



DEPARTMENT OF PAEDIATRICS – POSTGRADUATE EDUCATION L3 NICU IN-TRAINING EVALUATION FORM

RES	SIDENT:	PGY Level: R	OTATION & S	SITE:		
RO	TATION BLOCK/DATES:		ACAD.	YR:		
INT	RODUCTION					
	mber of clinical days for this rotation (19 or 20 mber of days resident was absent for ANY rea		ays)			
The	e resident must complete at least 15 days or i	75% of the rotation or it	will consider	INCOMPLETE	•	
N	MEDICAL EXPERT		Not Applicable	1 Does Not Meet Expectations	2 Borderline	3 Meets Expectations
a.	Basic and Clinical Knowledge Demonstrates a good understanding of basic scientific relevant to neonatal-perinatal medicine	and clinical knowledge				
b.	History and Physical Examination Skills Takes a history with the appropriate level of detail for physical examination that is focused, efficient, organize					
C.	Problem Solving Demonstrates ability to make a differential diagnosis, i prior knowledge and new information. Demonstrates investigation and management of neonatal medical pr	ability to develop a plan for				
d.	Integration and Application Selects and sequences appropriate investigations. Integration synthesizes information to arrive at a diagnosis.					
e.	Clinical Judgment Accurately assesses patients and balances the risks and interventions in individual cases. Seeks appropriate coprofessionals. Recognizes personal limitations.					
f.	Performance in Emergencies Recognizes acutely ill patients and institute emergency for the level of training and skill. Consults promptly an Communicates effectively and remains calm.					
g.	Neonatal Resuscitation Demonstrates the ability to apply knowledge and skills resuscitation on newborns or in simulation, in accorda					
		Overall Competence:				
	Medical Expert: Please comment on Resident	's STRENGTHS:				
	Medical Expert: Suggestions for IMPROVEME	NT:				
C	COM M UNICATOR		Not Applicable	1 Does Not Meet Expectations	2 Borderline	3 Meets Expectations
	a. Establishment of Therapeutic Relationships.	as 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				
L	when developing therapeutic plans.				
	c. Clarity of Communication and Explanations 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.				
ŀ	e. Effectiveness of Verbal and Written Communication				
	Maintains clear, accurate, and appropriate written or electronic records of patient				
	encounters. Presents clear verbal reports of patient encounters. Effectively				
L	presents medical information in formal rounds.				
	f. Effective Counselling 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:				
Γ	COLLABORATOR		1	2	3
		Not Applicable	Does Not Meet	Borderline	Meets
		Applicable	Expectations		Expectations
ć	a. Inter-professional Team Collaboration				
	Recognizes and respects the roles of other health care professionals. Works with				
	inter-professional team to optimize patient care as well as to optimize research,				
ŀ	educational and administrative tasks. b. Effectiveness of Working Relationships				
ľ	Demonstrates a respectful attitude to colleagues and members of the inter-				
	professional health care team. Works collaboratively to address misunderstandings				
	and negotiate shared solutions to difficult or challenging problems.				
ŀ	Overall Competence	:			
L	<u> </u>				
	Collaborator: Please comment on Resident's STRENGTHS:				
	Collaborator: Suggestions for IMPROVEMENT:				
	Collaborator: Suggestions for INFROVENCENT.				
Ī	MANAGER		1		3
ľ	WANAGER	Not	Does Not Meet	2 Doudodino	Meets
		Applicable	Expectations	Borderline	Expectations
ŀ	a. Individual Management Skills				
	Demonstrates good time-management skills. Demonstrates ability to balance				
l	nations are responsibilities salf directed learning outside activities personal				
	patient care responsibilities, self-directed learning, outside activities, personal				
	commitments and career goals.				
		:			

Manager: Please comment on Resident's STRENGTHS:

	Manager: Suggestions for IMPROVEMENT:				
	The transfer of the transfer o				
TI	EALTH ADVOCATE		1		3
П	EALIH ADVOCATE	Not Applicable	Does Not Meet Expectations	2 Borderline	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.				
	Overall Competence:				
	Health Advocate: Please comment on Resident's STRENGTHS:				
	reast Advocate. Flease comment on resident's STALINGTIS.				
	Health Advocate: Suggestions for IMPROVEMENT:				
S	CHOLAR	Not	1 Does Not Meet	2	3 Meets
		Applicable	Expectations	Borderline	Expectations
a.	Approach to Learning Identifies knowledge gaps and develops a self-learning plan to address gaps. Accepts personal responsibility for developing, implementing and monitoring personal learning. Curious and inquisitive.				
b.	Critical Appraisal Applies the principles of critical appraisal to medical literature. (Neonatal Journal Club)				
c.	Facilitation of Teaching and Learning Gives an effective lecture or presentation (Neonatal Grand Rounds). 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.				
	Overall Competence:				
	Scholar: Please comment on Resident's STRENGTHS:				
	Scholar: Suggestions for IMPROVEMENT:				
R	OFESSIONAL		1		3
		Not Applicable	Does Not Meet Expectations	2 Borderline	Meets Expectations
<u> </u>	Professional Practice		1		
	Exhibits professional behaviours including honesty, integrity, commitment, compassion, respect and altruism. Committed to delivering the highest quality health care and maintaining competence.				

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.				
c.	Commitment to Society Demonstrates knowledge of the professional, legal and ethical codes of practice. Demonstrates accountability for actions.				
d.	Reflective Practice 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:				_
		T		T	
ON	-CALL PERFORMANCE	Not Applicable	1 Does Not Meet Expectations	2 Borderline	3 Meets Expectations
	Availability Resident was available when paged and responded in a timely fashion to calls.				
	Team Communication Demonstrates effective communication with attending physicians and other colleagues. Gives accurate descriptions of patient problems by telephone. Morning reports and "handovers" are accurate and complete.				
	Clinical Judgment Displays good clinical judgment. Calls for assistance appropriately. Can be trusted to assess patients and seek support as required.				
	Overall Competence:				
	On-call Performance: Please comment on Resident's STRENGTHS:				
	On-call Performance: Suggestions for IMPROVEMENT:				
	NCLUSION (please put an 'X' in front of your choice): Passed				
() Incomplete				
() Failed				
(Requires review by Evaluation Committee				
*For	the Evaluator to answer:				
	Did you have an opportunity to meet with this trainee to discuss their perform O Yes O No	ance?			
*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 assessn	nent?		
O Yes			
O No			
Please enter any comments you have (if an	y) on this evaluation.		
	<u>,, , , , , , , , , , , , , , , , , , ,</u>		
Completed by:			
Name of Evaluator	Signature	Date	
Dood/wardarrad has			
Read/reviewed by:			
Name of Resident/trainee	Signature	Date	
	• • • • • •		