



# DEPARTMENT OF PAEDIATRICS – POSTGRADUATE EDUCATION PAEDS EMERGENCY IN-TRAINING EVALUATION FORM

RESIDENT:	PGY Level:	ROTATION & SITE:	
ROTATION BLOCK/DATES:		ACAD.YR:	

### INTRODUCTION

Number of clinical days for this rotation (12 to 16) \_\_\_\_\_ Number of days resident was absent for ANY reason (excluding post-call days)

### The resident must complete at least 15 days or 75% of the rotation or it will consider INCOMPLETE.

N	IEDICAL EXPERT	Not Applicable	1 Does Not Meet Expectations	2 Borderline	3 Meets Expectations
a.	<b>Basic and Clinical Knowledge</b> Demonstrates a good understanding of basic scientific and clinical knowledge relevant to the clinical domain.				
b.	History and Physical Examination Skills Takes a history with the appropriate level of detail for the situation. Performs a physical examination that is focused, efficient, organized and sensitive to the patient.				
C.	<b>Problem Solving</b> Demonstrates ability to make a differential diagnosis, incorporating and integrating prior knowledge and new information. Demonstrates ability to develop a plan for investigation and management of discipline specific medical problems.				
d.	Integration and Application Selects and sequences appropriate investigations. Interprets results, and synthesizes information to arrive at a diagnosis.				
e.	<b>Clinical Judgment</b> Accurately assesses patients and balances the risks and benefits of therapeutic interventions in individual cases. Seeks appropriate consultation from other health professionals. Recognizes personal limitations.				
f.	Performance in Emergencies Recognizes acutely ill patients and institute emergency management appropriately for the level of training and skill. Consults promptly and appropriately. Communicates effectively and remains calm.				
	Overall Competence:				

### **Medical Expert:** Please comment on Resident's STRENGTHS:

### **Medical Expert:** Suggestions for IMPROVEMENT:

co	MMUNICATOR	Not Applicable	1 Does Not Meet Expectations	2 Borderline	3 Meets Expectations
a.	<b>Establishment of Therapeutic Relationships.</b> Develops rapport and trust with patients and families. Respects confidentiality and privacy. Attentive listener, responsive to non-verbal communication.				
b.	Implementation of Patient Centred Approach Respects differences in patient's/parent's beliefs, concerns, expectations, cultural context, gender and value systems and takes this information into consideration when developing therapeutic plans.				

C.	<b>Clarity of Communication and Explanations</b> Demonstrates ability to deliver information to patients, colleagues, and other professionals in a clear and understandable manner that encourages participatory decision making.		
d.	Ability to Reach Common Ground Demonstrates ability to each a common understanding with patients and families and other health care providers regarding problems and plans. Engages in and encourages open discussion.		
e.	<b>Effectiveness of Verbal and Written Communication</b> Maintains clear, accurate, and appropriate written or electronic records of patient encounters. Presents clear verbal reports of patient encounters. Effectively presents medical information in formal rounds.		
f.	<b>Effective Counselling</b> Demonstrates ability to counsel and support a patients and family with a difficult diagnosis or a chronic or catastrophic illness. Discusses palliative care where appropriate and supports a family facing the death of a child.		
	Overall Competence:		

### **Communicator:** Please comment on Resident's STRENGTHS:

## **Communicator:** Suggestions for IMPROVEMENT:

	COLLABORATOR	Not Applicable	1 Does Not Meet Expectations	2 Borderline	3 Meets Expectations
a. b.	Inter-professional Team CollaborationRecognizes and respects the roles of other health care professionals. Works withinter-professional team to optimize patient care as well as to optimize research,educational and administrative tasks.Effectiveness of Working RelationshipsDemonstrates a respectful attitude to colleagues and members of the inter-professional health care team. Works collaboratively to address misunderstandingsand negotiate shared solutions to difficult or challenging problems.				
	Overall Competence:				

### **Collaborator:** Please comment on Resident's STRENGTHS:

## **Collaborator:** Suggestions for IMPROVEMENT:

<b>M</b> A	NAGER	Not Applicable	1 Does Not Meet Expectations	2 Borderline	3 Meets Expectations
a.	Individual Management Skills Demonstrates good time-management skills. Demonstrates ability to balance patient care responsibilities, self-directed learning, outside activities, personal commitments and career goals.				
b.	<b>Resource Allocation</b> Demonstrates ability to identify issues in balancing limited health care resources and individual vs societal needs.				
	Overall Competence:				

### Manager: Please comment on Resident's STRENGTHS:

# Manager: Suggestions for IMPROVEMENT:

H	EALTH ADVOCATE	Not Applicable	1 Does Not Meet Expectations	2 Borderline	3 Meets Expectations
a.	Patient Advocate Identifies needs of individual patients and identifies opportunities to advocate for patients to whom care is being provided. Seeks opportunities to discuss health promotion and disease prevention.				
b.	<b>Determinants of Health</b> Demonstrates ability to discuss the determinants of health and identify children who may be vulnerable or marginalized.				
C.	<b>Promotion of Health</b> Describes the impact of public policy on child health. Identifies interventions to promote child health (immunizations, care seats, bicycle helmets etc. ) and advocates for use. Identifies professional and ethical issues including altruism, social justice, autonomy, integrity and idealism that impact on the role of the professional as an advocate for health of individuals and populations.				
	Overall Competence:				

### Health Advocate: Please comment on Resident's STRENGTHS:

## Health Advocate: Suggestions for IMPROVEMENT:

SCHOLAR	Not Applicable	1 Does Not Meet Expectations	<b>2</b> Borderline	3 Meets Expectations
<ul> <li>Approach to Learning         Identifies knowledge gaps and develops a self-learning plan to address gaps.     </li> <li>Accepts personal responsibility for developing, implementing and monitoring         personal learning. Curious and inquisitive.</li> </ul>				
<ul> <li>b. Facilitation of Teaching and Learning Gives an effective lecture or presentation. Gives and receives feedback. Identifies the learning needs of others and selects effective teaching strategies to facilitate learning of others. e.g. medical students, more junior residents.</li> </ul>				
Overall Competence:				

# Scholar: Please comment on Resident's STRENGTHS:

### **Scholar:** Suggestions for IMPROVEMENT:

PROFESSIONAL	Not Applicable	1 Does Not Meet Expectations	2 Borderline	3 Meets Expectations
		Expectations		Expectations

a.	<b>Professional Practice</b> Exhibits professional behaviours including honesty, integrity, commitment, compassion, respect and altruism. Committed to delivering the highest quality health care and maintaining competence.		
b.	<b>Ethical Practice</b> Demonstrates knowledge of the principles of medical ethics including obtaining informed consent, confidentiality, conflicts of interest, and ethical decision-making and applies these to practice.		
с.	<b>Commitment to Society</b> Demonstrates knowledge of the professional, legal and ethical codes of practice. Demonstrates accountability for actions.		
d.	<b>Reflective Practice</b> Demonstrates ability to self-assess and reflect on professional performance. Accepts feedback and demonstrates willingness to change behaviour in response to feedback.		
	Overall Competence:		

### Professional: Please comment on Resident's STRENGTHS:

#### **Professional:** Suggestions for IMPROVEMENT:

**CONCLUSION** (please put an 'X' in front of your choice):

- O Passed
- **O** Incomplete
- **O** Failed
- **O** Requires review by Evaluation Committee

### \*For the Evaluator to answer:

Did you have an opportunity to meet with this trainee to discuss their performance?

- O Yes
- O No

### \*For the Evaluatee to answer:

Did you have an opportunity to discuss your performance with your preceptor/supervisor?

- O Yes
- O No
- Are you in agreement with this assessment?
- Yes
- O No

Please enter any comments you have (if any) on this evaluation.

Completed by:						
Name of Evaluator	Signature	Date				
Read/reviewed by:						

Signature