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PERFORMANCE REPORT

TO ASSESS SUPERVISORY REQUIREMENTS FOR PHYSICIANS LICENSED IN
YUKON UNDER A SPECIAL LICENCE

Physician's Name: _____

Supervisor's Name: _____

Location: _____

Initial Hire: _____ Review Date: _____

Period of Supervision covered by this report: _____

* Confidential When Completed *

The Yukon Medical Council requires supervisors of Special Licence holders to complete this assessment report after the first 3 months of supervision and every 3 months afterwards if the supervisory period has not been removed.

A rating scale from 1 to 7 has been provided for most answers (see table on Page 2 for details). Please mark the appropriate rating and if you would like to expand on an answer please use the space provided under 'Comments'.

Rating	Description	General Definition
1	Very unsatisfactory	Performance seldom meets professional standards and expectations
2	Unsatisfactory	Performance inconsistently meets professional standards and expectations
3		Professional standards and expectations are usually met
4	Fully satisfactory	Performance regularly meets professional standards and expectations
5		Professional standards and expectations are consistently met and sometimes exceeded
6	Consistently exceeds expectations	Performance consistently exceeds professional standards and expectations
7	Outstanding	Performance far exceeds professional standards and is easily differentiated as being far above expectations
n/a	Not applicable Or Not Able to Assess	Physician was not involved in the subject matter during the period of supervision, or the assessor was not able to assess this activity during the period of supervision. Please add an explanation under 'Comments'.

PART 1 - PROFESSIONAL COMPETENCY

Internal Medicine

1	2	3	4	5	6	7	n/a
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Comments: _____

Surgery

1	2	3	4	5	6	7	n/a
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Comments: _____

Pediatrics

1	2	3	4	5	6	7	n/a
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Comments: _____

Psychiatry

1	2	3	4	5	6	7	n/a
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Comments: _____

Obstetrics

1	2	3	4	5	6	7	n/a
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Comments: _____

Gynaecology

1	2	3	4	5	6	7	n/a
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Comments: _____

**Preparation of Clinical Notes
and Documents**

1	2	3	4	5	6	7	n/a
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Comments: _____

Referrals to Specialists

1	2	3	4	5	6	7	n/a
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Comments: _____

Overall Assessment:

Ability to appropriately apply knowledge and skills (take into consideration

the relevant impacts of the various competency components).

1	2	3	4	5	6	7	n/a
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Comments: _____

PART 2 – BEHAVIOUR AND FITNESS

Physician displays adequate and appropriate behavior towards patients

1	2	3	4	5	6	7	n/a
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Comments: _____

Physician displays adequate and appropriate behavior towards staff

1	2	3	4	5	6	7	n/a
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Comments: _____

Physician displays adequate and appropriate behavior towards colleagues

1	2	3	4	5	6	7	n/a
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Comments: _____

Physician's understanding of the Canadian Medical Association's Code of Ethics

1	2	3	4	5	6	7	n/a
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Comments: _____

English language skills: Clarity of communication (clearly articulated; understood by staff, patients, colleagues and supervisor; appropriate use of language etc.)

1	2	3	4	5	6	7	n/a
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Comments: _____

Have you observed any condition (drug abuse, alcohol abuse, physical disease, psychiatric disease or other stressors) that impairs the physician's performance and ability to practice? If yes, please explain

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Yes

No

Comments: _____
