TRAINING PROGRAM HANDBOOK
MOHS MICROGRAPHIC SURGERY
College Coat Of Arms

Pictures on shields, flags and Coats of Arms were introduced into the United Kingdom from Europe in the 12th century. The precise origin of the heraldic system in Europe however is not known. It became important to identify the otherwise unrecognisable amour-clad knights both in tournaments and battle. Consequently symbols were embroidered on the knight's surcoat (a garment worn over a knight's armour), i.e. a Coat of Arms. The responsibility for identifying the knights lay with the heralds and thus the origin of heraldry. From this early start many organisations developed heraldic designs to identify their group or profession.

The various aspects of the College Coat of Arms are:

On the Dexter side: The Unicorn stands, a mythological horse with the original cutaneous horn, hence its association with dermatology.

On the Sinister side: the Red Kangaroo stands, identifying Australia.

The Crest: The stars of the Southern Cross are only seen in the Southern Hemisphere and are easily recognisable from both Australia and New Zealand.

The Sailing Ship: Signifies the early discovery of Australia and New Zealand by such ships and the association of our two island countries with the sea.

The Knight's Helmet and Mantle are heraldic designs common to many Coats of Arms. The Shield is lilac purple, the College colour. In the centre of the Shield (The Charge) is the sun, an important contributor to the cause and also the treatment of many skin disorders.

Overlying the sun is the Rod of Aesculapius - the serpent entwined about the rod which is symbolically accepted as a sign of medicine. This is sometimes confused with the Rod of Hermes (The Caduceus). This was a magic wand with two shoots entwined at the top to form a knot later represented by two serpents.

The wings on the top of the rod signify the carrying of knowledge of the Australasian College of Dermatologists to the wider community and the rest of the world. Beside the shield and intertwined with one another is the Australian wattle and the fern of New Zealand, emphasising our close association.

The Motto "Refulgent in Tenebris", literally "They glitter/shine/(or are) resplendent in the dark". The translation moves beyond the literal and implies the throwing of light on to the darkness of areas in dermatology and, in this context, the role of College forever seeking more knowledge in our specialty field. The basic interpretation of the motto is "They succeed in difficulties".
Important Information

The Mohs Micrographic Surgery Training Program Handbook is reviewed annually to ensure information regarding Policies, Procedures, Regulations and all aspects of the training program are current.

Minor changes to the current version of the handbook may occur from time to time. While candidates will be notified of changes, it is their responsibility to ensure they remain up-to-date with any such changes.

Every effort has been made to be explicit about training matters. However, omissions can occur and the National Education Committee, Mohs Surgery Committee and the Board of Directors reserve the right to clarify any matter not explicitly stipulated.

The College website has the most current information: www.dermcoll.asn.au
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<th>Description</th>
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<tbody>
<tr>
<td>ACD or the College</td>
<td>Australasian College of Dermatologists</td>
</tr>
<tr>
<td>AHPRA</td>
<td>Australian Health Practitioner Regulation Agency</td>
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<tr>
<td>AMC</td>
<td>Australian Medical Council</td>
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<tr>
<td>BoD</td>
<td>Board of Directors</td>
</tr>
<tr>
<td>CbD</td>
<td>Case-based Discussion</td>
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<tr>
<td>CSs</td>
<td>Clinical Supervisor(s)</td>
</tr>
<tr>
<td>CP</td>
<td>Candidate Portfolio (or logbook)</td>
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<tr>
<td>Dean</td>
<td>Dean of Education</td>
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<tr>
<td>Hon Sec</td>
<td>Honorary Secretary</td>
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<tr>
<td>ITA</td>
<td>In-training Assessment</td>
</tr>
<tr>
<td>Mohs-CEX</td>
<td>Mohs Clinical Evaluation Exercise</td>
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<tr>
<td>NAcC</td>
<td>National Accreditation Committee</td>
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<tr>
<td>NEdC</td>
<td>National Education Committee</td>
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<tr>
<td>PIF</td>
<td>Performance Improvement Form</td>
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<tr>
<td>ProDA</td>
<td>Procedural Dermatology Assessment</td>
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<tr>
<td>QAP</td>
<td>Quality Assurance Program</td>
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<tr>
<td>RPL</td>
<td>Recognition of Prior Learning</td>
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<tr>
<td>SoTs</td>
<td>Supervisors of Training</td>
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<tr>
<td>SSP</td>
<td>Supplementary Supervision Plan</td>
</tr>
<tr>
<td>TPH</td>
<td>Training Program Handbook</td>
</tr>
<tr>
<td>WBA</td>
<td>Work-Based Assessment</td>
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</table>
## College Contacts

<table>
<thead>
<tr>
<th>General enquiries</th>
<th>Education</th>
</tr>
</thead>
</table>
| Telephone: +61 2 8765 0242  
e-mail: admin@dermcoll.asn.au | Director of Education Services  
Mr Brett O’Neill  
Telephone: +61 2 8741 4199  
E-mail: brett@dermcoll.edu.au |
| Facsimile: +61 2 9736 2194 |  |
| **Address**  
Suite 2a, Level 2, 9 Blaxland Road  
Rhodes NSW 2138 | **Education Officer**  
Ms Teresa Llewellyn-Evans  
Telephone: +61 2 8741 4173  
E-mail: Teresa@dermcoll.edu.au |
| **Postal address**  
PO Box 3785 Rhodes NSW 2138 |  |
CHAPTER ONE: INTRODUCTION

1.1 About the Australasian College of Dermatologists

The College is a Fellowship of Dermatologists trained to the highest professional standards whose objective is to serve the community by providing the best quality dermatological care.

The Australasian College of Dermatologists (ACD) has a membership of approximately 430 Fellows. Fellows work in private practices and/or attend clinics at major teaching hospitals. A small number of Fellows also have full-time appointments in major hospitals and higher education institutions.

Within the College there are a number of specialised groups whose members have received extra training in their particular sub-speciality, for example Mohs Micrographic Surgery.

Fellows can be regarded as authorities in all matters pertaining to skin care and the diagnosis, treatment and management of all conditions affecting the skin.

The College is committed to:

- Educating and training Trainees, Fellows and other health professionals
- Ongoing professional development of its Fellows and associated members
- Defining and maintaining professional and ethical standards for all Fellows
- Ensuring quality dermatological service to the community and the delivery of care to all Australians, including those living in regional and remote areas
- Promoting public awareness of skin health and the prevention of disease through media, government and support groups
- Encouraging, supporting and promoting research to ensure the best quality care of all patients
- Undertaking its objectives competently, efficiently and responsibly.

Fellows of the College practice in all States and territories of Australia. Regional faculties are currently established in Queensland, New South Wales, Victoria, South Australia and Western Australia.

Fellows working in each State elect representatives to the College Board of Directors. For more information about the College Board of Directors and working Committees of the College, please refer to the College website.
1.2 Application and selection into the ACD Mohs Surgery Training Program

1.2.1 Eligibility
Applicants must hold the FACD or an equivalent international dermatology qualification and be licensed to practise as a dermatologist in Australia.

1.2.2 Application Process
Mohs Surgery Training positions are advertised on the College website.

1.2.3 General information about selection
There are currently only four ACD accredited Mohs training positions in Australia.

Applicants are selected who best demonstrate that they have the skills, abilities, competences and personal qualities that will allow them to achieve the learning outcomes of the training program.

The chances of being selected are not influenced by previous selection outcomes.

1.2.4 Selection process
The selection process is made up of five sequential stages:

(i) Seeking and receiving applications
All Mohs surgery training positions are advertised on the College website. Prospective applicants apply directly to the Supervisor of Training by the nominated closing date.

(ii) Assessment of applications and references
To be eligible for consideration, applicants must:

- hold the FACD or an equivalent international dermatology qualification and
- be licensed to practise as a dermatologist in Australia,
  OR
- be an advanced trainee of the ACD and hold full registration as a medical practitioner with AHPRA.

(iii) Shortlisting
All eligible applicants are considered for shortlisting. Shortlisting is undertaken using information provided by applicants in their written application together with referee reports.

(iv) Interviewing
Applicants will be interviewed by an interview panel. The panel will include the Supervisor of Training from the training facility together with other clinical supervisors and/or College staff members.

Interviews may be conducted at the training facility or at a central location such as the College office, if the interview if being conducted in NSW.
Interviewers are looking for applicants who have: demonstrated a strong motivation to undertake Mohs surgery training; advanced surgical skills; and demonstrated ability to work within a multidisciplinary team.

Integrity is vital to being a dermatologist and a Mohs surgeon. Any of the work situations discussed is subject to external verification. Falsifying incidents or overstating your own role will lead to instant exclusion from further consideration.

At the end of the interview, each candidate will be given the opportunity to ask questions and to express an opinion as to whether he/she is satisfied with the selection and interview process.

If a conflict of interest exists between an interview panellist and a candidate, the panellist will declare this and absent himself/herself from the interview. In situations where there is some doubt as to whether a real conflict of interest exists, the interview chairperson will make a decision as to whether the panellist should absent himself/herself from the interview.

(v) Final selection
Upon accepting the offer of a training position, the successful applicant will be expected to commence training at the nominated commencement of training date.

Note: All training positions are generally of 12 months duration and will have a nominated commencement date. Not all training positions will commence at the beginning of a calendar year.

1.3 Mohs Surgery Training Program Overview

Mohs micrographic surgery is used to remove certain skin cancers with the highest level of certainty while minimising the damage to normal tissue.

ACD accredited Mohs Surgery Training offers 12 months of education and experience, which provides an organised, systematic, and progressive education for dermatologists seeking to acquire advanced competence as a Mohs surgery specialist. A rigorous program of training and assessment provides reassurance to patients and referring doctors that the dermatologists listed on the ACD Register of Approved Mohs Surgeons (published on the College website) have completed training at the highest standards of quality and safety for patients.

Training is only undertaken in facilities accredited by the ACD National Accreditation Committee, with an appropriately qualified Supervisor of Training and other supervisors. There are currently four accredited Training positions.

<table>
<thead>
<tr>
<th>State</th>
<th>Program Location</th>
<th>Supervisor of Training</th>
</tr>
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<tbody>
<tr>
<td>NSW</td>
<td>Skin and Cancer Foundation, Westmead</td>
<td>Dr Simon Lee</td>
</tr>
<tr>
<td>QLD</td>
<td>North West Private Hospital, Everton Park</td>
<td>Dr Zoran Gaspar</td>
</tr>
<tr>
<td>WA</td>
<td>Oxford Day Surgery, Mount Hawthorn</td>
<td>Dr Carl Vinciullo</td>
</tr>
<tr>
<td>WA</td>
<td>South Perth Specialist Skin Cancer Centre, South Perth</td>
<td>Dr Tim Elliott</td>
</tr>
<tr>
<td>VIC</td>
<td>Skin Cancer Day Surgery, Ashwood</td>
<td>Dr David Gill</td>
</tr>
</tbody>
</table>

Table 1. Accredited Mohs Surgery Training Positions
For more information about the accreditation standards and process see the College website.

Upon successful completion of training, candidates are eligible for inclusion on the ACD Approved Mohs Surgeons Register. They are also eligible to apply for membership of the American College of Mohs Surgery, if desired.

1.4 Mohs Surgery Training Program Curriculum

The Mohs Surgery Training Program Curriculum is designed to ensure that candidates develop an advanced competence in the identification and management of patients whose conditions should be treated by Mohs surgery, including those that need the involvement of other specialists for a multidisciplinary approach to provide patients with an optimal outcome.

The curriculum aims to ensure that candidates become competent in all elements of Mohs surgery, including histopathological interpretation and reconstruction of surgical defects.
**DOMAIN 1. CLINICAL EXPERTISE**

<table>
<thead>
<tr>
<th>1.1 Clinical Sciences</th>
<th>1.3 Procedural Dermatology</th>
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<tbody>
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<td>1.1.1 Anatomy</td>
<td>1.3.1 Basic Surgery</td>
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<td>1.1.2 Physiology and Immunology</td>
<td>1.3.2 Pre-operative Assessment for Mohs Micrographic Surgery</td>
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<tr>
<td>1.1.3 Cutaneous Oncology</td>
<td>1.3.3 Surgical Technique: Anaesthesia</td>
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<tr>
<td>1.1.4 Principles of Mohs Micrographic Surgery</td>
<td>1.3.4 Surgical Technique: Mohs Micrographic Surgery</td>
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<tr>
<td>1.1.5 Histopathology</td>
<td>1.3.5 Peri-operative Management for Mohs Micrographic Surgery</td>
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<tr>
<td>1.1.6 Wound Healing</td>
<td>1.3.6 Laboratory and Pathology</td>
</tr>
</tbody>
</table>

**1.2 Clinical Practice**

1.2.1 Indications for Mohs Micrographic Surgery

**1.3 Procedural Dermatology**

1.3.1 Basic Surgery

1.3.2 Pre-operative Assessment for Mohs Micrographic Surgery

1.3.3 Surgical Technique: Anaesthesia

1.3.4 Surgical Technique: Mohs Micrographic Surgery

1.3.5 Peri-operative Management for Mohs Micrographic Surgery

1.3.6 Laboratory and Pathology

1.3.7 Specimen Interpretation

1.3.8 Surgical Technique: Reconstruction

1.3.9 Post-operative Care

1.3.10 Surgical Complication Management

**DOMAIN 2. PROFESSIONAL QUALITIES**

<table>
<thead>
<tr>
<th>2.1 Professional Qualities</th>
<th></th>
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<tbody>
<tr>
<td>2.2 Quality Assurance in Mohs Micrographic Surgery Practice</td>
<td></td>
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<tr>
<td>2.3 Facility Management</td>
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</tbody>
</table>

**Table 2. Mohs Surgery Training Program Curriculum Framework**

The detailed Mohs Micrographic Surgery Training Program curriculum is available on the College elearning portal.
1.5 College/Candidate Communications

College communicates with candidates regarding their training from time-to-time. For this reason, it is vital that all candidates ensure their email addresses, preferred mailing addresses and mobile phone numbers are always kept up-to-date in the College database.

Candidates can email any changes to: admin@dermcoll.asn.au or simply post the information to us at:

Australasian College of Dermatologists
PO Box 3785
Rhodes NSW 2138

The quickest method for candidates to communicate with College is by email. The following addresses may be used for this purpose:

admin@dermcoll.asn.au  Generic College address where you will be re-directed to the relevant College Officer
Teresa@dermcoll.asn.au  Education Officer, Teresa Llewellyn-Evans

Someone will always acknowledge receipt of your email. If you do not receive a response, call the College on (02) 8765 0242 and request further assistance. Alternatively, candidates can send correspondence to College at the postal address shown above.
CHAPTER TWO: REQUIREMENTS OF THE MOHS SURGERY TRAINING PROGRAM

2.1 Accreditation of Training Positions

Training must be conducted in a training position accredited by the ACD National Accreditation Committee. For more about the accreditation process see the College website.

2.2 Duration of the Mohs Surgery Training Program

The training program is conducted for a minimum of 12 months. Provision is made for 4 weeks annual leave and 2 weeks leave for illness etc.

Training must be continuous unless the candidate has applied to the College, and received approval, to interrupt their training (see Chapter 5).

Candidates must complete their training within 2 years of commencement.

2.3 Candidate Status

In order to retain candidate status, a candidate must:

a) Hold full registration as a specialist dermatologist with APHRA or occupy an accredited training position, or be on approved leave from the training program (see Chapter 5)

b) Have signed and returned to College the Candidate Agreement.

2.4 Training Requirements

Requirements of training are outlined below:

<table>
<thead>
<tr>
<th>Clinical Experience</th>
<th>12 months of training in an accredited training facility. During this time, the candidate is required to:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>• Participate in at least 500 Mohs surgery cases each year, and must be the primary surgeon (does all of the first cuts, most of the other cuts and the entire repair) in at least 200 of these cases (at least 90% on the head, neck, lower leg (including feet), hands, digits or anogenital</td>
</tr>
<tr>
<td></td>
<td>• Participate in at least 35 cases each year which are referrals from other medical and surgical specialists, as these tend to be the more challenging and instructive cases.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Publication/Presentation</th>
<th>Prior to the completion of training, the candidate must:</th>
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<tbody>
<tr>
<td></td>
<td>• Submit an abstract for publication, and</td>
</tr>
<tr>
<td></td>
<td>• Present a paper at a national or international peer review meeting of relevance to Mohs Surgery.</td>
</tr>
</tbody>
</table>

| Assessment | During training, the candidate must successfully complete all prescribed assessments (see Chapter 4). |
### Quality Assurance Program

The candidate must:
- Participate in the diagnostic QAP module.
- Participate in and record cases reviewed in departmental peer review sessions at least twice each year.

### Portfolio

The candidate must:
- Submit a completed Mohs Surgery Training Program Portfolio

### Other

Prior to the completion of training, the candidate must:
- Attend a CPR course.

Table 3. Training Requirements

### 2.5 Recognition of Prior Learning (RPL)

The principal purpose of RPL is to avoid unnecessary duplication of training and education that is equivalent to that provided by the ACD Mohs Surgery Training Program. Candidates who believe that they have already attained the learning outcomes/performance competencies required, are able to apply to the College for an RPL assessment. The applicant’s request for RPL will be assessed. If the applicant demonstrates that they have achieved the required learning outcomes/performance competencies they will be granted recognition for the components of the training program that provide education, training and/or assessment in those learning outcomes/performance competencies.

For further information, please refer to the College Policy on Recognition of Prior Learning on the College website.
CHAPTER THREE: CANDIDATE PORTFOLIO

Candidates are required to document their training in the Candidate Portfolio. This can be downloaded from the College elearning portal.

3.1 Purpose

a) To assist candidates to monitor their progress.
b) To provide a record of progress to communicate to SoTs at any time during the training period.
c) To enable candidates to document that they have satisfied each of the requirements of the training program.

3.2 Requirements

a) A Completion of Training Form, signed by the SoT.
b) A log book completed for the full period of training.
c) Record of presentation/publication and appended evidence.
d) Record of QAP participation and appended evidence.
e) Record of CPR course completion and appended evidence.
f) Log of peer review cases.
g) Completed ITA, CEX, CbD and ProDA forms.

3.3 Candidate Portfolio review

All candidates are required to undergo an end-of-training portfolio review with the SoT. The SoT must review the candidate’s progress, and sign the Completion of Training form to confirm that the Candidate Portfolio is complete and all other training requirements have been met.
CHAPTER 4: ASSESSMENT

Candidates must complete a series of formative and summative assessments.

4.1 Online assessments

All candidates must work through the on-line module “Introduction to Mohs Surgery” and undertake the associated on-line quiz.

Candidates who have completed their FACD (or equivalent) more than five years prior to commencing the Mohs Surgery Training Program must also complete a series of online ‘refresher’ modules and assessments. These are detailed in the Mohs Training Program Curriculum.

4.2 Work-based Assessments (WbAs)

A Work-based Assessment is a competence-based assessment conducted in the day-to-day clinical setting. It reflects the curriculum and assesses performance of everyday practice through direct observation. As well as assessing performance, work-based assessments provide constructive feedback to inform and develop a candidate’s knowledge and skills.

Work-based assessments are candidate-led. The candidate organises for the supervisor to take part in each assessment.

Assessments are intended to encourage learning and development. It is expected that candidates may need to complete assessments, and/or parts of assessments, a number of times in order to become competent.

There are no adverse consequences for having to attempt a procedure several times as long as the candidate is finally deemed competent.

Candidates should participate in assessments regularly. Ongoing constructive feedback helps to keep progress on track. Candidates should plan to undertake assessments across the training period so there is adequate time to repeat assessments when further development is required.

SoTs and CSs act as assessors for WbAs.

Patient safety and well-being remain paramount throughout WbAs. The assessor should ensure that the patient is informed, has provided consent for the exercise and is not subject to increased risk or discomfort. The supervisor retains responsibility for patient care throughout and must intervene, should it be required.

The supervisor undertaking the assessment must provide feedback immediately after the assessment, especially when deficiencies have been identified. Feedback would normally take about five minutes.
Candidates must undertake the following work-based assessments:

a) In-training assessments (ITAs) - two over 12 months at prescribed times
b) Case-based Discussions (CbDs) - four during the course of training
c) Procedural Dermatology Assessment (ProDA) - as listed below
d) Mohs Clinical Evaluation Exercise (Mohs-CEX) - one satisfactory CEX during the course of training.

4.2.1 In-training Assessments (ITAs)
The ITA is a formative assessment of a candidate’s overall progress towards achieving the learning outcomes detailed in the Mohs Surgery Training Program curriculum, which should be referred to when undertaking the assessment.

An ITA form must be completed by the SoT and all CSs involved in the candidate’s training at 4 and 8 months of the 12 months Mohs Training Program. The SoT is responsible for collating the forms, completing the Mohs ITA Summary Form and meeting with the candidate to discuss their performance.

The Mohs ITA Summary Form must be signed by the candidate and the SoT and filed in the candidate’s portfolio.

Documents for completion of the ITA can be downloaded from the College elearning portal.

4.2.2 Mohs Procedural Dermatology Assessments (ProDAs)
The ProDAs focus on the core skills that candidates require when undertaking a practical Mohs procedure. They are designed to assess a candidate’s technical skills and their ability to perform procedures effectively and safely. During the course of their training candidates must satisfactorily complete the following ProDAs:

a. Surgical Technique: Mohs Micrographic Surgery & Perioperative Management in Mohs Micrographic Surgery
b. Laboratory and Pathology
c. Surgical Technique: Reconstruction (three individual reconstruction ProDAs to be completed, each ideally covering a different reconstruction technique, as listed in the curriculum)

4.2.2.1 Using the ProDA form
a. The candidate approaches the SoT or CS and advises they will be completing a procedure on a patient and would like their performance to be assessed.
b. The candidate gives the form to the assessor prior to the assessment.
c. The assessor directly observes the candidate completing the procedure, exploring knowledge where appropriate, and completes the form at the end. The emphasis in these exercises is on the candidate’s ability to complete the procedure and demonstrate understanding of underlying principles.
d. The assessor then provides appropriate verbal feedback on the candidate’s performance.
e. Both the candidate and the assessor sign the ProDA form where indicated. The original form is kept in the candidate’s Portfolio.

f. All ProDAs must be logged until each skill is recorded as satisfactory.

Documents for completion of the Mohs-ProDAs can be downloaded from the College elearning portal.

4.2.3 Mohs Clinical Evaluation Exercise (MohsCEX)
The Mohs-CEX focusses on the candidate conducting an initial consultation with a new patient. It is designed to assess the candidate’s ability to undertake an appropriate pre-operative assessment for Mohs micrographic surgery.

Candidates are required to complete a minimum of one satisfactory Mohs CEX per year. These may be undertaken at any time during the training program.

4.2.3.1 Mohs CEX process

a. The candidate approaches the assessor, advising that they would like their performance to be assessed and organises a mutually convenient time to undertake the CEX.

b. The candidate gives the form to the assessor prior to the assessment.

c. The assessor directly observes the candidate with the patient and completes the form at the conclusion of the consultation.

d. The assessor then provides verbal feedback on the candidate’s performance.

e. Both the candidate and assessor sign the Mohs-CEX form. The original form is kept in the candidate’s portfolio.

Documents for completion of the Mohs-CEX can be downloaded from the elearning portal.

4.2.4 Case-based Discussion

Case-based discussion is a structured discussion between a candidate and a supervisor, designed to evaluate clinical practice, decision-making and professional judgment exercised in clinical cases.

It is not intended as a test of knowledge, or as an oral or clinical examination. It is intended to guide the candidate’s learning through structured discussion and feedback. The discussion should reflect the candidate’s level of experience and be linked to the Mohs Surgery Training Program curriculum.

A CbD should take approximately 20-30 minutes, including a 10 minute feedback session.

Candidates are required to undertake four CbDs per year, two of which must include discussion of surgical complication management, where possible. The candidate is responsible for ensuring that they undertake the required number of CbDs.

4.2.4.1 Mohs-CbD process

a. The candidate is responsible for initiating each CbD.
b. The candidate chooses case(s) in which they have been significantly involved. The candidate confirms with the supervisor that the case is relevant and acceptable.

c. The candidate discusses the case(s) with the supervisor, including their approach, the results and reflection on what went well and what they would change in similar situations in the future. The candidate may refer to photographs of the surgical procedure during the discussion. The supervisor may prompt for further information when required.

d. The supervisor makes notes and rates the candidate’s performance on the CbD form throughout the session. The supervisor rates the candidate’s performance on each of the areas being assessed. If a candidate receives a rating which is below expectations for their stage of training, the supervisor must complete the ‘suggestions for development’ section of the form.

e. Discussion of the case(s) is immediately followed by feedback from the supervisor. Feedback should focus on the candidate’s clinical decision-making skills and include comments on what the candidate did well and areas for improvement. If any significant areas for development are identified during the session, the supervisor and the candidate should devise a remediation plan.

f. The CbD rating form is signed by the candidate and the supervisor. The candidate ensures that the form is completed (with signatures) and places the forms in their portfolio.

Documents for completion of the CbD can be downloaded from the College elearning portal.
5.1 Training Administration

5.1.1 Commencing Training
The candidate and SoT should agree on a commencement date. The candidate is responsible for advising the College that training has commenced, and forwarding a completed Commencement of Training Form and Candidate Agreement to College. Both forms can be found on the College eLearning portal.

5.1.2 During Training
Candidates are responsible for being aware of program requirements and for ensuring that all requirements are completed. Assessments are candidate led, and the candidate is responsible for liaising with the SoT to complete assessments steadily throughout the program.

The Mohs Training Program Resource List and other essential training documents are available on the College eLearning portal, and it is the candidate’s responsibility to access these materials as necessary.

5.1.3 Completion of Training
The candidate must notify the College when training is completed, by forwarding a completed Candidate Portfolio to the College. The Honorary Secretary will confirm completion of training. The candidate’s name will then be added to the ACD Approved Mohs Surgeons Register. The candidate is responsible for applying for membership of the American College of Mohs Surgery, if desired.

5.2 Policies

5.2.1 Shared and Part-time training
Candidates may request ‘shared’ or part-time training. See the ACD Policy on shared or part-time training.

All requests for such training will be carefully considered but cannot always be accommodated. A request for part-time positions considers the following:

- There is no compromise to, or disruption of, patient care. There must be no disruption to the orderly running of the facility where the part-time or shared position is undertaken.

- A part-time candidate has to perform at least 50% of the full-time workload.

- A part-time candidate is expected to attend at least 50% of training requirements and other prescribed educational meetings held at their training facility.

- A part-time trainee is expected to work continuously during their part-time position (with the usual provisions for leave).

- A suitable timetable for the shared or part-time positions is to be developed by the SoT in consultation with the two candidates. This should occur as soon as practical after selection and position allocation is completed.
Requests for part-time or shared positions must be made in writing to the SOT at the time of application.

5.2.2 Interrupted Training
A candidate may be allowed up to one year leave of absence from the training program, at the discretion of the NEdC and SoT. Such a leave of absence is usually only granted in exceptional circumstances. If a leave of absence is approved, then the candidate may return to the training program the year immediately following. Any training time during an approved leave of absence will not be accredited. The candidate will still be required to complete the course within 2 years of their commencement date.

Application must be made in advance in writing to the SoT.

5.2.3 Unsatisfactory Performance
Candidates are expected to steadily progress through their training. A Candidate is deemed to have unsatisfactory performance if they have:

- Failed to complete satisfactorily within the first six months of their studies, the DermCEX, one CbD, two ProDAs and 30% of the number of surgical procedures
- Failed to complete satisfactorily within the succeeding three months an additional one CbD, one ProDA, and another 20% of the required surgical procedures.

In the first instance, the SoT will notify the Mohs Chair of the Candidate’s unsatisfactory performance.

In order to address the issue/s and the status of the Candidate’s progress through the Mohs Surgery Training Program, the following will be implemented:

- A SSP which requires a PIF to be completed. A SSP assists a candidate who requires additional support and supervision related to knowledge, skills or professional qualities. It is implemented by the SoT in consultation with the Chair of the Mohs Surgery Committee.
- The Mohs Surgery Committee is advised when a candidate has been placed on a SSP.
- The PIF is in place for three months
- Regular contact is required between the candidate, mentor and their SOT to ensure that all possible support/resources are implemented to address areas of concern.
- Candidates will receive written notification that any further unsatisfactory performance may result in dismissal from the Training Program.

Continuing unsatisfactory performance will result in candidates receiving written notification that any further unsatisfactory performance may result in dismissal from the Training Program. The Mohs Surgery Committee will be notified and they will place the candidate on probation.

Candidates should refer to the full Unsatisfactory Performance by Candidates policy on the College website.
5.2.4 Other Policies

Other College policies which may apply to candidates in the Mohs Surgery Training Program are:

a. Anti-bullying, Anti-discrimination and Anti-Harassment Policy
b. Appeals Policy
c. Special Consideration in Examination and Assessments Policy
d. Unsatisfactory Performance by Candidates

All policies can be found on the College website.
CHAPTER SIX: ROLES IN THE MOHS SURGERY TRAINING PROGRAM

6.1 Supervisor of Training

The Supervisor of Training (SoT) is responsible for overseeing the organisation and implementation of the Mohs Fellowship Training Program in their training facility. This includes:

- being involved in selection of Mohs candidates for their institution
- selecting and supervising the CSs
- being responsible for program accreditation
- being familiar with the objectives, curriculum requirements and procedures of the Mohs Surgery Training Program
- leading and facilitating effective teaching and learning opportunities for the candidate within their institution
- teaching and supervision of candidates in the clinical situation
- ensuring that candidates operate within their scope of their expertise
- observing the candidate in the clinical context and giving constructive feedback on performance
- completing required work-based assessments
- identifying and helping to remediate candidates who are performing below the required standards
- modelling good clinical skills and professionalism.

6.2 Clinical Supervisors

CSs provide on-the-job teaching and feedback. Their responsibilities include:

- being familiar with the objectives, curriculum and procedures of the Mohs Surgery Training Program
- teaching and observing candidates in the clinical context
- providing constructive feedback to candidates on their performance in the clinical setting
- ensuring that candidates operate within their scope of their expertise
- completing work-based assessments as required
- discussing the candidate’s performance with the SoT as necessary
- in collaboration with the SoT, identifying and helping to remediate candidates who are performing below the required standard
• be responsible for all paperwork that needs completing
• modelling good clinical skills and professionalism.

6.3 Candidates

Candidates are required to:

• be responsible for their own learning
• fulfil the requirements of their job description
• understand and adhere to the policies and procedures that their current work environment has in place
• put patient needs and safety first
• learn in their workplace by being actively involved in patient review and management
• work within the limits of their competence and seek advice and support from a more experienced practitioner when necessary
• critically review their own performance and identify and address their learning needs
• actively engage in the learning activities provided by their training facility
• ensure that they undertake all required assessments, as detailed in the Mohs Surgery Training Program Handbook, and submit all required documentation to the ACD.
CHAPTER SEVEN: PROGRAM EVALUATION

The Mohs Surgery Training Program is regularly evaluated and reviewed.

As part of the ongoing evaluation process, Candidates are required to submit a confidential feedback questionnaire to the College on completion of their training. Candidate feedback will be taken into account in both evaluation of the program and accreditation of training positions.