# exams:Publications:Publications projects:AMC Branding and Word templates:2010-brand-review:files:Tools∩Çólogo:AMC_Main_Brandmark:AMC_Main_PMS_Logo:AMC_PMS5415_Logo.pngIntern training

# Term assessment form

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| Intern details | |
| Name: |  |
| AHPRA registration no.: |  |

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| This form is being completed for | |
| Mid-term | End-of-term |
| Intern self-assessment |  |

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| Term details | |
| From (dd/mm/yyyy): |  |
| To (dd/mm/yyyy): |  |
| Term name/number: |  |
| Organisation and Department / Unit where term undertaken: |  |

## About this form

The purpose of this form is to provide feedback to the intern on their performance and to support the decision about satisfactory completion of internship.

The form is to be completed by the term supervisor and by the intern (for self-assessment) at the mid-point in any term longer than five weeks and at the end of the term.

This form **has not been designed** for recruitment purposes and should not be used for such purposes.

## Instructions for interns

Complete this form before assessment meetings and discuss it with your supervisor at those meetings. Consider your strengths and areas where you could benefit from additional experience. Your self-assessment is not for submission.

## Instructions for supervisors

Complete and discuss the form with the intern. Consider the intern’s self-assessment and the observations of others in the discussion. The supervisor should:

1. Assign a rating for intern performance against each outcome statement. Note: assigning a rating of 2 or 4 indicates that the performance falls between the descriptions provided.
2. Use the ‘Not observed’ option where appropriate and note this for further action.
3. Complete an Improving Performance Action Plan (IPAP) when an intern requires remediation or additional support (e.g. when the intern is assigned ratings of 1 or 2 for one or more items.)
4. At the end-of-term assessment, assign a global rating of progress towards completion of internship. Review any existing remediation plan to determine if it is complete, or if ongoing actions are required.

## Relevant documents

The AMC document *Intern training – Assessing and certifying* completion*[[1]](#endnote-1)* will assist in completing this form. The form aligns with the Australian Medical Council and Medical Board of Australia’s Intern training – Intern outcome statements[[2]](#endnote-2).

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| Domain 1: Science and scholarship – The intern as scientist and scholar |

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| 1.1 **Knowledge:** Consolidate, expand and apply knowledge of the aetiology, pathology, clinical features, natural history and prognosis of common and important presentations at all stages of life. | | |  | Comments on Domain 1 |
| Rating: | Description: | Not observed: |  |
| 5 | Applies extensive knowledge to patient care. | |  |
| 4 |  | |  |
| 3 | Applies sound knowledge to patient care. | |  |
| 2 |  | |  |
| 1 | Demonstrates inadequate knowledge. | |  |

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| Domain 2: Clinical practice – The intern as practitioner |

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| 2.1 **Patient safety:** Place the needs and safety of patients at the centre of the care process. Demonstrate safety skills including effective clinical handover, graded assertiveness, delegation and escalation, infection control, and adverse event reporting. | | |  | 2.2 **Communication:** Communicate clearly, sensitively and effectively with patients, their family/carers, doctors and other health professionals. | | |
| Rating: | Description: | Not observed: |  | Rating: | Description: | Not observed: |
| 5 | Demonstrates all aspects of safe patient care. | |  | 5 | Communicates effectively in routine and difficult situations. | |
| 4 |  | |  | 4 |  | |
| 3 | Demonstrates most aspects of safe patient care. | |  | 3 | Communicates effectively in routine situations. | |
| 2 |  | |  | 2 |  | |
| 1 | Demonstrates unsafe patient care. | |  | 1 | Does not communicate effectively. | |

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| 2.3 **Patient assessment:** Perform and document a patient assessment - incorporating a problem focused medical history with a relevant physical examination **and** generate a valid differential diagnosis. | | |  | 2.4 **Investigations:** Arrange common, relevant and cost-effective investigations, **and** interpret their results accurately. | | |
| Rating: | Description: | Not observed: |  | Rating: | Description: | Not observed: |
| 5 | Performs and documents focused patient assessments for routine and complex patients. | |  | 5 | Identifies and arranges appropriate investigations and interprets investigations accurately | |
| 4 |  | |  | 4 |  | |
| 3 | Performs and documents focused patient assessments for routine patients. | |  | 3 | Arranges appropriate investigations and requires some guidance on interpretation. | |
| 2 |  | |  | 2 |  | |
| 1 | Performs unfocused or incomplete patient assessments and/or documentation. | |  | 1 | Arranges inappropriate investigations and/or interprets incorrectly. | |

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| 2.5 **Procedures:** Safely perform a range of common procedural skills required for work as an intern. | | |  | 2.6 **Patient management:** Make evidence-based management decisions in conjunction with patients and others in the healthcare team. | | |
| Rating: | Description: | Not observed: |  | Rating: | Description: | Not observed: |
| 5 | Performs procedures with a high degree of technical proficiency and sensitivity towards patients. | |  | 5 | Applies evidence, protocols and guidelines to manage routine and complex patients. | |
| 4 |  | |  | 4 |  | |
| 3 | Performs most common procedures in a technically safe and effective manner on routine patients. | |  | 3 | Applies evidence, protocols and guidelines to manage routine patients. | |
| 2 |  | |  | 2 |  | |
| 1 | Performs common procedures with limited technical proficiency and sensitivity to patients. | |  | 1 | Does not apply evidence, protocols and guidelines in patient management. | |

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| 2.7 **Prescribing:** Prescribe medications safely, effectively and economically, including fluid, electrolytes, blood products and selected inhalational agents. | | |  | 2.8 **Emergency care:** Recognise and assess deteriorating and critically unwell patients who require immediate care. Perform basic emergency and life support procedures, including caring for the unconscious patient and performing cardiopulmonary resuscitation. | | |
| Rating: | Description: | Not observed: |  | Rating: | Description: | Not observed: |
| 5 | Consistently prescribes and initiates therapy safely and adheres to all relevant protocols. | |  | 5 | Identifies deteriorating or critically unwell patients, initiates management, actively anticipates additional requirements and seeks appropriate assistance. | |
| 4 |  | |  | 4 |  | |
| 3 | Prescribes safely and adheres to relevant protocols in most situations and seeks assistance when needed. | |  | 3 | Identifies deteriorating or critically unwell patients, initiates basic management and seeks appropriate assistance. | |
| 2 |  | |  | 2 |  | |
| 1 | Makes frequent prescribing errors. | |  | 1 | Does not identify deteriorating or critically unwell patients or cannot initiate basic management correctly or does not seek appropriate assistance. | |

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| 2.9 **Information management:** Retrieve, interpret and record information effectively in clinical data systems (both paper and electronic). | | |  | Comments on Domain 2 |
| Rating: | Description: | Not observed: |  |
| 5 | Is diligent, timely and accurate in the use and recording of all information in clinical data systems. | |  |
| 4 |  | |  |
| 3 | Is consistent in recording information in clinical data systems with appropriate levels of detail and timeliness. | |  |
| 2 |  | |  |
| 1 | Does not record information in clinical data systems in an effective or timely manner. | |  |

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| Domain 3 – Health and society – The intern as a health advocate |

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| 3.1 **Population health:** Apply knowledge of population health, including issues relating to health inequities and inequalities; diversity of cultural, spiritual and community values; and socio-economic and physical environment factors. | | |  | 3.2 **Aboriginal and Torres Strait Islander health:** Apply knowledge of the culture, spirituality and relationship to land of Aboriginal and Torres Strait Islander peoples, to clinical practice and advocacy. | | |
| Rating: | Description: | Not observed: |  | Rating: | Description: | Not observed: |
| 5 | Advocates effectively for the health needs of different patient groups in patient care. | |  | 5 | Practises and advocates cultural safety for Aboriginal and Torres Strait Islander peoples. | |
| 4 |  | |  | 4 |  | |
| 3 | Considers the health needs of different patient groups in patient care. | |  | 3 | Practises cultural safety for Aboriginal and Torres Strait Islander peoples. | |
| 2 |  | |  | 2 |  | |
| 1 | Does not recognise the health needs of different patient groups in patient care. | |  | 1 | Disregards cultural safety for Aboriginal and Torres Strait Islander peoples. | |

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| 3.3 **Comorbidities:** Demonstrate ability to screen patients for common diseases, provide care for common chronic conditions, and effectively discuss healthcare behaviours with patients. | | |  | 3.4 **Quality assurance:** Participate in quality assurance, quality improvement, risk management processes, and incident reporting. | | |
| Rating: | Description: | Not observed: |  | Rating: | Description: | Not observed: |
| 5 | Identifies all comorbidities and initiates appropriate management. | |  | 5 | Advocates for and actively participates in quality improvement activities and incident reporting. | |
| 4 |  | |  | 4 |  | |
| 3 | Identifies common comorbidities and initiates satisfactory management. | |  | 3 | Participates in quality improvement activities and incident reporting. | |
| 2 |  | |  | 2 |  | |
| 1 | Disregards the potential for comorbidities and/or is unable to initiate management. | |  | 1 | Does not participate in quality improvement activities and fails to report incidents. | |

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| Comments on Domain 3 |

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| Domain 4 – Professionalism and leadership – The intern as a professional and leader |

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| 4.1 **Professionalism:** Provide care to all patients in accordance with Good Medical Practice: A Code of Conduct for Doctors in Australia*[[3]](#endnote-3)*, and demonstrate ethical behaviours and professional values including integrity, compassion, empathy and respect for all patients, society and the profession. | | |  | 4.2 **Self-management:** Optimise their personal health and wellbeing, including responding to fatigue, managing stress and adhering to infection control to mitigate health risks of professional practice. | | |
| Rating: | Description: | Not observed: |  | Rating: | Description: | Not observed: |
| 5 | Behaves in a highly professional manner and is a role model for others. | |  | 5 | Manages the impact of work on personal health and wellbeing and actively supports others. | |
| 4 |  | |  | 4 |  | |
| 3 | Behaves in a professional manner and occasionally needs assistance when under stress. | |  | 3 | Manages the impact of work on personal health and wellbeing. | |
| 2 |  | |  | 2 |  | |
| 1 | Behaves in a manner that demonstrates disregard for professional standards. | |  | 1 | Demonstrates impaired professional performance or other evidence of poor self-care. | |

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| 4.3 **Self-education:** Self-evaluate their professional practice, demonstrate lifelong learning behaviours, and participate in educating colleagues. | | |  | 4.4 **Clinical responsibility:** Take increasing responsibility for patient care while recognising the limits of their own expertise and involving other professionals as needed to contribute to patient care. | | |
| Rating: | Description: | Not observed: |  | Rating: | Description: | Not observed: |
| 5 | Demonstrates reflective practice and seeks opportunities for on-the-job learning and teaching of others. | |  | 5 | Demonstrates sound judgement and accountability that enables greater responsibility and autonomy. | |
| 4 |  | |  | 4 |  | |
| 3 | Is able to self-evaluate and articulate personal learning goals. | |  | 3 | Demonstrates initiative and takes responsibility within the limits of expertise. | |
| 2 |  | |  | 2 |  | |
| 1 | Lacks insight into learning needs and does not seek or act on feedback. | |  | 1 | Lacks insight into limitations and requires continued close supervision. | |

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| 4.5 **Teamwork:** Respect the roles and expertise of other healthcare professionals, learn and work effectively as a member or leader of an inter-professional team, and make appropriate referrals. | | |  | 4.6 **Time management:** Effectively manage time and workload demands, be punctual and show ability to prioritise workload to manage patient outcomes and health service functions. | | |
| Rating: | Description: | Not observed: |  | Rating: | Description: | Not observed: |
| 5 | Works effectively as a member or leader of the inter-professional team and positively influences team dynamics. | |  | 5 | Effective management and high work output without undue personal stress. | |
| 4 |  | |  | 4 |  | |
| 3 | Works effectively as part of the inter-professional team. | |  | 3 | Effective management and prioritisation of most tasks and may need assistance during very busy times. | |
| 2 |  | |  | 2 |  | |
| 1 | Works in a way that disrupts effective functioning of the inter-professional team. | |  | 1 | Unable to manage and prioritise tasks in a timely manner resulting in task build-up. | |

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| Comments on Domain 4 |

## Does an Improving Performance Action Plan (IPAP) need to be completed?

Yes  No

Please refer to the instructions on page 1. An Improving Performance Action Plan (IPAP) template[[4]](#endnote-4) is available on the AMC website.

## Global rating (required only for the end-of-term assessment)

Assign a global rating of progress towards completion of internship. In assigning this rating consider the intern’s ability to practise safely, work with increasing levels of responsibility, apply existing knowledge and skills, and learn new knowledge and skills during the term.

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| Global rating | |
| Satisfactory | The intern has met or exceeded performance expectations in the term. |
| Borderline | Further information, assessment and/or remediation may be required before deciding that the intern has met performance expectations. |
| Unsatisfactory | The intern has not met performance expectations in the term. |

## Please comment on the following:

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| Strengths |
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| Areas for improvement |
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## Supervisor

### Name (print clearly)

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### Signature

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### Position

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### Date

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| Day | |  | | Month | | |  | | Year | | | | |

## Intern

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| --- | --- |
| I (insert name) |  |

confirm that I have discussed the above report with my assessor and know that if I disagree with any points I may respond in writing to the Director of Clinical Training within 14 days.

### Signature

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### Date

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| Day | |  | | Month | | |  | | Year | | | | |

## Director of Clinical Training

### Name (print clearly)

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|  |

### Signature

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|  |

### Date

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| Day | |  | | Month | | |  | | Year | | | | |

## Director of Clinical Training comments

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## Return of form

Please forward to (contact person, department):

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## Relevant documents

Relevant documents are available on the AMC website <http://www.amc.org.au/index.php/ar/psa>

1. Intern training – Assessing and certifying completion [↑](#endnote-ref-1)
2. Intern training – Intern outcome statements [↑](#endnote-ref-2)
3. Good Medical Practice: A Code of Conduct for Doctors in Australia [↑](#endnote-ref-3)
4. Improving Performance Action Plan (IPAP) template [↑](#endnote-ref-4)