ROYAL AUSTRALASIAN COLLEGE OF SURGEONS BOARD OF PAEDIATRIC SURGERY IMG CLINICAL ASSESSMENT EVALUATION FORM

_______ то _______

PERIOD FROM:

NAME OF IMG:

NAME OF SURGICAL SUPERVISORS:

HOSPITAL FOR THIS PERIOD:

	Days	Absent:	
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 Reason:
 Annual Leave
 Exam/Study
 Sick Other:

Performance Key					
Not Satisfactory N	Borderline B	Satisfactory S	Well above Average E		
Not satisfactory Not meeting expectations for level of training Regular &/or significant omissions or errors Little, slow &/or inconsistent progress Requires frequent correction or instruction Requires intense monitoring and supervision compared to expected for level of training	Borderline performance Not meeting expectations for level of training Some minor omissions or errors Requires above average instruction for level of training Requires further training to improve	Satisfactory Performs as expected for level of training Requires average level of instruction or correction for level	Performs consistently above level of training No omissions or errors Requires minimal instruction or correction		



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Place an "x" in the box that best reflects the specified attribute of the trainee

A. CLINICAL KNOWLEDGE/MEDICAL EXPERTISE: ACQUISITION AND APPLICATION

		IMG'S PERF	ORMANCE IS:		
	Not Satisfactory N	Borderline B	Satisfactory S	<u>Well</u> above average E	
ACQUISITION of Basic Science	e and clinical k	nowledge			ESSENTIAL COMPETENCY
Poor reader of basic science					Outstanding knowledge of basic sciences
Poor knowledge of common paediatric surgical conditions					Comprehensive knowledge of paediatric surgical conditions
Lacks appropriate knowledge to construct diagnosis in paediatric surgical patients					Outstanding knowledge, can "spot the unusual" correctly
Poor perspective of paediatric subjects					Knowledge in perspective, aware of the unusual
Struggles to accumulate knowledge					Acquires knowledge easily
Limited knowledge of texts or journals					Good knowledge of literature
Allows deficiences to persist					Quick to correct exposed deficiences
APPLICATION 2. Basic Science	e and clinical k	nowledge			ESSENTIAL COMPETENCY
Fails to apply knowledge to clinical problems					Excellent application of knowledge to clinical situation in paediatric surgery
Fails to recognise specific paediatric surgical issues					Clearly differentiates issues of paediatric surgical significance
Needs encouragement to study					Enthusiastic learner takes extra courses etc.
No initiative					Considerable initiative
Requires direction and guidance					Pro-active
Appears out-of-depth					In command and control of situation
Fails to learn from experience					Experience retained, ongoing performance improvement

Board of Paediatric Surgery Evaluation International Medical Graduate

B. CLINICAL SKILLS: ACQUISITION AND APPLICATION OF CLINICAL INFORMATION

	IMG'S PERFORMANCE IS:				
	Not Satisfactory N	Borderline B	Satisfactory S	<u>Well</u> above average E	
1. Verbal description of clinica	al assessment /	Case Present	ations		CRITICAL COMPETENCY
History taking deficient, sketchy					Takes a comprehensive and pertinent history
Jumbled/Disorganised Much irrelevant information					Well organised Focused, relevant
Inability to discuss relevance of signs					Good perspective
2. Written record of clinical as	ssessment				CRITICAL COMPETENCY
Inadequate or incomplete Medical records inaccurate					Adequate and complete Maintains accurate medical records
Illegible					Legible
Not focused, specific					Precise and perceptive
3. Eliciting Clinical Findings					CRITICAL COMPETENCY
Superficial in examination, misses details					Thorough, focussed and relevant examination
Poor ability to elicit symptoms & signs					Excellent clinical assessment
Demonstrates no regard for cultural and social factors when taking a history					Obtains clinical information in a manner cognisant of cultural and social factors
4. Demonstration of Clinical C	ompetence in [Diagnosis			CRITICAL COMPETENCY
Poor interpretation of clinical features					Excellent interpretation of clinical features
Fails to associate and prioritise details in complex situations					Readily recognises and manages clinical complexities
Fails to apply knowledge in analysis of clinical findings					Uses knowledge to analyse clinical findings
Does not differentiate paediatric conditions amenable to surgical treatment					Accurately differentiates conditions in children amenable to surgical management
5. Post-operative care					CRITICAL COMPETENCY
Lacks interest					Fully involved in post-op care
Late to notice complications					Recognises complications early
Happy to leave post-operative care to others					"Hands-on" approach to post- operative care
Inappropriate /deficient involvement of other relevant personnel					Appropriate co-ordination and use of other personnel

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C. CLINICAL DECISION-MAKING: Application of knowledge, clinical information, and signs elicited to form a management plan

	IMG'S PERFORMANCE IS:				
	Not Satisfactory N	Borderline B	Satisfactory S	<u>Well</u> above average E	
1. Clinical Judgement					CRITICAL COMPETENCY
Fails to grasp significance of findings					Recognises significance of clinical findings
Fails to respond to significant clinical findings					Responds rapidly & appropriately to significant clinical findings
Unable to distinguish specific paediatric needs					Recognises and responds to needs specific in paediatric patients
Unaware of limitations					Aware of limitations
Inappropriate reaction to emergencies					Appropriate reaction to emergencies
Reluctant to seek advice appropriately					Seeks advice appropriately
2. Use of investigations					CRITICAL COMPETENCY
Inappropriate					Appropriate selection and use of investigative tools
Exhibits no regard for patient needs in planning investigations					Critically evaluates the advantages and disadvantages of each investigative modality as applied to patient needs
Poor ability to select investigations					Safe and efficient and cost- effective choice of investigations
Limited ability to interpret					Excellent at interpretation
3. Clinical Care					CRITICAL COMPETENCY
Fails to develop an appropriate management plan					Uses all information to develop an efficient and logical management plan
Poor understanding of treatment options					Accurately identifies the risks, benefits and mechanisms of action of medications and other treatment options
Ignores/avoids managing complications					Recognises early and manages complications effectively
Unaware of patient needs					Manages patients with sensitivity to physical, social, cultural and psychological needs
Unable to recognise risks					Identifies and manages risks and can implementa risk management plan

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D. TECHNICAL SKILLS IMG'S PERFORMANCE IS: Not Well above Borderline Satisfactory Satisfactory average В S Ν F 1. Operative Ability **CRITICAL COMPETENCY** Lacks interest Highly motivated Reluctant to be taught Learns avidly Does not ensure that team and Ensures team works efficiently equipment are ready by organising activities in a Often arrives to theatre late timely manner Excellent ability to learn new Fails to learn techniques shown techniques Excellent hand-eye co-Poor hand-eye co-ordination ordination No effort made to understand procedure prior to surgery Excellent pre-operative preparation and demonstrates Does not have necessary information for safe conduct of procedural knowledge procedure Fails to observe standards Follows theatre protocols Analyses own technique as No appreciation of own part of quality improvement technique process Slow and inefficient Accurate and efficient Appears to struggle surgically Fluent and in control Ergonomically efficient Ergonomically inefficient Rough Delicate with tissues Ties knots poorly All knot tying secure Little attention to detail Meticulous technique No ability to adapt skills to Adapts skills to operative operative requirements requirements in each patient Shows poor knowledge of Excellent knowledge of anatomy anatomy Excellent surgical judgement Poor surgical judgement Does not seek assistance Seeks assistance appropriately appropriately Panics in emergency In control in emergency Able to maintain surgical Unable to complete surgical judgement and safely complete surgical procedures tasks when under pressure under pressure Poor Situational Awareness Can anticipate changes in Unable to adjust behaviour to operative plan and the individual patient or demonstrates appropriate condition or to the nature of the flexibility procedure

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E. SCHOLARSHIP					
		IMG'S PERF	ORMANCE IS:		
	Not Satisfactory N	Borderline B	Satisfactory S	<u>Well</u> above average E	
1. Teaching and Learning					ESSENTIAL COMPETENCY
Gives low priority					High priority
Poorly prepared					Well prepared
Poorly delivered					Logical and clear, can inspire
Does not assist others in learning					Facilitates learning in others
Unable to critically evaluate a new technique					Critically appraises new trends and techniques
Exhibits no interest					Shows and interest in learning through research
Unaware of resaerch influence on clinical practice					Recognises value of research knowledge applied to clinical practice
No inclination/skills shown					Flair to research
Does not complete project					Completes project
Poor grasp of statistics & Research method					Good grasp of statistics and research method
3. Publications					ESSENTIAL COMPETENCY
No publication in preparation					Active in publication
Little interest in audit					Conscientious with audit
Reluctant to present at meetings					Keen to present at meetings

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F. MEDICAL COMMUNICATION SKILLS

		IMG'S PERF	ORMANCE IS:		
	Not Satisfactory N	Borderline B	Satisfactory S	<u>Well</u> above average E	
1. Communication with patier	nts				CRITICAL COMPETENCY
Poor listener					Listens well
Ignores family					Recognises importance of communication with family
Disliked by patients					Liked by patients
Increases patient anxieties					Inspires confidence
Reluctant/inappropriate in communication with patient					Communicates with children in a way appropriate to developmental level
Unable to obtain informed consent					Provides information enabling informed consent
Inadequate in sharing relevant information with family					Communicates information about investigations, treatment options and risks in a way that is understandable to the family
2. Co-operation with staff					CRITICAL COMPETENCY
Refuses to help out					Always willing to help, even if personally inconvenient
Poor relationship with peers, and may undermine					Good rapport with peers
Magnifies and allows misunderstandings to escalate					Initiates resolution of misunderstanding
Poor relationship with staff junior					Supportive and good relationship with junior staff
Often creates problems					Skilled at defusing problems in surgical team
Just does what is required					Keen enthusiastic
3. Leadershipand Managemen	nt				CRITICAL COMPETENCY
Can only work alone					Functions well as member of team
No consultation with others					Consults well with colleagues and other professionals
Unable to prioritise patient care					Applies a wide range of information to prioritise provision of patient care
Wasteful of resources					Uses resources effectively for patient care and balances them with patient needs
No interest in health services management					Willing to contribute to health services management

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G. ATTITUDES

		IMG'S PERFO			
	Not Satisfactory N	Borderline B	Satisfactory S	<u>Well</u> above average E	
1. Self-motivation					CRITICAL COMPETENCY
Idle					Full of energy
Late for sessions					Punctual
Behind with letters or summaries					Up to date with work
Disorganised					Well organised
Off-loads work onto colleagues					Performances go beyond the "call of duty"
Difficult to obtain on call					Ready accessibility
Forgets to do things					Always completes tasks on time
Unreliable					Reliable and dependable
Inefficient in work practices					Efficient, anticipates well
Has little interest in sick children					Strong advocate for the sick child
2. Stress response					CRITICAL COMPETENCY
Copes poorly					Copes well
"Disappears" when problems arise					Responds well to problems
Does not seek help when required					Seeks help when required
Decompensates with critical situation					In command in critical situation
Panics					Does not panic
Tends to blame others for mistakes					Accepts responsibility for mistakes
Covers up mistakes					Openly learns from errors
Does not enjoy surgery					Happy in work
3. Professionalism	1		1		CRITICAL COMPETENCY
Ethical ideals inconsistent with paediatric issues					Identifies and applies ethical principles related to paediatric surgery
Little comprehension of medicolegal issues related to children					Recognises medicolegal implications of paediatric surgical issues
Cannot accept responsibility for own decisions/actions					Readily accountable for own decisions/actions
Totally unable to accept criticism					Responds constructively to criticism
Completely self-focussed					Supports colleagues and junior staff
Has a totally inaccurate view of own performance					Demonstrates insight into own performance

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Unaware of own limitations			Identifies and applies ethical principles related to paediatric surgery

CRITICAL COMPETENCY

3. Professionalism cont.

					CRITICAL COMPETENCI		
		IMG'S PERFO					
	Not Satisfactory N	Borderline B	Satisfactory S	<u>Well</u> above average E			
Lies to cover defects in work Does not report information correctly Covers up errors or blames others for problems					Honest Admits Mistakes		
Does not realise significance of omission or mistake in clinical work or judgment Minimises own mistakes					Keen to rectify deficiencies Proactive in organising own remedial programme if needed does not repeat errors		
Repeats same errors or deficient performance through lack of insight into own performance Fails to take action or advice to improve performance Denies there is an issue					Demonstrates insight into own performance Addresses issues when advised Does not repeat errors and addresses issues when advised Self critical and incisive		
Does not attend to own health issues that may impinge on patient safety					Demonstrates self health advocacy with patient and own safety a priority		

H. OVERVIEW/COMMENTS

Circle appropriate response

- A Below expectations relative to a consultant surgeon/Needs further improvement
- B Meeting expectations relative to a consultant surgeon or recently graduated Fellow
 C Exceeding expectations relative to a consultant surgeon

Please make any explanatory comments regarding any area or competency

Medical Expertise

Does this IMG display a broad practical and theoretical knowledge, to a standard expected of a specialist in Australia or New Zealand appropriate to contemporary Paediatric surgery? A B C

Does he or she apply this knowledge to reach logical and accurate diagnoses, and propose management plans that would be typical for a local paediatric surgeon? A B C

Are you convinced this IMG is reading and learning, either in preparation for the exam, or as part of self-improvement?

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A B C

Comments:_____

Technical Expertise

Has this IMG demonstrated to you the degree of dexterity, co-ordination and surgical skills you would expect of a trained and experienced surgeon? A B C

Does this IMG practice safe surgery, consistently taking the necessary precautions to a standard expected in Australia or New Zealand, and show respect for the safety of self, patients, and co-workers?

A B C

Have you been confident this IMG has been safe and reliable, and has always worked within the limits of their experience and ability?

A B C

Assess the competence of this IMG in the following surgical areas;

- Inguino-scrotal surgery under 6 months of age.
- Neonatal Bowel obstruction
- Surgical conditions in the premature infant
- Urinary tract endoscopy and interpretation of uro-radiology
- Hypospadias
- Laparoscopic procedures
- Pyloromyotomy
- Thoracoscopy
- Oesophageal Atresia
- Congenital diaphragmatic hernia
- Neonatal Anorectal anomaly and neonatal aganglionosis management
- Burns management
- Open renal surgery
- Sistrunks procedure

Comments:

List any other significant procedures you believe this IMG is considerably skilled and experienced at performing.

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Judgement - Clinical Decision Making

Has this IMG been demonstrating good sense and judgment when proposing treatment plans,						
giv	giving appropriate alternatives where appropriate? Have they shown an awareness of what is					
rea	sonabl	e and	achievable in the local environment, taking into account individual patient/family			
wis	hes, p	atient	co-morbidities and local expertise (eg regional vs tertiary hospital, NICU level)?			
А	В	С				

Has this IMG been using investigations appropriately? Has there been reason and logic in test selection, ready justification of their choice, and no tendency to over investigate? Α В С

Is this IMG able to investigate paediatric surgical conditions appropriately and interpret functional and anatomical findings? С

В Α

Has this IMG been able to recognise the sick or urgent patient, and recognise early changes in clinical condition that require intervention or change of treatment? А В С

Has the IMG demonstrated the ability to conduct antenatal counseling and follow-up of antenatal detected conditions? С

Α B

Is the IMG able to allocate hospital resources and develop management plans taking into account the families circumstances (residential distance to tertiary care, family economic status and availability of family support)? С

А В

Comments:			

Scholar & Teacher

Has this IMG shown an interest in the education program of the hospital, attending and contributing to the meetings? С

В А

Has this IMG looked for opportunities and shown a willingness, to teach the junior medical staff, undergraduates, nurses and allied health professionals? А В С

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Does this IMG show informed interpretation of published literature, and understand what might limit whether published evidence can be applied in local circumstances?

В С Α

Comments:

Professionalism

Has this IMG been punctual, prepared, and contactable when rostered for clinical or on-call obligations?

С Α В

Has this IMG shown a willingness to accept responsibility for their own actions, admit fault for mistakes, and accept responsibility for failures or complications, and subsequently not repeat these mistakes?

Α В C

Does this IMG provide an appropriate level of informed consent, taking account of family wishes and autonomy when recommending treatment plans? В А С

Has the IMG been shown clear understanding of the process of consent in relation to minors in Australia or New Zealand, in different scenarios relating to guardianship, fostering and age of the patient and for different procedures? С

А В

Does the IMG understand under what circumstances and the processes involved in the state overriding parental consent?

В С Α

Does the IMG understand their responsibilities in the care of children with suspected neglect or non-accidental injury? Does the IMG recognise non-accidental injury and signs of neglect? А В С

Does this IMG conduct him or herself appropriately in situations of stress, frustration, or interpersonal conflict?

Α В С

Does the IMG understand and demonstrate the appropria	te eth	ical	guidelines	s in:
dealing with the health industry sponsorship?		Α	В	С
in conducting clinical research?.	А	В	С	
introducton of new techniques, managements or prosthet	ics?	А	В	С

Comments:

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Health Advocacy

Has this IMG shown awareness that health resources are finite, and been prudent in their use of or requests for health care resources? С

В Α

Has this IMG shown an understanding of the multi-cultural nature of Australian and New Zealand, and been respectful of the values and beliefs of various population groups as they affect their health care requirements and decisions? С

А В

Does this IMG show a respect for and readily employ local protocols and policies such as safe sharps use and disposal, infection control, safe work hours, adverse event reporting, and local clinical procedures and pathways?

А В С

Comments:

Collaboration

Has this IMG shown an understanding of the roles and responsibilities of the varied health care professionals that typically make up an Australian or New Zealand health care team, and have they requested and shown respect for their contributions to patient health care? Α В С

Has he or she fostered team work through appropriate delegation, clear instructions, acknowledgement of roles within the team, and inclusion of non- medical members of the team? Α В С

Has this IMG shown a readiness to appropriately consult other paediatric surgeons, and specialists from other disciplines, when this is needed to provide the best treatment option for a patient?

А В С

Has this IMG consistently provided timely and appropriate advice to patients and colleagues when they have been asked to provide consultation advice? Α В C

Comments:

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Management and Leadership

Has this IMG shown an appropriate leadership style and commitment, providing guidance, advice, and feedback to co-workers in a supportive and constructive manner? A B C

Has this IMG been diligent in documentation, reporting and communicating responsibly, and maintaining clear and contemporaneous records? A B C

Comments:_____

Communication

Has this IMG consistently used a clear and considerate style of communication when dealing with patients and their relatives, being well understood and receptive to questions? A B C

Has this IMG being able to communicate empathetically and with clarity to families, particularly in times of stress or emotional distress? A B C

Has this IMG been clear and timely when communicating with co-workers? A B C

Comments:_____

CPD

List the conferences and workshops attended during this assessment period.

List the education sessions attended during this assessment period.

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Outline the self-audit activities undertaken during this assessment period.

In your estimation, is this IMG ready to sit the Fellowship exam? YES NO N/A It is important all IMG's receive comprehensive feedback about their progress in the oversight period. Has this been given? YES NO N/A It is important all IMG's remain fully aware and confident in the process. Is this the case, and has the opportunity been given to question any aspect of the process? YES NO N/A Signature of Fellow Completing Period of Assessment Date / / / Date / / / /		
period. Has this been given? YES NO N/A It is important all IMG's remain fully aware and confident in the process. Is this the case, and has the opportunity been given to question any aspect of the process? YES NO N/A Signature of Fellow Completing report Signature of IMG Undertaking Period of Assessment Period of Assessment	In your estimation, is this IMG ready to sit the Fellowship ex	xam? YES NO N/A
has the opportunity been given to question any aspect of the process? YES NO N/A Signature of Fellow Completing report Signature of IMG Undertaking Period of Assessment	•	
report Period of Assessment	• •	ne process?
	report Period of Asse	essment

Please return to: Executive Officer, Board of Paediatric Surgery Royal Australasian College of Surgeons Colellege of Surgeons' Gardens, Spring Street Melbourne VIC 3000 Ph: +61 (0)3 9276 7416, Fax: +61 (0)3 9249 1240, Email: paediatric.board@surgeons.org Website: www.surgeons.org