044585	Yeo, Cheng Hong	Child Wellbeing and Child Protection - Part 2	Not Attempted
60044585	Yeo, Cheng Hong	Child Wellbeing and Child Protection - Part 3	Not Attempted
60044585	Yeo, Cheng Hong	Violence Prevention and Management - Personal Safety - face to face workshop	Not Attempted
60044585	Yeo, Cheng Hong	Basic Life Support - Adult	Expired
60044585	Yeo, Cheng Hong	Fire and Evacuation	Expired
60044585	Yeo, Cheng Hong	ims+ How to Notify an Incident	Not Attempted
60044585	Yeo, Cheng Hong	Cyber Security Fundamentals	Expired
60044585	Yeo, Cheng Hong	Personal protective equipment for combined transmission-based precautions	Not Attempted
60044585	Yeo, Cheng Hong	Basic Life Support Assessment	Current
60044585	Yeo, Cheng Hong	Between the Flags - Tier 1: Awareness, Charts and Escalation	Completed
60044585	Yeo, Cheng Hong	Between the Flags - Tier 2: Case Studies (ADULT) - Nursing, Medical and Allied Health	Completed
60044585	Yeo, Cheng Hong	Between the Flags - Tier 2: Communication, Teamwork and Documentation	Completed
60044585	Yeo, Cheng Hong	Between the Flags - Tier 2: Systematic Assessment (ADULT)	Completed
60044585	Yeo, Cheng Hong	Hand Hygiene Australia - Medical	Completed
60044585	Yeo, Cheng Hong	Open Disclosure	Completed
60044585	Yeo, Cheng Hong	Privacy - It's Yours to Keep	Completed
60044585	Yeo, Cheng Hong	Security Awareness - All Staff	Not Attempted
60044585	Yeo, Cheng Hong	Hand Hygiene	Expired
60044585	Yeo, Cheng Hong	Enterprise Risk Management - an overview	Not Attempted
60044585	Yeo, Cheng Hong	Work Health and Safety and hazardous manual tasks	Not Attempted
60044585	Yeo, Cheng Hong	COM1489 - WSLHD Orientation	Completed
60044585	Yeo, Cheng Hong	Code of Conduct	Completed
60044585	Yeo, Cheng Hong	Waste Management	Completed

## My Learning History

Course Name  Course Type: All

Sort by: Course Name

Total: 56 [1-50] 1 2

	<b>Aboriginal Culture - Respecting the Difference</b> <span style="color: red;">F</span> Status: Completed Completed Date: 19-May-20	<input type="button" value="Certificate"/>
	<b>Accountability - Improving the Way We Work</b> Status: Completed (Score: 100%) Completed Date: 30-Apr-20	<input type="button" value="Certificate"/>
	<b>Basic Life Support - Adult</b> <span style="color: red;">F</span> Status: Current Completed Date: 16-Mar-18 Due Date: 15-Mar-23	<input type="button" value="Certificate"/>
	<b>Basic Life Support Assessment</b> Date: Mon, 21 Jan 2019, 10:00am - Thu, 28 Feb 2019, 12:00pm (GMT+11) AEST Status: Completed Completed Date: 21-Jan-19	
	<b>Basic Life Support Assessment</b> <span style="color: red;">F</span> Status: Expired Completed Date: 21-Jan-19 Due Date: 21-Jan-20	<input type="button" value="Certificate"/>
	<b>Between the Flags - Tier 1: Awareness, Charts and Escalation (eLearning)</b> <span style="color: red;">F</span> Status: Completed Completed Date: 24-Mar-20	<input type="button" value="Certificate"/>
	<b>Between the Flags - Tier 2: Case Studies (ADULT) - Nursing, Medical and Allied Health</b> <span style="color: red;">F</span> Status: Completed Completed Date: 19-May-20	<input type="button" value="Certificate"/>
	<b>Between the Flags - Tier 2: Communication, Teamwork and Documentation</b> <span style="color: red;">F</span> Status: Completed Completed Date: 24-Mar-20	<input type="button" value="Certificate"/>
	<b>Between the Flags - Tier 2: Systematic Assessment (ADULT)</b> <span style="color: red;">F</span> Status: Completed Completed Date: 24-Mar-20	<input type="button" value="Certificate"/>
	<b>BloodSafe: Clinical Transfusion Practice</b> Status: Completed Completed Date: 05-Jan-15	<input type="button" value="Certificate"/>
	<b>BloodSafe: Transporting Blood</b> Status: Expired Completed Date: 05-Jan-15 Due Date: 04-Jan-20	<input type="button" value="Certificate"/>
	<b>Care Coordination for Medical Officers</b> <span style="color: red;">F</span> Status: Completed (Score: 100%) Completed Date: 24-Mar-20 Last Completed: 05-Jun-20	<input type="button" value="Certificate"/>
	<b>Central Venous Access Devices: the fundamentals</b> Status: Completed (Score: 100%) Completed Date: 27-Nov-15	<input type="button" value="Certificate"/>
	<b>Child Wellbeing and Child Protection - Part 1</b> <span style="color: red;">F</span> Status: Completed Completed Date: 17-May-20	<input type="button" value="Certificate"/>
	<b>Child Wellbeing and Child Protection - Part 2</b> <span style="color: red;">F</span> Status: Completed Completed Date: 18-May-20	<input type="button" value="Certificate"/>
	<b>Child Wellbeing and Child Protection - Part 3</b> <span style="color: red;">F</span> Status: Completed (Score: 100%) Completed Date: 18-May-20	<input type="button" value="Certificate"/>
	<b>Child Wellbeing and Child Protection 2 - Patient Facing Clinicians</b> <span style="color: red;">F</span> Status: Completed Completed Date: 18-May-20	<input type="button" value="Certificate"/>
	<b>Clinician Disclosure</b> Status: Completed Completed Date: 30-Apr-20	<input type="button" value="Certificate"/>
	<b>Code of Conduct</b> <span style="color: red;">F</span> Status: Completed (Score: 100%) Completed Date: 05-Nov-20	<input type="button" value="Certificate"/>
	<b>COM1440 - WSLHD Orientation</b> <span style="color: red;">F</span> Date: Mon, 17 Aug, 07:45am - 08:00am (GMT+10) AEST Status: Completed Completed Date: 17-Aug-20	
	<b>Contrast Media: Administration</b> Status: Completed (Score: 100%) Completed Date: 30-Apr-20	
	<b>Contrast Media: Screening Process</b> Status: Completed (Score: 100%) Completed Date: 30-Apr-20	
	<b>Fire and Evacuation</b> <span style="color: red;">F</span> Status: Current Completed Date: 19-May-20 Due Date: 19-May-21	<input type="button" value="Certificate"/>
	<b>Fire Safety &amp; Evacuation - Practical</b> <span style="color: red;">F</span> Status: Expired Completed Date: 09-Jan-19 Due Date: 09-Jan-20	<input type="button" value="Certificate"/>
	<b>Fire Safety and Evacuation - Practical</b> Date: Thu, 25 May 2017, 10:00am - 10:45am (GMT+10) AEST Status: Completed Completed Date: 25-May-17	
	<b>Fire Safety and Evacuation - Practical</b> Date: Wed, 09 Jan 2019, 10:00am - 11:00am (GMT+11) AEST Status: Completed Completed Date: 09-Jan-19	
	<b>Hand Hygiene</b> <span style="color: red;">F</span> Status: Current Completed Date: 18-May-20 Due Date: 18-May-25	<input type="button" value="Certificate"/>
	<b>Hand Hygiene Australia - Medical</b> <span style="color: red;">F</span> Status: Completed (Score: 100%) Completed Date: 25-May-17	<input type="button" value="Certificate"/>
	<b>High Quality Requests for Medical Imaging</b> Status: Completed Completed Date: 30-Apr-20	<input type="button" value="Certificate"/>
	<b>I/S-Standard 11.4 - Whole of Family Team and its Services. Presented by Ms. N. Morrison</b> Date: Mon, 31 Jul 2017, 08:45am - 09:15am (GMT+10) AEST Status: Completed Completed Date: 31-Jul-17	
	<b>I/S-Standard 12.1 - When Addicts Get Sick</b> Date: Thu, 20 Jul 2017, 12:30pm - 01:30pm (GMT+10) AEST Status: Completed Completed Date: 20-Jul-17	
	<b>IIMS: Notifier Training</b> Status: Completed Completed Date: 30-Apr-20	<input type="button" value="Certificate"/>
	<b>Infection Prevention -Transmission-based precautions</b> Status: Passed Completed Date: 30-Apr-20	<input type="button" value="Certificate"/>
	<b>Infection Prevention and Control Practices</b> <span style="color: orange;">★</span> Status: Current Completed Date: 30-Apr-20 Due Date: 29-Apr-25	<input type="button" value="Certificate"/>
	<b>Infection Prevention Strategies for Medical Officers</b> <span style="color: red;">F</span> Status: Completed (Score: 100%) Completed Date: 24-Mar-20 Last Completed: 05-Jun-20	<input type="button" value="Certificate"/>
	<b>Interprofessional Practice</b> Status: Completed Completed Date: 30-Apr-20	<input type="button" value="Certificate"/>
	<b>Introduction to Work, Health and Safety</b> <span style="color: red;">F</span> Status: Completed (Score: 100%) Completed Date: 09-May-17	<input type="button" value="Certificate"/>
	<b>Managing Your Time</b> Status: Completed (Score: 100%) Completed Date: 30-Apr-20	<input type="button" value="Certificate"/>
	<b>Mandatory Training Challenge Test</b> Status: Completed Completed Date: 05-Jun-20	
	<b>Medical Officers Mandatory Training</b> <span style="color: red;">F</span> Status: Completed Completed Date: 05-Jun-20	<input type="button" value="Certificate"/>
	<b>Open Disclosure</b> <span style="color: red;">F</span> Status: Completed (Score: 80%) Completed Date: 30-Apr-20	<input type="button" value="Certificate"/>
	<b>Patient Identification and Procedure Matching</b> Status: Completed (Score: 100%) Completed Date: 30-Apr-20	<input type="button" value="Certificate"/>
	<b>PCO14107 - Electronic Medical Record (eMR) and electronic Medication (eMeds) Medical</b> Date: Fri, 03 May 2019, 02:00pm - 03:00pm (GMT+10) AEST Status: Completed Completed Date: 03-Jun-19	<input type="button" value="Certificate"/>
	<b>Personal protective equipment for combined transmission-based precautions</b> <span style="color: red;">F</span> Status: Completed Completed Date: 19-May-20	<input type="button" value="Certificate"/>
	<b>Post Incident Safety Huddles</b> Status: Completed (Score: 100%) Completed Date: 30-Apr-20	<input type="button" value="Certificate"/>
	<b>Privacy Module 1 - Know Your Boundaries</b> <span style="color: red;">F</span> Status: Completed Completed Date: 24-Mar-20	<input type="button" value="Certificate"/>
	<b>Radiology pathology - Lymphoma</b> Status: Passed (Score: 100%) Completed Date: 23-Apr-19	<input type="button" value="Certificate"/>
	<b>Resuscitation Guidelines</b> Date: Tue, 19 Dec 2017, 01:00pm - 02:15pm (GMT+11) AEST Status: Completed Completed Date: 19-Dec-17	
	<b>Safe Use of Anticoagulants</b> Status: Completed Completed Date: 30-Apr-20	<input type="button" value="Certificate"/>
	<b>Safe Use of High-Risk Medicines</b> Status: Completed Completed Date: 30-Apr-20	<input type="button" value="Certificate"/>

F Mandatory F CE Directive ★ Assigned

## My learning completed studies.

Completed Date From:  Completed Date To:   Include External Learning  Include Auto Completions

Sort by: Completed Date Total: 72 (1-50) 1 2

- BloodSafe: Clinical Transfusion Practice**  
Status: Completed Completed Date: 18-Dec-12 Certificate
- Clinical Handover: Think, Talk and Write ISBAR**  
Status: Completed Completed Date: 14-Jan-13 Certificate
- Hazardous Manual Tasks**  
Status: Completed Completed Date: 16-Jan-13 Certificate
- Hand Hygiene Australia - Medical**  
Status: Completed Completed Date: 16-Jan-13 Certificate
- Introduction to Work, Health and Safety**  
Status: Completed Completed Date: 16-Jan-13 Certificate
- Work Health and Safety for Medical Officers**  
Status: Completed Completed Date: 16-Jan-13 Certificate  
Less Completed: 18-Feb-13
- Deteriorating Patient - Adult**  
Status: Expired Completed Date: 17-Jan-13 Certificate
- Between the Flags - Tier 1: Awareness, Charts and Escalation (eLearning)**  
Status: Completed Completed Date: 17-Jan-13 Certificate
- Child Wellbeing and Child Protection - Educational resource**  
Status: Completed Completed Date: 13-Mar-13 Certificate
- Fire Safety and Evacuation - Practical**  
Date: Mon, 16 Nov 2015, 02:30pm - 03:00pm (GMT+11) AEST  
Status: Completed Completed Date: 16-Nov-15
- Using Radiometer Blood Gas ABL800 Analysers**  
Status: Expired Completed Date: 17-Nov-15

- Basic Life Support - Adult**  
Status: Current Completed Date: 27-Dec-15 Due Date: 29-Dec-20 Certificate
- Open Disclosure**  
Status: Completed (Score: 90%) Completed Date: 27-Dec-15 Certificate
- Privacy Module 4 - Know Your Boundaries**  
Status: Completed Completed Date: 30-Dec-15 Certificate
- I/S-Standard 15.3 High Flow Nasal Oxygenation (Justin from F & P)**  
Date: Thu, 24 Nov 2016, 05:00am - 06:00am (GMT+11) AEST  
Status: Completed Completed Date: 29-Jan-16
- Life Support Assessment Tool**  
Date: Wed, 17 Feb 2016, 08:00am - 09:30am (GMT+11) AEST  
Status: Completed Completed Date: 17-Feb-16
- 9.2 Consultant BTF Update and BLS**  
Date: Wed, 17 Feb 2016, 09:00am - 09:30am (GMT+11) AEST  
Status: Completed Completed Date: 17-Feb-16
- Infection Prevention and Control Practices**  
Status: Current Completed Date: 22-Feb-16 Due Date: 20-Feb-21 Certificate
- WSLHD Critical Clinical Essentials Online**  
Status: Completed Completed Date: 22-Feb-16 Certificate
- Aboriginal Culture - Respecting the Difference**  
Status: Completed Completed Date: 22-Feb-16 Certificate
- Fire Safety and Evacuation - Practical**  
Date: Thu, 25 Feb 2016, 02:00pm - 02:30pm (GMT+11) AEST  
Status: Completed Completed Date: 25-Feb-16
- Between the Flags - Tier 2: Communication, Teamwork and Documentation**  
Status: Completed Completed Date: 25-Feb-16 Certificate
- Between the Flags - Tier 2: Systematic Assessment (ADULT)**  
Status: Completed Completed Date: 25-Feb-16 Certif
- Between the Flags - Tier 2: Case Studies (ADULT) - Nursing, Medical and Allied Health**  
Status: Completed Completed Date: 25-Feb-16 Certificate

Browser window showing training completion records for NSW Health Corporate Orientation and other modules.

Module Name	Status	Completed Date	Due Date	Score	Certificate
NSW Health Corporate Orientation : Welcome	Completed	25-Feb-16			Certificate
NSW Health Corporate Orientation : Your Pathway	Completed	25-Feb-16			Certificate
Mandatory Training Explained	Completed	25-Feb-16			
Code of Conduct	Completed (Score: 100%)	25-Feb-16		100%	Certificate
Basic Life Support Assessment -RPAH	Completed	21-Jun-17			
Basic Life Support Assessment	Completed	13-Mar-18			
Basic Life Support Assessment	Expired	13-Mar-18	13-Mar-19		
OHS1442 - Disaster, White Level Bomb Threats Awareness	Expired	19-Mar-18			
Enterprise Risk Management - an overview	Completed	19-Mar-18			Certificate
Infection Prevention and Control Principles for non-clinical staff	Current	19-Mar-18	18-Mar-23		Certificate
Hand Hygiene	Current	19-Mar-18	19-Mar-23		Certificate
Care Coordination for Medical Officers	Completed (Score: 100%)	19-Mar-18		100%	Certificate
Fire Safety and Evacuation - Practical	Completed	09-Jan-19			

Browser window showing a list of training modules in the NSW Health SEERT system. The browser tabs include "WS Applications. - Western Sy...", "MHL - 40045678 (Samuel C...)", and "WS Applications. - Wester...".

Module Name	Status	Score	Completed Date	Due Date	Certificate
Fire Safety and Evacuation - Practical	Completed		09-Jan-19		
Infection Prevention Strategies for Medical Officers	Completed	100%	18-Jan-19		Certificate
Safety and Quality for Medical Officers	Completed	100%	18-Jan-19		Certificate
Violence Prevention and Management for Medical Officers	Completed	100%	18-Jan-19		Certificate
Child Wellbeing and Child Protection - Part 1	Completed		18-Jan-19		Certificate
Child Wellbeing and Child Protection - Part 2	Completed		20-Jan-19		Certificate
BloodSafe: Transporting Blood	Current		30-Jan-19	29-Jan-24	
Child Wellbeing and Child Protection 2 - Patient Facing Clinicians	Completed		30-Jan-19		Certificate
Child Wellbeing and Child Protection - Part 3	Completed	100%	30-Jan-19		Certificate
Security Awareness - All Staff	Completed		30-Jan-19		Certificate
Medical Officers Mandatory Training	Completed		18-Feb-19		Certificate
Mandatory Training Challenge Test	Completed		18-Feb-19		
Fire Safety and Awareness - Local Evacuation	Current		03-Jun-19		














The screenshot shows a web browser window with the following tabs: 'https://nswhealth.seert...', 'WS Applications. - Western Sy...', and 'MHL - 40045678 (Samuel C...'. The browser address bar shows 'https://nswhealth.seert...'. The main content area displays a list of training modules, each with a status icon (a green checkmark in a circle), a title, a status description, completion dates, and a 'Certificate' button. The modules are:

- Safety and Quality for Medical Officers** (Mandatory): Status: Completed (Score: 100%) Completed Date: 18-Jan-19 Last Completed: 18-Feb-19
- Violence Prevention and Management for Medical Officers** (Mandatory): Status: Completed (Score: 100%) Completed Date: 18-Jan-19 Last Completed: 18-Feb-19
- Child Wellbeing and Child Protection - Part 1** (Mandatory): Status: Completed Completed Date: 18-Jan-19
- Child Wellbeing and Child Protection - Part 2** (Mandatory): Status: Completed Completed Date: 20-Jan-19
- BloodSafe: Transporting Blood** (Assigned): Status: Current Completed Date: 30-Jan-19 Due Date: 29-Jan-24
- Child Wellbeing and Child Protection 2 - Patient Facing Clinicians** (Mandatory): Status: Completed Completed Date: 30-Jan-19
- Child Wellbeing and Child Protection - Part 3** (Mandatory): Status: Completed (Score: 100%) Completed Date: 30-Jan-19
- Security Awareness - All Staff** (CE Directive): Status: Completed Completed Date: 30-Jan-19
- Medical Officers Mandatory Training** (Mandatory): Status: Completed Completed Date: 18-Feb-19
- Mandatory Training Challenge Test** (Mandatory): Status: Completed Completed Date: 18-Feb-19
- Fire Safety and Awareness - Local Evacuation** (Assigned): Status: Current Completed Date: 03-Jun-19
- Fire Safety & Evacuation - Local Evacuation Exercise** (Assigned): Status: Current Completed Date: 03-Jun-19

At the bottom left, there is a legend: Mandatory (red square), CE Directive (blue square), Assigned (orange star).

Browser tabs: <https://nswhealth.seert...> | WS Applications. - Western Sy... | MHL - 40045678 (Samuel C...)

Browser address bar: [Google](#) | [WS Applications. - Wester...](#)

	<b>Fire Awareness - Local Evacuation only</b> Date: Mon, 03 Jun 2019, 08:30am - 09:30am (GMT+10) AEST Status: Completed Completed Date: 03-Jun-19	
	<b>Fire Safety &amp; Evacuation - Local Evacuation Exercise</b> Status: Completed Completed Date: 03-Jun-19	
	<b>Fire and Evacuation</b> Status: Current Completed Date: 23-Sep-19 Due Date: 22-Sep-20	<a href="#">Certificate</a>
	<b>DEV14035 - Image Interpretation Registrar Training</b> Date: Wed, 25 Sep 2019, 05:00pm - 07:00pm (GMT+10) AEST Status: Completed Completed Date: 09-Oct-19	
	<b>OHS1411 - Disaster Awareness Training</b> Status: Current Completed Date: 24-Mar-20 Due Date: 24-Mar-21	<a href="#">Certificate</a>
	<b>Violence Prevention and Management - Awareness</b> Status: Completed Completed Date: 24-Mar-20	<a href="#">Certificate</a>
	<b>Promoting Acceptable Behaviour in the Workplace</b> Status: Completed Completed Date: 24-Mar-20	
	<b>IIMS: Notifier Training</b> Status: Completed Completed Date: 24-Mar-20	<a href="#">Certificate</a>
	<b>Post Incident Safety Huddles</b> Status: Completed (Score: 100%) Completed Date: 24-Mar-20	<a href="#">Certificate</a>
	<b>Fire Safety &amp; Evacuation - Practical</b> Status: Current Completed Date: 25-Mar-20 Due Date: 25-Mar-21	
	<b>Learning Path - Fire Safety and Evacuation</b> Status: Completed Completed Date: 25-Mar-20	<a href="#">Certificate</a>
	<b>Fire Safety and Evacuation - Practical</b> Date: Wed, 25 Mar, 01:30pm - 02:00pm (GMT+11) AEST Status: Completed Completed Date: 25-Mar-20	
	<b>Accountability - Improving the Way We Work</b> Status: Completed (Score: 100%) Completed Date: 25-Mar-20	

The screenshot shows a web browser window with the following elements:

- Browser Address Bar:** <https://nswhealth.seert...>
- Browser Tabs:** WS Applications. - Western Sy..., MHL - 40045678 (Samuel C...)
- Page Content:** A list of 11 learning activities, each with a status and completion date. A 'Certificate' button is present for most items.
- Legend:** Located at the bottom left, it defines icons: a red 'F' for 'Mandatory', a blue 'F' for 'CE Directive', and an orange star for 'Assigned'.

Activity Name	Status	Completion Date	Certificate Available
Learning Path - Fire Safety and Evacuation <b>F</b>	Completed	25-Mar-20	Yes
Fire Safety and Evacuation - Practical	Completed	25-Mar-20	No
Accountability - Improving the Way We Work	Completed (Score: 100%)	25-Mar-20	No
Clinician Disclosure	Completed	26-Mar-20	Yes
Contrast Media: Administration	Completed (Score: 100%)	26-Mar-20	No
Patient Identification and Procedure Matching	Completed (Score: 100%)	26-Mar-20	Yes
Interprofessional Practice	Completed	27-Mar-20	Yes
Managing Your Time	Completed (Score: 100%)	27-Mar-20	Yes
High Quality Requests for Medical Imaging	Completed	27-Mar-20	Yes
Safe Use of Anticoagulants	Completed	28-Mar-20	Yes
Infection Prevention -Transmission-based precautions	Passed	28-Mar-20	Yes
Contrast Media: Screening Process	Completed (Score: 100%)	31-Mar-20	No



**Preeti Saraswati (Western Sydney LHD)**

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**From:** Mila Dimitrijevic (Western Sydney LHD)  
**Sent:** Friday, 17 April 2020 10:06 AM  
**To:** Kim Watson (Western Sydney LHD)  
**Cc:** Jane Li (Western Sydney LHD)  
**Subject:** Mandatory Training  
**Attachments:** Between the Flags Tier 1.pdf; IIMS Notifier Training Certificate Mila.pdf; Open Disclosure Course Certificate Mila.pdf; Safe Use of Anticoagulants Mila Certificate.pdf; Safe use of high risk medicines intro Mila.pdf; Safe Use of Opioids Mila.pdf; Screenshots of Completed Modules.docx; Violence Prevention Certificate Mila.pdf

Hi Kim,

I've completed most of them.

I have certificates (attached) for:

Between the Flags- Tier 1: awareness, charts and escalation (mandatory on my list when I opened it);  
IIMS: Notifier Training;  
Open Disclosure;  
Safe Use of High-Risk Medicines: introductory module (mandatory before proceeding to opioids and anticoagulants);  
Safe Use of Opioids;  
Safe Use of Anticoagulants;  
Violence Prevention and Management- Awareness.

I have completed the following, which do not come with certificates, but I have taken screenshots:

Accountability- Improving the Way we Work

Contrast Media: Screening Process

DEV14035- Image Interpretation Registrar Training

Hand Hygiene Australia- Medical (I have done it 5 times over on the 17<sup>th</sup> April 2020 alone and had completed it prior, with a 100% score in each quiz and completion of every slide it has, and it still won't issue a certificate. No idea what is going on, but after 5 goes of the same thing, I won't be repeating it).

Haven't gotten round to some of the others, though I do note that course 3. "Clinical disclosure" does not exist. Could you please clarify?

Kind regards,

Mila

**Preeti Saraswati (Western Sydney LHD)**

---

**From:** Alexander Kirwan [REDACTED]  
**Sent:** Wednesday, 25 March 2020 6:21 PM  
**To:** Kim Watson (Western Sydney LHD)  
**Subject:** Re: Mandatory Training Certificates  
**Attachments:** High Quality Requests - Alex Kirwan.pdf; Infection Preventin Transmission Base Precautions - Alex Kirwan.pdf; Interprofessional Practice - Alex Kirwan.pdf; Infection Prevention and Control Practices - Alex Kirwan.pdf; IIMS Notifier - Alex Kirwan.pdf; Managing Your Time - Alex Kirwan.pdf; Open Disclosure - Alex Kirwan.pdf; Patient Identification - Alex Kiwran.pdf; Post Incident Safety Huddles - Alex Kirwan.pdf; Promoting Acceptable Behaviour - Alex Kirwan.pdf; Safe Use of Anticoagulants - Alex Kirwan.pdf; Safe Use of Opioids - Alex Kirwan.pdf; Accountability - Alex Kirwan.pdf; Clinical Disclosure - Alex Kirwan.pdf; Contrast Media - Administration.pdf; Contrast Media Screening Process - Alex Kirwan.pdf; Hand Hygiene Australia Medical - Alex Kirwan.pdf

Hi Kim,

I submitted it on March 18th.

Here are the certificates from the HETI modules listed in the document provided by Jane and Mohammed.

Thanks,

Alexander Kirwan

On Tue, 24 Mar 2020 at 08:52, Kim Watson (Western Sydney LHD) <[REDACTED]> wrote:

Thanks, this is great. Thank you.

What date had you attempted to submit the online reporting module?

Kim

**From:** Alexander Kirwan [mailto:[REDACTED]]  
**Sent:** Tuesday, 24 March 2020 8:47 AM  
**To:** Kim Watson (Western Sydney LHD) <[REDACTED]>  
**Subject:** Re: Mandatory Training Certificates

Yes to both questions, on our first day on February the 3rd.

I've also competed the online report writing module and had attempted to submit that through the RANZCR website.

Thanks,

Sent from my phone  
Alexander Kirwan

On Tue, 24 Mar 2020, 08:12 Kim Watson (Western Sydney LHD), <[REDACTED]> wrote:

Hi Alexander

Further to your email below. Did you attend an orientation day at Westmead? If so what date? During that orientation was there Patient Safety discussed during that day session?

Many Thanks

Kim

**From:** Alexander Kirwan [mailto:[REDACTED]]

**Sent:** Monday, 23 March 2020 4:26 PM

**To:** Kim Watson (Western Sydney LHD) [REDACTED]

**Subject:** Re: Mandatory Training Certificates

Hi Kim,

I'm not really sure what those RANZCR things are, we only just got enrolled last week and everything has been up in the air with the Covid situation.

Thanks,

Sent from my phone  
Alexander Kirwan

On Mon, 23 Mar 2020, 14:50 Kim Watson (Western Sydney LHD), <[REDACTED]> wrote:

Dear Westmead Trainees

I hope you are all coping relatively well with this ongoing health crisis and difficult times.

I am asking each of you to send me your current on line mandatory training certificates to date.

Also any evidence for completion of Patient Safety Training, Report Writing and Non-Medical Expert Roles in regard to the RANZCR curriculum.

Your co-operation in supplying this information will be greatly appreciated by this coming Wednesday 25<sup>th</sup> March 2020.

Kind Regards

Kim

**Kim Watson**

Network Education Support Officer | **Radiology Local Area Network (LAN) 2**

*Encompassing Blacktown Mt Druitt, Concord, Orange Base, Royal Prince Alfred & Westmead Hospitals.*

Westmead Hospital Education Block, Level 3, Postgraduate Medical Education Centre

PO Box 533 WENTWORTHVILLE NSW 2145

Phone [REDACTED] Mobile – [REDACTED] Email [REDACTED]

Web [www.wsihd.health.nsw.gov.au](http://www.wsihd.health.nsw.gov.au)

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**Preeti Saraswati (Western Sydney LHD)**

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**From:** Jeev Mohotti <[REDACTED]>  
**Sent:** Thursday, 9 April 2020 5:03 PM  
**To:** Kim Watson (Western Sydney LHD)  
**Subject:** Mandatory Modules for RANZCR  
**Attachments:** Florida Module 1.jpg; Florida Module 2.jpg; Florida Module 3.jpg; Accountability.jpg; Clinician disclosure.pdf; Contrast Media Administration.jpg; Contrast Media Screening Process.jpg; Hand Hygiene Australia - Medical.jpg; High quality requests for medical imaging.pdf; IIMS Notifier.pdf; Infection Prevention – Transmission Base precautions.pdf; Infection Prevention and Control Practices.pdf; Interprofessional Practice.pdf; Managing your time.pdf; Open Disclosure.pdf; Patient identification and procedure matching.pdf; Post incident safety huddles.pdf; Promoting Acceptable Behaviour in the workplace.jpg; Safe use of anticoagulants.pdf; Safe use of opioids.pdf

Dear Kim

Please see attached the certificates for the modules RANZCR required. Please let me know if I missed anything.

Hope you have a happy Easter!!

Cheers

Jeev

----- Forwarded message -----

**From:** Jeevaka Mohotti (Western Sydney LHD) [REDACTED]

**Date:** Thu, 9 Apr 2020, 16:51

**Subject:** Mandatory Modules for RANZCR

**To:** [REDACTED]

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**Preeti Saraswati (Western Sydney LHD)**

---

**From:** Eugene Ng <[REDACTED]>  
**Sent:** Friday, 27 March 2020 4:01 PM  
**To:** Kim Watson (Western Sydney LHD)  
**Subject:** Mandatory Training Certificates EUGENE NG  
**Attachments:** ACCOUNTABILITY course\_certificate.pdf; BETWEEN THE FLAGS TIER 1 course\_certificate.pdf; BETWEEN THE FLAGS TIER 2 COMM course\_certificate.pdf; BETWEEN THE FLAGS TIER 2 course\_certificate.pdf; BETWEEN THE FLAGS TIER 2 SYSTEMATIC ASSESSMENT ADULT course\_certificate.pdf; BLS course\_certificate.pdf; CONTRAST ADMINISTRATION course\_certificate.pdf; CARE COORDINATION FOR MEDICAL OFFICERS course\_certificate.pdf; CONTRAST SCREENING course\_certificate.pdf; CLINICIAN DISCLOSURE course\_certificate.pdf; HAND HYGIENE AUSTRALIA course\_certificate.pdf; HIGH QUALITY REQUESTS FOR MEDICAL IMAGING course\_certificate.pdf; IIMS NOTIFIER TRAINING course\_certificate.pdf; INFECTION PREVENTION AND CONTROL PRACTICES course\_certificate.pdf; INFECTION PREVENTION TRANSMISSION BASED PRECAUTIONS course\_certificate.pdf; INTERPROFESSIONAL PRACTICE course\_certificate.pdf; MANAGING YOUR TIME course\_certificate.pdf; OPEN DISCLOSURE course\_certificate.pdf; PROMOTING ACCEPTABLE BEHAVIOR IN THE WORKPLACE course\_certificate.pdf; POST INCIDENT SAFETY HUDDLES course\_certificate.pdf; PATIENT IDENTIFICATION AND PROCEDURE MATCHING course\_certificate.pdf; SAFE USE OF ANTICOAGULANTS course\_certificate.pdf; SAFE USE OF OPIOIDS course\_certificate.pdf; VIOLENCE PREVENTION AND MANAGEMENT FOR MEDICAL OFFICERS.pdf

Hi Kim,

Please find attached all my mandatory certificates to date and proof of completion of the Florida Report Writing module as requested.

Regards,  
Eugene Ng

On Mon, 23 Mar 2020 at 14:50, Kim Watson (Western Sydney LHD) <[REDACTED]> wrote:

Dear Westmead Trainees

I hope you are all coping relatively well with this ongoing health crisis and difficult times.

I am asking each of you to send me your current on line mandatory training certificates to date.

Also any evidence for completion of Patient Safety Training, Report Writing and Non-Medical Expert Roles in regard to the RANZCR curriculum.

Your co-operation in supplying this information will be greatly appreciated by this coming Wednesday 25<sup>th</sup> March 2020.

Kind Regards

Kim

**Kim Watson**

Network Education Support Officer | **Radiology Local Area Network (LAN) 2**

*Encompassing Blacktown Mt Druitt, Concord, Orange Base, Royal Prince Alfred & Westmead Hospitals.*

Westmead Hospital Education Block, Level 3, Postgraduate Medical Education Centre

PO Box 533 WENTWORTHVILLE NSW 2145

Phone [REDACTED] Mobile – [REDACTED] Email [REDACTED]

Web [www.wslhd.health.nsw.gov.au](http://www.wslhd.health.nsw.gov.au)



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**Preeti Saraswati (Western Sydney LHD)**

---

**From:** Chenghong Yeo (Western Sydney LHD)  
**Sent:** Thursday, 26 March 2020 12:25 PM  
**To:** Kim Watson (Western Sydney LHD)  
**Subject:** Fw: Certificate  
**Attachments:** CHY - CRR Certificate.pdf; clmsCertificate - improving the way we work.pdf; clmsCertificate- clinical disclosure.pdf; clmsCertificate Contrast media - screening process.pdf; clmsCertificate- hand hygiene Australia - medical.pdf; clmsCertificate- highquality request for medical imaging.pdf; clmsCertificate- infection prevention and control practice.pdf; clmsCertificate- infection prevention- transmission based precautions.pdf; clmsCertificate- patient identification and procedure matching.pdf; clmsCertificate- Promoting Acceptable Behaviour in the Workplace.pdf; clmsCertificate- safe use of opioids.pdf; clmsCertificate.pdf; clmsCertificate.pdf - open disclosure.pdf; clmsCertificate-contrast media administration.pdf; clmsCertificate-managing your time .pdf; clmsCertificate-safe use of anticoagulation.pdf; course\_certificate- interprofessional practice.pdf; course\_certificate- Post incidence safety huddle.pdf

Hi Kim,

I have attached my mandatory training certificates.

Regards,  
Cheng



**Preeti Saraswati (Western Sydney LHD)**

---

**From:** Rueben Ganeshalingam <[REDACTED]>  
**Sent:** Thursday, 9 April 2020 9:17 AM  
**To:** Kim Watson (Western Sydney LHD)  
**Subject:** Re: Mandatory Training Certificates  
**Attachments:** Interprofessional Practice.pdf; MI Requests.pdf; Promoting acceptable behaviour.png; Safety Huddles.pdf; Patient Identification.pdf; Infection Prevention and Transmission.pdf; Infection Prevention and Control.pdf; Hand Hygiene.png; Anticoagulants.pdf; Opioids.pdf; Accoutnability.png; Managing Time.pdf; Contrast Media.png

Hi Kim,

Here are all my certificates. Some of them are screenshots because they aren't any certificates.

Rueben Ganeshalingam

On Mon, Mar 23, 2020 at 2:50 PM Kim Watson (Western Sydney LHD)

<[REDACTED]> wrote:

Dear Westmead Trainees

I hope you are all coping relatively well with this ongoing health crisis and difficult times.

I am asking each of you to send me your current on line mandatory training certificates to date.

Also any evidence for completion of Patient Safety Training, Report Writing and Non-Medical Expert Roles in regard to the RANZCR curriculum.

Your co-operation in supplying this information will be greatly appreciated by this coming Wednesday 25<sup>th</sup> March 2020.

Kind Regards

Kim

**Kim Watson**

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Completed Date: 14-Jun-19  
 Last Completed: 09-Jul-19



**Security Awareness - All Staff** ▮

Status: Completed **Completed**  
 Date: 14-Jun-19

Certificate



**Violence Prevention and Management - Awareness**

Status: Completed **Completed**  
 Date: 17-Apr-20

Certificate



**Violence Prevention and Management for Medical Officers** ▮

Status: Completed (Score: 100%)  
 Completed Date: 14-Jun-19  
 Last Completed: 09-Jul-19

Certificate



**Work Health and Safety for Medical Officers** ▮

Status: Completed (Score: 100%)  
 Completed Date: 14-Jun-19  
 Last Completed: 09-Jul-19

Certificate



**WSLHD Critical Clinical Essentials Online**

Status: Completed **Completed**  
 Date: 17-Apr-20

Certificate





## Personal protective equipment for combined transmission-based precautions ▮

Status: Completed **Completed**  
Date: 01-May-20

Certificate



## Privacy Module 1 - Know Your Boundaries ▮

Status: Completed **Completed**  
Date: 17-Nov-16

Certificate



## Promoting Acceptable Behaviour in the Workplace 🐘

Status: Completed **Completed**  
Date: 17-Apr-20

Certificate



## Safe Use of HYDRomorphone

Status: Completed **Completed**  
Date: 14-Jun-19

Certificate



## Safety and Quality for Medical Officers ▮

Status: Completed (Score: 100%)  
Completed Date: 14-Jun-19  
Last Completed: 09-Jul-19

Certificate



## Security Awareness - All Staff ▮

Status: Completed **Completed**  
Date: 14-Jun-19

Certificate





## Introduction to Work, Health and Safety ▮

Status: Completed (Score: 100%)

Completed Date: 17-Nov-16

Certificate



## Life Support Assessment Tool

Date: Fri, 06 Nov 2015, 03:00pm -  
03:30pm (GMT+11) AEST

Status: Completed **Completed**

Date: 06-Nov-15



## Mandatory Training Challenge Test

Status: Completed **Completed**

Date: 09-Jul-19



## Medical Officers Mandatory Training ▮

Status: Completed **Completed**

Date: 09-Jul-19

Certificate



## OHS14027 - Donning and Removing Personal Protective Equipment (PPE) for Infection Control Competency

Date: Wed, 18 Mar, 02:00pm -  
03:00pm (GMT+11) AEST

Status: Completed **Completed**

Date: 18-Mar-20

Certificate



## Open Disclosure ▮

Status: Completed (Score: 80%)

Completed Date: 17-Nov-16

Certificate



## Fire Safety and Evacuation - Practical

**Date:** Wed, 19 Jun 2019, 02:15pm - 02:30pm (GMT+10) AEST

**Status:** Completed **Completed**

**Date:** 19-Jun-19



## Fire Safety and Evacuation - Practical

**Status:** Completed **Completed**

**Date:** 02-Mar-16



## Fire Safety and Evacuation - Practical Equivalent

**Date:** Wed, 02 Mar 2016, 08:00am - 05:00pm (GMT+11) AEST

**Status:** Completed **Completed**

**Date:** 02-Mar-16



## Hand Hygiene Australia - Medical 🚩

**Status:** Completed (Score: 100%)

**Completed Date:** 17-Nov-16

Certificate



## Infection Prevention and Control Practices 📌

**Status:** Current **Completed**

**Date:** 17-Apr-20 **Due Date:** 16-Apr-25

Certificate



## Infection Prevention Strategies for Medical Officers 🚩

**Status:** Completed (Score: 100%)

**Completed Date:** 14 Jun 19

Certificate



## eMR: Access and Security

Status: Completed (Score: 100%)

Completed Date: 01-Mar-19

Certificate



## eMR: Accessing Patient Charts

Status: Completed Completed

Date: 01-Mar-19

Certificate



## Enterprise Risk Management - an overview



Status: Completed Completed

Date: 17-Apr-20

Certificate



## Fire and Evacuation

Status: Expired Completed

Date: 14-Jun-19 **Due Date: 13-Jun-20**

Certificate



## Fire Safety & Evacuation - Practical

Status: Expired Completed

Date: 19-Jun-19 **Due Date: 18-Jun-20**

Certificate



## Fire Safety and Evacuation (Online) equivalent

Date: Wed, 02 Mar 2016, 07:30am - 08:00am (GMT+11) AEST

Status: Completed Completed

Date: 02-Mar-16



## Fire Safety and Evacuation -



## eMeds: Medical Learning Session (Rural)

**Date:** Mon, 04 Mar 2019, 02:00pm - 05:00pm (GMT+11) AEST

**Status:** Completed **Completed**

**Date:** 04-Mar-19



## eMeds: Medication Order Actions

**Status:** Completed **Completed**

**Date:** 04-Mar-19

Certificate



## eMeds: Medication Order Actions

**Status:** Completed (Score: 94.12%)

**Completed Date:** 04-Mar-19

Certificate



## eMeds: Medication Orders

**Status:** Completed **Completed**

**Date:** 01-Mar-19

Certificate



## eMeds: Medication Orders

**Status:** Completed **Completed**

**Date:** 01-Mar-19

Certificate



## eMeds: Medication Orders Complex

**Status:** Completed **Completed**

**Date:** 01-Mar-19

Certificate



## eMeds: PowerPlan

**Status:** Completed (Score: 92.31%)

**Completed Date:** 01-Mar-19

Certificate



## eMeds: PowerPlan







## Documenting Allergies

Status: Completed **Completed**

Date: 04-Mar-19

Certificate



## eMeds Medical Pathway

Status: Completed **Completed**

Date: 04-Mar-19

Certificate



## eMeds: Admission Reconciliation

Status: Completed **Completed**

Date: 01-Mar-19

Certificate



## eMeds: Admission Reconciliation

Status: Completed **Completed**

Date: 01-Mar-19

Certificate



## eMeds: Discharge Reconciliation

Status: Completed **Completed**

Date: 04-Mar-19

Certificate



## eMeds: Discharge Reconciliation

Status: Completed **Completed**

Date: 04-Mar-19

Certificate



## eMeds: Home Medications

Status: Completed **Completed**

Date: 01-Mar-19

Ce



## eMeds: Home Medications

Status: Completed **Completed**

Date: 01-Mar-19

Certificate



## Child Wellbeing and Child Protection 2 - Patient Facing Clinicians F

Status: Completed **Completed**  
Date: 18-Jun-19

Certificate



## Child Wellbeing and Child Protection - Educational resource

Status: Completed **Completed**  
Date: 01-Apr-15

Certificate



## Clinical Handover: Think, Talk and Write ISBAR 📌

Status: Completed (Score: 100%)  
Completed Date: 17-Apr-20

Certificate



## Code of Conduct F

Status: Completed (Score: 100%)  
Completed Date: 14-Jun-19

Certificate



## COM1440 - WSLHD Orientation F

Date: Mon, 17 Aug, 07:45am - 08:00am (GMT+10) AEST

Status: Completed **Completed**  
Date: 17-Aug-20



## CVAD education

Date: Mon, 30 May 2016, 08:00am - 09:00am (GMT+10) AEST

Status: Completed **Completed**  
Date: 02-Jun-16



## Documenting Allergies



## Between the Flags - Tier 2: Communication, Teamwork and Documentation F

Status: Completed Completed  
Date: 17-Nov-16

Certificate



## Between the Flags - Tier 2: Systematic Assessment (ADULT) F

Status: Completed Completed  
Date: 17-Nov-16

Certificate



## Care Coordination

Status: Completed Completed  
Date: 01-Apr-15

Certificate



## Care Coordination for Medical Officers F

Status: Completed Completed  
Date: 01-Apr-15  
Last Completed: 09-Jul-19

Certificate



## Child Wellbeing and Child Protection - Part 1 F

Status: Completed Completed  
Date: 14-Jun-19

Certificate



## Child Wellbeing and Child Protection - Part 2 F

Status: Completed Completed  
Date: 18-Jun-19

Ce



## Child Wellbeing and Child Protection - Part 3 F

Status: Completed (Score: 100%)

Certificate



### Aboriginal Culture - Respecting the Difference

Status: Completed Completed  
Date: 01-Apr-15

Certificate



### Aseptic Technique

Status: Expired Completed  
Date: 01-Apr-15

Certificate



### Basic Life Support - Adult F

Status: Expired Completed  
Date: 01-Apr-15 **Due Date: 30-Mar-20**

Certificate



### Basic Life Support Assessment F

Status: Expired Completed  
Date: 06-Nov-15 **Due Date: 05-Nov-16**

Certificate



### Between the Flags - Tier 1: Awareness, Charts and Escalation (eLearning) F

Status: Completed Completed  
Date: 17-Nov-16

Certificate



### Between the Flags - Tier 2: Case Studies (ADULT) - Nursing, Medical and Allied Health F

Status: Completed Completed  
Date: 17-Nov-16

Ce 

### Between the Flags - Tier 2:

**From:** [George McIvor \(Western Sydney LHD\)](#)  
**To:** [Bruce Dennien \(Western Sydney LHD\)](#); [George - Home](#); [Jane Li](#); [Jules Harvey](#); [Kevin Ng - Home](#); [Kevin Ng \(Western Sydney LHD\)](#); [Lavier Gomes - Home](#); [Lavier Gomes \(Western Sydney LHD\)](#); [Luke Baker \(Western Sydney LHD\)](#); [Michael Vowels](#); [Michael Vowels - Home](#); [Mohamed Nasreddine - Home](#); [Mohamed Nasreddine \(Western Sydney LHD\)](#); [Nisha - Home](#); [Nishantha Karunaratne \(Western Sydney LHD\)](#); [Noel Young \(Western Sydney LHD\)](#); [Philip Vladica -Home](#); [Rafid Al-Asady](#); [Raymond Lee \(Central Coast LHD\)](#); [Rob Schamschula](#); [Robert de Costa](#); [Simon so](#); [Susan Grayson](#); [Tony Peduto - Home](#); [Dr Aruni Thambugala](#); [Dr Farah Al-Mahdawi](#); [Dr Kim-Son Nguyen](#); [Dr KP Wong](#)  
**Cc:** [Preeti Saraswati \(Western Sydney LHD\)](#); [Amy Manos \(Western Sydney LHD\)](#); [Roslyn Crampton \(Western Sydney LHD\)](#); [Peter Hockey \(Western Sydney LHD\)](#)  
**Subject:** Clinical supervision role 3.3.1  
**Date:** Thursday, 5 November 2020 4:09:58 PM  
**Attachments:** [Supervision of Radiology Trainees in Training Departments Guideline.pdf](#)

---

Hi All,

For RANZCR Accreditation Requirements, can you please make yourselves familiar with the College's updated requirements for Supervision of Radiology Trainees as per Section 3.3.1.

Thank you.

Regards,  
George  
Dr George McIvor

Clinical Director, Radiology Dept | Medical Imaging  
Level 2 - Westmead Hospital, Westmead, NSW 2145

Tel [REDACTED] | Fax [REDACTED] | Mob [REDACTED] [REDACTED]