**Clinical Mid and End Placment Review Form**

**Core Trainees**

To be completed electronically by the Clinical Supervisor. The Clinical Supervisor should send the complete document to the Trainee by email. This should then be saved as ‘Clinical Mid/End (delete as appropriate) Placement Review Form (DD/MM/YYY)’ in the ‘Supervision’ folder of Trainee’s ePortfolio.

*This report is to inform regular reviews of progress which are conducted through Training and should reflect your experience of the Trainee’s performance during their clinical placement and progress made towards their PDP objectives for the current year.  The Educational Supervisor will use this report along with WPBAs and other evidence in the ePortfolio to assess the Trainee’s progress towards PDP objectives and curriculum requirements and summarise progress in the Annual Structured Report.*

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| **Clinical Mid**  **/ End**  **Placement Review** | | | |
| **Personal / Placement Details** | | | |
| **Trainee Name** |  | **Year of Training** |  |
| **Clinical Supervisor** |  | **Specialty/Sub Specialty** |  |
| **Period covered** | **From:** **To:** | | |

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| **Professional Competences**  *When assessing these domains, you should rate the Trainee against the standard expected at their stage of Training.*  *If a Trainee is rated as ‘excellent’, or ‘needs further development’ in any domain please ensure that further information is provided in the ‘Achievements and Areas for Development’ box below.*  ***Essential clinical competences for CT1 are underlined and must be evidenced with reference to WPBAs.*** | |
| 1. Clinical Assessment | **Includes the clinical assessment of patients with mental health problems in relation to history-taking, mental state examination, physical examination, Provide evidence from WPBAs (e.g. ACE, mini-ACE, CBD and multi-source feedback)** |
| Interview skills:  WPBA Evidence:  Needs further development  Competent  Excellent  Elicit a clinical history:  WPBA Evidence:  Needs further development  Competent  Excellent  Perform a mental state examination:  WPBA Evidence:  Needs further development  Competent  Excellent  Perform a cognitive screening assessment:  WPBA Evidence:  Needs further development  Competent  Excellent  Perform a physical examination:  WPBA Evidence:  Needs further development  Competent  Excellent  Assessment of capacity:  WPBA Evidence:  Needs further development  Competent  Excellent | |
| 2. Formulation and Management | **Includes the application of scientific knowledge to patient formulation and management, access to appropriate care and treatment.**  **Provide evidence from WPBAs (e.g. ACE, mini-ACE, CBD and multi-source feedback)** |
| Present a clinical case (with basic management plan):  WPBA Evidence:  Needs further development  Competent  Excellent  Prescribe safely in psychiatry:  WPBA Evidence:  Needs further development  Competent  Excellent  Write a clinical letter or report:  WPBA Evidence:  Needs further development  Competent  Excellent | |
| 3. Risk assessment | **Includes the assessment and management of risk in psychiatry. Provide evidence from WPBAs, particularly ACE, mini-Ace, CBD and multi-source feedback** |
| Perform a suicide risk assessment:  WPBA Evidence:  Needs further development  Competent  Excellent | |
| 4. Maintaining Good Medical Practice | **Includes the knowledge of systems to update knowledge and its application to professional practice. Also includes legislation concerning patient care, the rights of patients and carers, research and keeping up-to- date with clinical advances. Consider evidence from Trainee’s portfolio, and their individual learning plan and any record of educational supervision they have kept.** |
| Insufficient Evidence  Needs further development  Competent  Excellent | |
| 5. Maintaining Performance | **Includes routine practice of critical self-awareness, working with colleagues to monitor and maintain quality of care and active participation in a programme of clinical governance. Evidence to consider includes multi-source feedback, records of audit, research projects and Trainees reflective notes on them.** |
| Insufficient Evidence  Needs further development  Competent  Excellent | |
| 6. Teaching & Training; assessing and appraising | **Includes the planning, delivery and evaluation of learning and teaching, appraising and evaluating learning and learners; supervising and mentoring learners and providing references. Consider evidence multi-source feedback, completed Assessment of Teaching forms and any quality data kept by the relevant teaching faculty or programme.** |
| Insufficient Evidence  Needs further development  Competent  Excellent | |
| 7. Relationships with Patients and Carers | **Includes conduct of professional patient relationships, good communication, obtaining consent, respecting confidentiality, maintaining trust and ending professional relationships with patients. Consider evidence from WPBAs, particularly the ACE, mini-ACE, CBD and multi-source feedback.** |
| Insufficient Evidence  Needs further development  Competent  Excellent | |
| 8. Dealing with Problems in Professional Practice | **Competence when dealing with situations where there are concerns regarding the conduct or performance of colleagues, handling complaints and formal inquiries, holding indemnity insurance and providing assistance at inquiries and inquests. Evidence to consider will include CBD, multi-source feedback and reflective notes, including critical incident reports.** |
| Insufficient Evidence  Needs further development  Competent  Excellent | |
| 9. Relationships with Colleagues | **Includes treating colleagues fairly, by working to promote value-based non-prejudicial practice; working effectively as a member and leader of a multidisciplinary team, arranging clinical cover, taking up appointments, sharing information with colleagues and appropriate delegation/referral. Consider evidence from CPB and multi-source feedback** |
| Insufficient Evidence  Needs further development  Competent  Excellent | |
| 10. Maintaining Probity | **This competency illustrates maintaining appropriate ethical standards of professional conduct which may include the following: providing information about your services; writing reports, giving evidence and signing documents; carrying out and supervising research; properly managing financial and commercial dealings; avoiding and managing conflicts of interest and advising others on preventing and dealing with them and appropriately managing financial interests that may have a relevance to professional work. Evidence to consider will include CBD and multi-source feedback and your review of reports written by the Trainee** |
| Insufficient Evidence  Needs further development  Competent  Excellent | |
| 11. Ensuring Health Problems do not put patients at Risk | **This competency relates to the doctor’s awareness of when his/her own performance, conduct or health, or that of others, might put patients at risk and the action taken to protect patients. Behaviours you may wish to consider: observing the accepted codes of professional practice, allowing scrutiny and justifying professional behaviour to colleagues, achieving a healthy balance between professional and personal demands, seeking advice and engaging in remedial action where personal performance is an issue.** |
| Insufficient Evidence  Needs further development  Competent  Excellent | |

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| **Progress made towards this year’s PDP objectives** | | |
| **Objective** | **Trainee on Target to meet objectives** | **Progress Made** |
|  | Yes  No |  |
|  | Yes  No |  |
|  | Yes  No |  |
|  | Yes  No |  |
|  | Yes  No |  |
|  | Yes  No |  |

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| **Achievements and Areas for Development** |
| **Please state any area(s) which have been particularly good:** | |
| **Please state any area(s) where there is need for development:** | |

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| **Emergency Psychiatry**  *To be completed at the End of Placement Review* |
| During Core Psychiatry Training, Trainees must have experience equivalent to participation in a first on call rota with a minimum of 55 nights on call during the period of Core Training (i.e. at least 50 cases with a range of diagnosed conditions and with first line management plans conceived and implemented).  **Experience of emegergency cases gained in this post**  **Number of 1st line management plans documented in log book:**  **Number discussed with Clinical Supervisor:**  **Number of WPBAs from emergency cases:**  **Clinical Supervisor assessment of competence in assessment and management of psychiatric emergencies compared with level expected at this stage of training:**  Insufficient Evidence  Needs further development  Competent |

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| **Incidents** | |
| **Has the Trainee been involved in any serious incidents?** | *If yes, give summary of incident and outcome:* |
| **Has the Trainee been invoved in any other incidents?** | *If yes, give summary of incident and outcome:* |

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| **Compliments and Complaints** | |
| **Has the Trainee received any compliments?** | *If yes, give summary:* |
| **Has the Trainee been invoved in any complaints?** | *If yes, give summary of complaint and outcome:* |

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| **Attendance** | |
| **Number of days unauthorised non-attendance during placement (obtained from Postgraduate Services)** |  |
| **Action taken** |  |

**Form completed by (Clinical Supervisor):**

**Date:**