

Consultant Report on Trainee Performance

Name of Trainee: _____ Registrar / SRMO / JRMO / Other: _____

Date of evaluation (term, year) _____

Thank you for supervising the trainee during this period.

The criteria on this form can be used by consultants, fellows and registrars for discussions about jobs – at the start of term, during term and at the end of the term. In review discussions, trainees need feedback on what they are doing well, what they are not doing well and what to do to improve. NOTE: Discussions do not necessarily need to be documented; there is no need to complete the form before the end of term.

The administrative purpose of this form is to identify junior doctors whose work in one or more areas is substandard. Where there are significant concerns about a trainee's performance (ie a rating of '1'), there may be a need for support, training, or other action in the interests of the trainee, the hospital and patients. All reports with a rating of '1' will be followed up by the Junior Medical Staff Department. Where there are more minor concerns (a rating of '2') you should discuss them with the trainee, with examples, to give them a chance to improve. The form is filed on the trainee's record and may be referred to as proof of performance.

Please complete the form, discuss any areas of concern with the trainee, and return to the JMS Department.

Dr Margot Nash, Director, Junior Medical Staff Department, January 2005

COMPETENCE	CRITERIA	0 Cannot Comment	1 Significant concern	2 Minor concern	3 Satis- factory	4 Very Good	5 Excep- tional
Clinical Skills & Knowledge	Medical knowledge						
	History taking						
	Physical examination						
	Procedural skills						
	Clinical judgement						
Interpersonal Skills	Communication with staff (clear, effective, timely, respectful)						
	Rapport with patients and families						
	Works in a team (eg values experience of others, contributes appropriately)						
Professional Behaviour	Honest and dependable						
	Ethical practice (eg rights of patients, confidentiality, equitable treatment)						
	Self management (eg punctual, organised, prioritises work, manages mood and pressure)						
	Self directed in education and training						
	Record keeping (eg notes in UR, discharge summaries, GP communication)						
Leadership & Teaching (for Registrars)	Organises and delegates work						
	Teaches as part of the job						
	Interested in and supportive of junior staff						
Overall performance							

Not observed first-hand (include comments from others) ↑

I have discussed with trainee. _____

Initial: _____

I have discussed with trainee. _____

Initial: _____

Please comment on the trainee's strengths and weaknesses.

STRENGTHS

WEAKNESSES

ANY OTHER COMMENTS?

How well do you know the trainee? Very Well Quite Well Not very well

Name of Consultant: _____

Signature of Consultant: _____ Date: _____

FOR THE TRAINEE TO COMPLETE:

I have seen this form and have had the opportunity to discuss it.

I give permission for this report (anonymous, group data only) to be included in an audit of consultant reporting: YES / NO

Signature of Trainee: _____ **Date:** _____

Comments: