

# **Guidance notes on the completion of the JCST Trainee Assessment form**

1. The assessment form is CONFIDENTIAL once completed, and must be handled accordingly
2. Trainees are to complete the first section of the form **BEFORE** handing to their trainers.
3. It is a trainee's responsibility to ensure that a separate form is completed by each of their consultant trainers
4. It is a trainee's responsibility to ensure that a form (or forms) is completed at least every 6 months.
5. **THE FORM WILL BE RETURNED IF INCOMPLETE**

**Assessors must take into account the year / level of training that the trainee has reached and assess accordingly.**

Assessors are asked to put a X or ✓ in the appropriate column.

Assessors are to indicate any areas where improvements are necessary (requiring improvements does not necessarily mean a trainee will have to repeat training).

The columns below are not prescriptive but for guidance to how an assessment may differentiate between 'satisfactory' or 'in need of targeted training'. It is of overriding importance when completing this form and considering the performance of a trainee, that the trainee is judged in conjunction with the requirements of their specialty curriculum for their year of training and against the standards you would expect of their contemporaries. It is important that if deficiencies are identified these are evidence based and clearly noted.

**Trainers are recommended to complete the form in draft PRIOR to meeting with the trainee.**

<b>CRITERIA</b>	<b>Examples of performance which would be considered unsatisfactory</b>	<b>Examples of performance which would be considered Satisfactory</b>
<b>A. Clinical Skills</b>		
History Taking	Incomplete, inaccurate. Poorly recorded	Complete, orderly, perceptive
Physical Exam	Misses important physical signs, relies unnecessarily on investigations	Thorough, accurate, can elicit correct signs, recognises most significant findings
Investigations	Inappropriate, random, inability to interpret tests	Usually appropriate, good knowledge on interpreting tests
Diagnosis	Fails to interpret and synthesise symptoms, signs and investigations	Good knowledge with an orderly logical approach to differential diagnosis, good clinical memory
Judgement	Difficulty in managing emergencies, Fails to take appropriate action	Reliable, competent under pressure, asks for advice appropriately
Operative skill	Not at competency level for year of training, treats tissues roughly, requires significant guidance	Competent to carry out procedures as required by the level of training
After care	Fails to notice complications and acts inappropriately	Good awareness of complications, takes appropriate action

<b>CRITERIA</b>	<b>Examples of performance which would be considered unsatisfactory</b>	<b>Examples of performance which would be considered Satisfactory</b>
<b>B. Knowledge</b>		
Basic Science	Not aware of the basic sciences applicable to the clinical practice	Adequate knowledge of the basic science related to the relevant surgical specialty
Clinical	Does not have necessary clinical knowledge	Adequate clinical knowledge to make decisions appropriate to year of training

<b>CRITERIA</b>	<b>Examples of performance which would be considered unsatisfactory</b>	<b>Examples of performance which would be considered Satisfactory</b>
<b>C. Postgraduate Activities</b>		
Teaching	Appears uninterested in teaching. Contributes little to the education of juniors. Poor style	Competent and conscientious in teaching others, good style
Lecturing	Inadequate preparation , poor style	A good speaker, well prepared and has prepared for questions
Case presentation	Needs to be better organised and/or better prepared. Poor on history, signs, diagnosis and discussion	History and signs correct, good deductions.
Publications	Needs to complete writing up of a paper or thesis and to augment c.v. – no publications/presentations during period	Paper published or accepted for publication in a peer review journal or presentations at learned society during assessment period
Research	Not involved in research, poor grasp of statistic and research methods	Able to critically analyse, involved in research and publishing results
Audit	Avoids audit, inadequate presentation	Involved in audit, good audit presentation

<b>CRITERIA</b>	<b>Examples of performance which would be considered unsatisfactory</b>	<b>Examples of performance which would be considered Satisfactory</b>
<b>D. Attitudes</b>		
Reliability	Poor time keeping, attention to detail and continuing patient care	Conscientious time keeper and in respect of patient care
Self Motivation	Disorganised in work practices, needing constant organisation and does not seek opportunities to learn	Able to organise working routine without supervision, looks for opportunities to learn
Leadership	Gives mixed and/or unclear instructions. Others not willing to be guided by the trainee	Gives clear instructions, able to motivate others. Setting a good example. Guide actions or opinions of others
Team working	Does not work well in a team: works alone and / or for own goals rather than team ones	Good relationships with team members, strive towards a common goal by co-operation and combined effort
Administration	Did not carryout the range of administrative duties required of post. Production of documentation not timely	Carried out routine administration promptly and well. Has a good grasp of hospital management
Record Keeping	Inaccurate, insufficient information recorded, not timely, illegible	Accurate, inclusive and timely
Relationships & Communication with:		
a) Colleagues	Poor rapport with both senior and junior colleagues: difficult to work with	Willing to help even if personally inconvenienced, able to defuse problems in the surgical team. Easy to work with
b) Patients	Does not establish a rapport, increases patients anxieties	Caring attitude. Listens well, explains well and can allay patients fears
c) Other staff	Does not treat staff with respect. Is not approachable	Sound and professional yet approachable. Treats other with respect and is respected in return
Communication skills:		
a) informed consent	Gives inadequate details of procedures, risks and or alternatives. Is inappropriately persuasive	Able to obtain full informed consent, risks and alternatives explained clearly and well
b) Bereavement	Appears Casual; unfeeling	Sympathetic; empathetic
c) Breaking bad news	Inadequate explanations given; appears unsympathetic	Does in a sympathetic manner

The form is to be signed by trainer and trainee on completion.