



PROFESSIONAL HEALTHCARE RECRUITMENT LTD

ASSESSMENT OF LOCUM APPOINTMENTS OF ONE WEEK OR LONGER

DOCTOR'S NAME: **GMC NO** **GRADE** (*this post*).....

SPECIALTY: **PERIOD:** **UNIT:**

Please tick the appropriate boxes:

| | ABOVE AVERAGE | AVERAGE | BELOW AVERAGE | UNACCEPTABLE |
|-------------------------------------|---------------|---------|---------------|--------------|
| CLINICAL SKILLS | | | | |
| 1. History Taking | | | | |
| 2. Physical Examination | | | | |
| 3. Investigations and Diagnosis | | | | |
| 4. Judgement and Patient Management | | | | |
| 5. Practical Skill | | | | |
| KNOWLEDGE | | | | |
| 6. Basic Science | | | | |
| 7. Clinical | | | | |
| ATTITUDES | | | | |
| 8. Reliability | | | | |
| 9. Leadership and Initiative | | | | |
| 10. Administration | | | | |
| 11. Time Keeping | | | | |
| RELATIONSHIPS | | | | |
| 12 a) Colleagues | | | | |

| | | | | |
|----------------------------|--|--|--|--|
| 12 b) Patients | | | | |
| 12 c) Other Staff | | | | |
| 12 d) Communication Skills | | | | |
| PERSONAL QUALITIES | | | | |
| 13. Appearance | | | | |
| 14. Integrity | | | | |
| 15. Manners | | | | |

Does this Doctor have any training needs that you have identified?

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Comments by Reporting Doctor:

NAME OF REPORTING DOCTOR:

Signed **Date**

STATEMENT BY LOCUM DOCTOR

I have seen the above Assessment Report and I agree/disagree with its contents. I have also seen the Guidance Notes on the completion of the Assessment Report.*

Signed

Name in CAPITALS

Statement by Locum Doctor (if desired)



**Please delete as appropriate*

NOTES ON COMPLETION OF THE ASSESSMENT MATRIX

Tick only one box in each row of the matrix. These guidelines may help in assessing the performance of the Locum Doctor. To be graded *average* or *above average* the Locum's performance must be consistent with that of doctors in substantive appointments at the grade. Reports showing serious shortcomings in the Locum Doctor's performance should be copied to the GMC.

| | ABOVE AVERAGE | AVERAGE | BELOW AVERAGE | UNACCEPTABLE |
|--|---|--|--|---|
| CLINICAL SKILLS | | | | |
| 1. History Taking | Precise, perceptive, comprehensive, well documented | Usually complete, orderly and systematic. | Often incomplete/ inaccurate and/or poorly recorded | Frequently incomplete, inaccurate and poorly recorded |
| 2. Physical Examination | Thorough, accurate, recognises and elicits physical signs | Usually elicits correct signs. Recognises most significant findings | Lacks basic skills and misses some signs. May misconstrue signs | Lacks basic skills. Frequently misses signs and/or misinterprets them |
| 3. Investigations and Diagnosis | Investigations almost always appropriate in relation to differential diagnosis. Excellent at interpretation. Excellent diagnostician. Excellent clinical memory. | Investigations usually appropriate. Good knowledge on interpreting tests relevant to the specialty. Competent clinician. Good knowledge with orderly logical approach to differential diagnosis. | Investigations may be inappropriate and are frequently unnecessarily expensive. Unable to interpret some tests. May fail to interpret symptoms and signs correctly. | Investigations inappropriate or incomplete. Fails to interpret tests correctly. Often fails to interpret symptoms and signs correctly. |
| 4. Judgement and Patient Management | Excellent clinician who is aware of his/her limits. Excellent ward and/or outpatient management. | Reliable and conscientious. Competent under pressure. Seeks advice appropriately. Good awareness for complications. | Sometimes unreliable and uninterested. May fail to grasp significance of findings or take appropriate action. May under or over react to emergencies. May fail to notice complications and/or act appropriately. May fail to recognise limitations and to seek advice when needed. | Often unreliable and uninterested. Fails to grasp significance of findings or take appropriate action. Often under or over reacts to emergencies. Fails to notice complications and/or act appropriately. Fails to recognise limitations and seek advice when needed. |
| 5. Practical Skill | Shows outstanding practical ability. | Competent. | Clumsy or rough. Can have difficulty in even the simplest procedures. | Clumsy and rough. Often has difficulty in even the simplest procedures |
| KNOWLEDGE | | | | |
| 6. Basic Science | Comprehensive and up to date knowledge and understanding of the basic science of the specialty. Widely read. | Adequate and up to date fund of knowledge. Relates this satisfactorily to patient care. | Reasonable though perhaps dated knowledge. Not always applied appropriately. | Uninterested. Does not read the literature. Fails to apply basic science knowledge to clinical problems. |
| 7. Clinical | Comprehensive and up to date knowledge and excellent application. Widely Read | Satisfactory knowledge for dealing with common disorders. May fail to "spot the rarity" but learns from experience. | Lacks appropriate knowledge or ability to apply it. May fail to learn from experience. | Lacks basic and/or essential knowledge. Unable to learn from experience. |
| ATTITUDES | | | | |

| | ABOVE AVERAGE | AVERAGE | BELOW AVERAGE | UNACCEPTABLE |
|-------------------------------------|--|--|---|---|
| 8. Reliability | Highly dependable and conscientious. | Dependable. Does not need reminding. Conscientious in patient care. | Occasionally unreliable. Forgets to do things (possibly to the detriment of patients). | Frequently unreliable. Likely to fail to do things (possible to the detriment of patients). |
| 9. Leadership and Initiative | Excellent team leader with great ability to motivate others. Shows initiative. Always takes responsibility. | Competent but lacks inspiration. Gives clear instructions. Usually shows initiative and takes responsibility. | Needs pushing and may fail to show initiative. | Very limited. Gives confusing instructions. No initiative. |
| 10. Administration | Well prepared and organised. Adapts to the hospital's management policies. | Well prepared and organised. Conscientious. Can be left confidently to deal with routine admin. | Often behind or neglects routine admin. | Cannot be bothered or slapdash. |
| 11. Time Keeping | Punctual and reliable. Will always contact the unit to warn of a problem. | Usually on time. Usually contacts the unit to warn of a problem. | Often late to the unit and to clinics. May not warn of a problem. | Frequently late to the unit and to clinics. Often fails to warn of a problem. |
| RELATIONSHIPS | | | | |
| 12 a) Colleagues | Willing to accommodate the working methods of the clinical team. Able to defuse problems in the team. An excellent colleague who fits in well. | Good rapport. Trusted. Easy to work with. Able to fit in with existing team. | Fails to fit in with seniors, peers or juniors. | Uninterested. Does not try to fit in with colleagues and may even undermine them. |
| 12 b) Patients | Inspires confidence. Establishes excellent rapport. Patients delighted to be looked after by him/her. | Sound, caring attitude. Can allay patient fears. Takes time. Trusted by the patient. | Does not put people at their ease. Lacks empathy. | Does not mean well. Rude. Patients do not want him/her as their doctor. Increases patient anxieties. |
| 12 c) Other Staff | Inspires loyalty and enthusiasm. | Sound and professional, yet approachable. Treats others with respect and is respected in return. | Careless of others. May generate rather than solve problems. | Rude and arrogant. Likely to cause problems. |
| 12 d) Communication Skills | Excellent communicator. Easily establishes rapport with patients. Encourages and enhances mutual understanding. | Good communication skills. Listens well and explains well, in appropriate language. Gives clear instruction. | Poor command of local language. Inarticulate and confusing; easily misunderstood. Does not listen or understand. Confuses patients with unnecessary technical terms. | Very poor command of local language. Unintelligible, inarticulate. Minimal explanatory skills. Fails to listen or understand. Can appear indifferent and/or patronising. |
| PERSONAL QUALITIES | | | | |
| 13. Appearance | Smart, appropriately dressed. Good personal hygiene. | Tidy, appropriate dress. Normal personal hygiene. | Untidy or inappropriate dress | Often scruffy. Generally poor personal hygiene. |
| 14. Integrity | Excellent | Good | Just acceptable | Suspect honesty or morals |
| 15. Manners | Always considerate and polite. | Generally good. Considerate. | Thoughtless, sometimes rude. | Rude and/or arrogant. |

