

**DEPARTMENT OF PAEDIATRICS – POSTGRADUATE EDUCATION
PAEDS PALLIATIVE CARE IN-TRAINING EVALUATION FORM**

RESIDENT: _____ PGY Level: _____ ROTATION & SITE: _____

ROTATION BLOCK/DATES: _____ ACAD.YR: _____

INTRODUCTION

Number of clinical days for this rotation (19 or 20) _____

Number of days resident was absent for ANY reason (excluding post-call days) _____

The resident must complete at least 15 days or 75% of the rotation or it will be considered INCOMPLETE.

MEDICAL EXPERT	Not Applicable	1 Does Not Meet Expectations	2 Borderline	3 Meets Expectations
a. Basic and Clinical Knowledge Demonstrates understanding of the tenets and principles of paediatric palliative care medicine and can apply this to different patient populations and clinical services. Understands pathophysiology of pain and symptoms commonly seen on palliative care service and has an approach to their management.				
b. History and Physical Examination Skills Demonstrates competency in completing a palliative care assessment including addressing pain and symptoms, psychosocial, and spiritual factors, and performing a complete and appropriate physical examination.				
c. Integration and Application Demonstrates ability to develop a comprehensive, patient-specific plan for management (including pain and symptom management) as patients' physical health declines and for the period at end of life. Identify issues in death and dying that are particular to children and adolescents while considering the impact different cultures, spiritual beliefs, and traditions may have.				
d. Clinical Judgment Accurately assesses patients and balances the risks and benefits of therapeutic interventions in individual cases. Seeks appropriate consultation from other health professionals/team members. Recognizes personal limitations and identifies boundary issues				
e. Ethics Identifies ethical issues as they arise and can discuss them in the context of the patient, family, and society.				
Overall Competence:				

Medical Expert: Please comment on Resident's STRENGTHS:

Medical Expert: Suggestions for IMPROVEMENT:

COMMUNICATOR	Not Applicable	1 Does Not Meet Expectations	2 Borderline	3 Meets Expectations

a. Establishment of Therapeutic Relationships. Develops rapport and trust with patients and families. Respects confidentiality and privacy. Attentive listener, responsive to non-verbal communication. Recognize that empathy can and caring can be expressed through both verbal and non-verbal communication.				
b. Implementation of Patient Centered Approach Respects differences in patient's/parent's beliefs, concerns, expectations, cultural context, gender and value systems and takes this information into consideration when developing therapeutic plans.				
c. Clarity of Communication and Explanations Demonstrates ability to explore and deliver sensitive information to patients, colleagues, and other professionals in a clear and understandable manner that encourages participatory decision making. Demonstrates ability to enter into conversations about goals of care including resuscitation goals of care.				
d. Ability to Reach Common Ground Demonstrates ability to reach a common understanding with patients and families and other health care providers regarding problems and plans. Engages in and encourages open discussion. Identify barriers to effective communication, and modify approach to minimize these barriers.				
e. Effectiveness of Verbal and Written Communication Maintains clear, accurate, and appropriate written or electronic records of patient encounters. Presents clear verbal reports of patient encounters. Effectively presents in rounds.				
f. Effective Counseling Demonstrates ability to counsel, support and guide a patient and family whose child's condition is deteriorating and or approaching end of life. . Able to counsel a family and patient (when appropriate) through a goals of care discussion. Provides psychosocial support to the child and his/her family facing the death of that child.				
Overall Competence:				

Communicator: Please comment on Resident's STRENGTHS:

Communicator: Suggestions for IMPROVEMENT:

COLLABORATOR	Not Applicable	1 Does Not Meet Expectations	2 Borderline	3 Meets Expectations
a. Inter-professional Team Collaboration Recognizes and respects the roles of other health care professionals. Works with inter-professional team to optimize patient care.				
b. Effectiveness of Working Relationships Demonstrates a respectful attitude to colleagues and members of the inter-professional health care team. Works collaboratively to address misunderstandings and negotiate shared solutions to difficult or challenging problems.				
Overall Competence:				

Collaborator: Please comment on Resident's STRENGTHS:

Collaborator: Suggestions for IMPROVEMENT:

MANAGER	Not Applicable	1 Does Not Meet Expectations	2 Borderline	3 Meets Expectations
a. Participation in Quality Management Is aware of issues surrounding health care funding, physician remuneration, and budget constraints.				
b. Individual Management Skills Demonstrates good time-management skills. Demonstrates ability to balance patient care responsibilities, self-directed learning, outside activities, personal commitments and career goals.				
c. Resource Allocation Demonstrates ability to reconcile patients' goals with available resources in the hospital and community and societal needs.				
Overall Competence:				

Manager: Please comment on Resident's STRENGTHS:

Manager: Suggestions for IMPROVEMENT:

HEALTH ADVOCATE	Not Applicable	1 Does Not Meet Expectations	2 Borderline	3 Meets Expectations
a. Patient Advocate Identifies needs of individual patients and identifies opportunities to advocate for patients to whom care is being provided. Assess the current state of paediatric palliative care in the region and provincially, including barriers to providing better care for the dying, including geographical, cultural and financial barriers.				
b. Community Advocate Describes the role of the specialist as an advocate for a community of practice. Works with patients and families and community agencies to obtain community services for end of life care and ongoing support.				
c. Determinants of Health/Quality of Life Demonstrates ability to discuss the determinants of health and identify issues that impact on the end of life care of children who may be vulnerable or marginalized. Reflect on the physical, mental, psychosocial and spiritual issues of the dying and their families and consider the impact on quality of life and the nature of suffering.				
Overall Competence:				

Health Advocate: Please comment on Resident's STRENGTHS:

Health Advocate: Suggestions for IMPROVEMENT:

SCHOLAR	Not Applicable	1 Does Not Meet Expectations	2 Borderline	3 Meets Expectations
a. Approach to Learning Identifies knowledge gaps and develops a self-learning plan to address gaps. Accepts personal responsibility for developing, implementing and monitoring personal learning. Curious and inquisitive.				
b. Critical Appraisal Applies the principles of critical appraisal to medical literature.				

<p>c. Facilitation of Teaching and Learning Gives an effective lecture or presentation. Gives and receives feedback. Identifies the learning needs of others and selects effective teaching strategies to facilitate learning of others. Incorporates evidence based decision making in caring for dying patients and their families</p>				
Overall Competence:				

Scholar: Please comment on Resident's STRENGTHS:

Scholar: Suggestions for IMPROVEMENT:

PROFESSIONAL	Not Applicable	1 Does Not Meet Expectations	2 Borderline	3 Meets Expectations
<p>a. Professional Practice Exhibits professional behaviours including honesty, integrity, commitment, compassion, respect and altruism. Committed to delivering the highest quality health care and maintaining competence.</p>				
<p>b. Sustainable/Ethical Practice Demonstrates knowledge of the principles of medical ethics surrounding communication, death and dying, palliative care. Describe strategies for managing your own stress and possible boundary issues in dealing with the dying. Considers ethical dilemmas in paediatric palliative care for each patient encounter.</p>				
<p>c. Commitment to Society Demonstrates knowledge of the professional, legal and ethical codes of practice. Demonstrates accountability for actions.</p>				
<p>d. Reflective Practice Recognizes the importance of a reflective practice by exploring personal experiences of death and dying in caring for palliative patients and their families. Accepts feedback and demonstrates willingness to change behaviour in response to feedback.</p>				
Overall Competence:				

Professional: Please comment on Resident's STRENGTHS:

Professional: Suggestions for IMPROVEMENT:

CONCLUSION (please put an 'X' in front of your choice):

- Passed**
- Incomplete**
- Failed**
- Requires review by Evaluation Committee**

***For the Evaluator to answer:**

Did you have an opportunity to meet with this trainee to discuss their performance?

- Yes
- No

***For the Evaluatee to answer:**

Did you have an opportunity to discuss your performance with your preceptor/supervisor?

Yes

No

Are you in agreement with this assessment?

Yes

No

Please enter any comments you have (if any) on this evaluation.

Completed by:

Name of Evaluator

Signature

Date

Read/reviewed by:

Name of Resident/trainee

Signature

Date