

Results - [REDACTED]

Station	Consultant Skills Domains						Performance
	Decision making and prioritising	Knowledge	Management of complexity	Professional Approach	Safety and Risk Management	Communication	
1. Critical Appraisal	✓	✓	✓	✓	✓	✓	Meets competence
2. Safe Prescribing	⚡	⚡	⚡	⚡	⚡	⚡	Above competence
3.	⚡	✓	⚡	⚡	⚡	⚡	Above competence
4.	●	✓	✓	✓	✓	✓	Development needed to achieve competence
5.	✓	✓	✓	✓	✓	✓	Meets competence
6.	✓	⚡	⚡	⚡	⚡	✓	Above competence
7.	✓	✓	●	✓	●	●	Development needed to achieve competence
8.	⚡	✓	✓	✓	✓	⚡	Meets competence
9.	⚡	⚡	⚡	⚡	⚡	⚡	Above competence
10.	✓	✓	⚡	✓	✓	✓	Meets competence
11.	✓	⚡	⚡	✓	✓	✓	Meets competence
12.	✓	✓	✓	✓	✓	✓	Meets competence

Legend

- ⚡ Well above expected standard
- ✓ Performed at expected standard
- Requires further development

Feedback comments

1. Critical Appraisal

You communicated very well and critically evaluated the paper, looking at impact of the selection process, bias, power of study, exclusion and inclusion criteria and wide age range and temperature at one hour and the clinical significance of it. You said that it will not change your management, which I agree with, and you talked about the safety and you had a professional approach to it. You sated your limitation in what ANOVA means and would benefit by studying or learning about methods of comparing groups in study design and its impact. You would benefit by consolidating you appraisal skills in attending journal club but overall well done.

2. Safe Prescribing

Correct prescription writing though started with maintenance fluid of 120 mgs/kg though corrected it to 100mls/kg on prompting. Good explanation to parents about all side effects and confident about how to manage the high Gent level. Good management of shock and change to Ceftriaxone high dose. Came across as confident.

3.

A very competent approach to this complex case. You broke down the scenario into different areas which you managed appropriately. You knew this was a legal case of underage sexual activity with an older man and knew that the safeguarding issues over-rode the consent of Jade. However you also knew that gaining her trust and confidence was the best way forward. Look up Fraser and Gillick competencies.

4.

You had a rational approach to a busy paediatric ward and prioritising urgent situations/tasks. You did send your junior team to sort out a few things, but they could be used better to sort out urgent stuff: ST4 could speak to PICU/anaesthetics etc. and sort out transfer for the seizing child. You needed prompting with regards to identifying the sicker child with a potential sickle cell crisis who probably needs a consultant to review and sort things. That child may also need to be discussed with seniors and legal team's input before clinical deterioration. Sick patients need urgent input but not necessarily always by the consultant.

5.

You showed sound knowledge of medical management of such cases and your approach to all agencies involved was sensible. You offered to come to the hospital and review the child yourself and using SBAR method when talking with the consultant surgeon colleague was good.

6.

Excellent structured approach. Considered open access arrangements. Good objectives with action plan for various team members. Ensure dissemination of the report to all and consider having secretarial support at the meeting to minute, type up and disseminate plan.

7.

Overall borderline performance. Would discuss with psychiatrist of need for admission, plan of action, getting psych nurse help etc. However, need to discuss with ward sister, involving legal team, social services etc. for EPO, should it be necessary - did not come spontaneously and needed to be eked out. Looking at Security issues also needed prompting, however very safe and knowledgeable about clinical management. Suggest refresh regarding NICE and local guidelines re management of anorexia nervosa.

8.

You were able to tackle this scenario very well. I think you needed prompting about whether what Dr Pavos did was right or wrong. You really needed to mention the word probity. You asked Jean why she did not challenge Dr Pavos at the time and this is excellent. I think this is a very serious matter and I did get the feeling that you were able to bring this out. It should be a critical incident and also for discussion in his appraisal. The WHO has guidelines on live birth and the GMC on how to behave with poorly performing colleagues. You could use this as a prompt to educate the team.

9.

Excellent performance. You thought about all the issues in question and managed brilliantly. Well done!

10.

You clearly articulated the operational remedies of the situation discussed. You had solutions that were practical and pragmatic. Patient safety was discussed by you and discussion about the use of all available resources was adequate. Your communication style was clear.

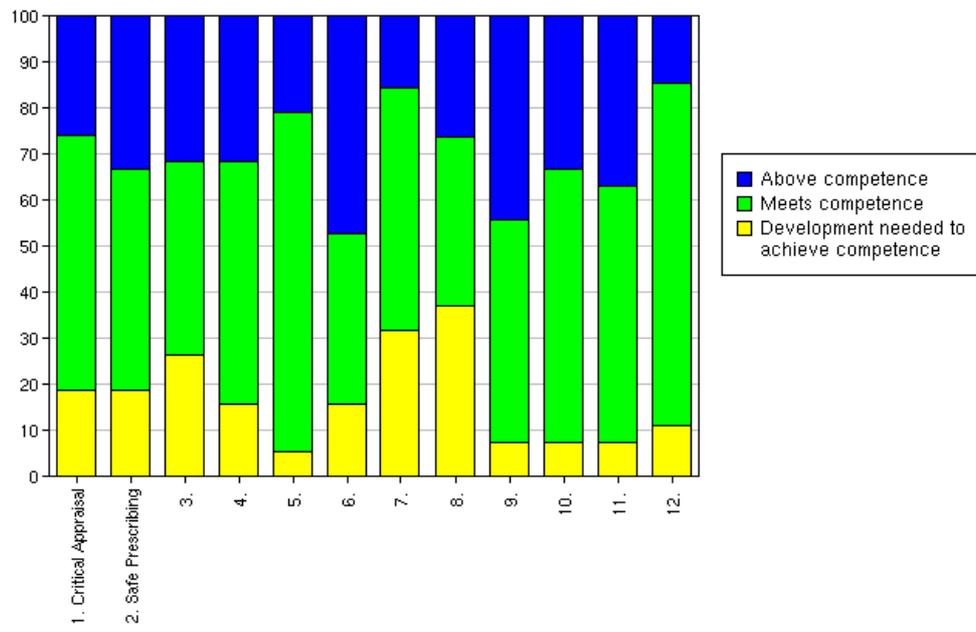
11.

You chose an appropriate topic and had a good interactive discussion about the assessment of the child with bronchiolitis. There wasn't enough time then to cover management or summarise so you might have been better to decide to concentrate on this one aspect. You started well by checking the students' prior knowledge. You have a good calm approach but with authority reflecting your knowledge and experience.

12.

You have good understanding of all the issues in this scenario, including duty of candour, need to prioritise and facilitate patient care. You have good understanding of critical incidence reporting and PALS. You understand the training needs of junior doctors in this situation. You needed a few prompts to help discuss and demonstrate your clinical knowledge and understanding of clinical governance issues. Well done overall.

Overall performance ratings awarded by station



Consultant Skills Ratings

