



Supervision report

RP3/RP5
For office use only
Registration No:

Please read before completing the supervision report

- A supervision report is to be completed and forwarded (through the medical staffing office if employed in a hospital) to the Council office every 3 months, or as often as requested by the Medical Council.
- Both the supervisor named on the practising certificate and the doctor being supervised need to sign the report. If another supervisor has completed this form on behalf of the named supervisor, the named supervisor must also co-sign the supervision report.
- Please provide a copy of this report to the Chief Medical Officer (CMO) or Practice Manager. They need to be aware of doctors who **are not performing at the standard required for their current level of appointment**.
- If you have marked any 1s or 2s on this report, Council is required to consider if the report is an unsatisfactory report. When a doctor under supervision receives an unsatisfactory report, that period of employment / supervision may not be counted towards meeting the requirements to be granted a general or a vocational scope of practice. **Please include comments about unsatisfactory performance on a separate sheet.**

Name of doctor under supervision:

Scope of practice: Provisional general (not interns) Special purpose – Locum tenens Provisional vocational

Area of medicine / vocational scope:

Employer:

Report covers work for the period:/...../..... to:/...../.....

Scheduled employment end date (if applicable):/...../.....

Has the doctor made any changes to their position, supervisor, or area of medicine during this period of supervision? yes
Is the doctor intending to make any changes in future? If yes, please provide an explanation on a separate sheet. no

	Below expected standard		Meets expected standard	Exceeds expected standard		Not observed
	1	2	3	4	5	
Clinical Knowledge and Skills						
Clinical knowledge (knowledge of common symptoms, drug doses and side effects, drug interactions, etc)						
Professional knowledge (knowledge of hospital procedures, policy, medico legal aspects)						
Clinical clerking (adequacy of detail in written records, legibility, accurate drug charting)						
History taking (ability to take history and perform physical examination, powers of observation)						
Relevant procedural skills (venesection, arterial blood gases, peak flows, etc)						
Clinical Judgement						
Diagnostic skills (identifies and prioritises patient problems)						
Patient management (synthesises data, makes appropriate management decisions, responds appropriately to call outs and provides emergency care as required)						
Time management (plans and organises work, sets goals and meets them, prioritises calls, seeks advice on priorities if needed)						

	Below expected standard		Meets expected standard	Exceeds expected standard		Not observed
	1	2	3	4	5	
Recognising limits (accurate assessment of own skills, refers and consults with others as required, takes responsibility for actions, notifies staff if expecting to be absent from duty)						
Patient Communication						
Communication skills (communicates effectively in English, clarity, logic of expression, quality of case presentation, etc)						
Ability to communicate with patients and families (listening skills, respect, avoidance of jargon, coping with antagonism)						
Sensitivity, ethical and cultural awareness (is aware of options and networks available to patients, treats patients as individuals, responds appropriately to different cultures encountered)						
Communication and Teamwork						
Ability to communicate with other healthcare professionals (ability to work in a multidisciplinary team and with all team members irrespective of gender, contributes effectively to teamwork)						
Initiative and enthusiasm (gets involved, able to identify needs of the job, follows up without being prompted, thinks and plans ahead, shows commitment, asks questions of supervisors)						
Takes responsibility for own learning (evidence of reading up on cases, attends seminars and teaching sessions, asks questions)						
Professional Attitudes and Behaviour						
Reliability and dependability (punctual, carries out instructions, fulfils obligations, complies with hospital policies, keep up to date with work including letters, arranging meetings)						
Ability to cope with stress, emotional demands and emergency situations (reports when stressed, shows coping skills)						
Personal manner (approachability, warmth, openness, rapport, etc)						

To be completed by supervisor:

Did you make your assessment by way of direct observation of the supervisee's practice? yes no

If not, please record how you are making your assessment below:

Please comment on the doctor's strengths, areas for improvement/advancement, and any credentialing of the supervised doctor during this reporting period (use a separate sheet if necessary):

Please discuss this report with the doctor being supervised and have them sign below. If you have not done so, please explain why:

Supervisor's name (please print): Reg #:

Supervisor's signature: Date:

To be completed by doctor under supervision: My signature indicates the supervisor has discussed this report with me. I would like Council to consider the following comments (please use a separate sheet if necessary):

Name (please print): Reg #:

Signature: Date: