**UCL MEDICAL SCHOOL**



## MBBS VISITING ELECTIVES 2017-18

**Clinical Placement Report Form**

*This Clinical Attachment Report Form is to be completed at the end of the elective by the Elective Supervisor and returned to* [*medsch.visitingelectives@ucl.ac.uk*](mailto:medsch.visitingelectives@ucl.ac.uk) *for a formal certificate of completion to be issued.*

STUDENT (Block Capitals):

HOSPITAL:

ELECTIVE SUPERVISOR:

PLACEMENT DATES: From:

To:

|  |  |  |
| --- | --- | --- |
| **Assessment of Performance** | **Grade** | **Rubric** |
| Communication Skills |  | A – Well above level expected  B – Above level expected  C – At level expected  D – Borderline  E – Fail |
| Clinical Method including examination and reasoning skills |  |
| Clinical Knowledge and Management |  |
| Professional attitude and teamwork |  |
| Approach to learning and attendance |  |
| Well organised and resilient under stress |  |
| **OVERALL PLACEMENT PERFORMANCE** |  |
| Satisfactory attendance | Yes/No |

|  |
| --- |
| **Feedback for the student** |
|  |

Completed by (please print): …………………………………………………………..

I confirm that the student completed …..weeks…….days of clinical placement time from ………… to………….

Signed: …………………………………………………………Date: ……………………………………….

Completed forms (original) should be returned to the Visiting Electives Team, MBBS Student Support Office, UCL Medical School, Gower Street, WC1E 6BT **OR** a scanned copy emailed to [medsch.visitingelectives@ucl.ac.uk](mailto:medsch.year6@ucl.ac.uk) **OR** the above contents copied into the body of an email and sent from the supervisor’s email address.

|  |  |
| --- | --- |
| * Clinical Attachment Report Anchor Statements | _Pic5 |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| * Category | | **Grade A** *(Well above level expected)* | **Grade B** *(Above level expected)* **Grade C** *(At level expected)* | | **Grade D** *(Borderline****)*** | **Grade E\*** *(Fail –referral to Faculty Tutor* |
| *Most students should match these statements* | | ***May need remedial support*** | ***Probably needs remedial support*** |
| Communication Skills | | * Highly flexible, informed approach to consulting, attends to narrative * Intelligible language, no jargon * Sensitive to patient’s pace & needs * Clinically highly accurate * Excels in info gathering and giving * Keeps excellent records | * Flexibility & structure appropriate * Intelligible language , no jargon * Well aware of patient’s pace, needs, ideas & expectations * Skilful at info gathering and giving/explaining * Keeps good records | * Some structure used * Clear language used, little jargon * Clinically accurate * Usually aware of patient’s needs, ideas and expectations * Keeps adequate records | * Generally inflexible &/or unstructured * Unclear with some jargon * Lacks awareness of patient’s needs * Some inaccuracies /omissions in records | * Uses jargon / lacks clarity * Clinically inaccurate & unfocussed * Insensitive Inflexible * Little evidence of active listening * Poor records |
| Clinical Method inc. Examination & Reasoning Skills | | * Thorough, systematic & fluent   examination   * Consistently high competence at eliciting signs * Always applies accurate early diagnostic hypotheses * Quick, sensible reasoning | * Competent at eliciting signs * Systematic & fluent examination * Applies accurate early diagnostic hypotheses * Sensible interpretation &   reasoning | * Systematic examination * Applies acceptable early diagnostic hypotheses & interpretation of   symptoms/signs   * Adequate reasoning with prompting | * Patchy clinical skills , significant gaps/ lacking fluency/speed * Poor at eliciting &/or interpreting symptoms/signs- * Inappropriate diagnostic hypotheses with some incorrect reasoning even when prompted | * Poor clinical skills, disorganised/ rough * Applies no clear diagnostic hypotheses * Muddled clinical reasoning * Cannot respond to prompting |
| Clinical knowledge & Management | | * Exceptionally knowledgeable across all areas * Safe & evidence based * Always makes clear and realistic plans for investigation and management | * Good level of scientific & clinical knowledge * Safe and well informed * Sensible plans for investigations and management | * Acceptable level of knowledge * Safe and adequately informed * Makes acceptable plans for investigations and management | * Significant gaps in knowledge * Choice of investigative or management options patchy or inappropriate | * Weak and uninformed * Potentially risky or dangerous gaps in therapeutics /management planning * Inadequate strategies for investigations or management |
| Professional Development & Attitudes | Approach to learning & punctuality / attendance | * Exceptional involvement in developing own learning * Always appropriately confident * Shows exceptional insight & ability to reflect, knows own limits * Anticipates feedback * Excellent attendance/punctuality * 100% attendance + evidence of extra effort | * Good involvement in own learning & attendance * Appropriately confident for stage & ability - * Shows good insight & reflects on own performance * Responds swiftly to feedback * 100% attendance as expected | * Acceptable involvement in own learning * Reasonable confidence for stage * Shows insight with prompting * Responds to feedback * Near 100% attendance (only a few accounted for absences) | * Diffident / lacking confidence **OR** * Inappropriately overconfident /assertive * Shows limited insight and ability to reflect * Only responds to feedback with prompting * Some unexplained absences &/or lateness | * Shows little interest * No idea regarding own ability * Resistant to feedback * Frequent unexplained * absences/lateness * <70% attendance for whatever reason is not sufficient to sit Finals – automatic referral to Faculty Tutor |
| Professional attitudes & teamwork | * Excellent attitude to others * Always behaves with maturity * Show initiative & caring * Shows good insight into ethical dimensions | * Good attitude to others - interacts well * Behaves appropriately and sensitively with staff and pts * Shows insight into ethical dimensions | * Acceptable attitude to pts and staff , similar to most students * Sound understanding of ethical dimensions in most cases | * Tolerable attitude to others * Some problems relating to staff * Lack of caring * Poor rapport * Patchy ethical awareness | * Unacceptable attitude to others * Insensitivity to pts’ feelings * Rude to staff * Concerns re: fitness to practice : **CONSIDER ISSUNG SERIOUS CONCERN FORM** |
| Coping/ resilience | * Exceptionally organised * Highly resilient under stress * Shows leadership in uncertain situations * Balances competing demands | * Good organisation skills * Copes well under pressure * Tolerates uncertainty * Understand need to prioritise | * Appropriate organisation skills * Generally copes in stress * Shows acceptable ability to prioritise | * Frequently Disorganised * Dithers in the face of stress & uncertain situations | * Cannot organise workload or time * Anxious - avoids all stressful situations * Averse to risk and complex situations |