

**RESIDENT EVALUATION OF
PRECEPTOR**

NAME OF ROTATION: _____

ROTATION DATES: _____

NAME OF RESIDENT: _____

NAME OF PRECEPTOR: _____

During the rotation, the preceptor(s):

	N/A	1	2	3	4
Discussed the learning objectives and expectations at the beginning of the rotation and collaborated with the resident to develop specific goals and objectives	<input type="checkbox"/>	<input type="checkbox"/> No discussions occurred regarding objectives and expectations	<input type="checkbox"/> Some objectives and expectations were reviewed, others not well described OR reviewed late in the rotation	<input type="checkbox"/> Majority of the objectives and expectations were reviewed and discussed in an appropriate time frame	<input type="checkbox"/> All objectives and expectations were clearly defined during first few days. Additional objectives as defined by the resident's own learning plans also discussed
Organized the rotation in a structured manner and planned activities to meet the rotation and the resident's objectives	<input type="checkbox"/>	<input type="checkbox"/> Rotation not organized well. Activities were not planned. or did not meet the needs of the rotation and/or resident	<input type="checkbox"/> Some activities were appropriately selected while some were inappropriate to achieve the rotation objectives	<input type="checkbox"/> Majority of the activities were tailored to meet the individual learning needs of the resident and supported achievement of the rotation objectives	<input type="checkbox"/> All activities were tailored to the level of the resident's knowledge and supported the achievement of the defined objectives

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	N/A	1	2	3	4
Introduced the resident to appropriate staff and provided an orientation to the practice area	<input type="checkbox"/>	<input type="checkbox"/> Introductions and unit orientation were not completed	<input type="checkbox"/> Introductions to some staff only and orientation to the practice area was incomplete	<input type="checkbox"/> Majority of staff were introduced; orientation was completed	<input type="checkbox"/> All staff were introduced. Practice area orientation was extensive including various affiliated units (as appropriate)
Set dedicated time for resident teaching, observation and assessment	<input type="checkbox"/>	<input type="checkbox"/> There was no time for teaching and observing. Assessments were not completed	<input type="checkbox"/> Some time was available but not consistently. Assessments were not completed in a timely manner	<input type="checkbox"/> Time was usually available on a daily basis. Most assessments were provided in a timely manner, within 7 days after the end of the rotation	<input type="checkbox"/> Time was consistently available on a daily basis. Activities were planned in advance. All assessments completed by the last day of the rotation
Has good therapeutic knowledge to teach and explained concepts clearly and understandably to the resident	<input type="checkbox"/>	<input type="checkbox"/> Explanations were not clear or easy to understand.	<input type="checkbox"/> Some common concepts were explained well. Complex topics required clarification	<input type="checkbox"/> All common concepts were thoroughly explained. Most complex concepts were usually explained well. Additional resources were used to supplement resident's learning	<input type="checkbox"/> All common and complex topics were clearly explained. Additional resources were used to supplement resident's learning. Resident was encouraged to ask for clarification
Used a variety of teaching skills (direct instruction, modelling,	<input type="checkbox"/>	<input type="checkbox"/> Teaching skills were not demonstrated to	<input type="checkbox"/> Some teaching skills were demonstrated to	<input type="checkbox"/> Most teaching skills were used to promote	<input type="checkbox"/> A variety of teaching skills were

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	N/A	1	2	3	4
coaching, facilitation) to promote the resident's understanding of information		promote the resident's learning on the rotation	promote the resident's learning but not consistently. Mainly direct instruction was used	the resident's learning. A balance of direct instruction, modelling, coaching and facilitation were appropriately used	masterfully used consistently and adapted based on the resident's learning needs throughout the rotation
Listened and responded to the resident's thoughts and ideas	<input type="checkbox"/>	<input type="checkbox"/> Listening skills were not demonstrated to promote the resident's learning on rotation	<input type="checkbox"/> Listening skills were inconsistently demonstrated. May not respond to resident's needs	<input type="checkbox"/> Consistently demonstrated listening skills. Majority of resident's needs were addressed	<input type="checkbox"/> Active listening skills always demonstrated. Resident felt heard; resident's thoughts and ideas were considered
Completed assessments at midpoint (informal) and at the end of the rotation (formal)	<input type="checkbox"/>	<input type="checkbox"/> No assessments were completed during the rotation	<input type="checkbox"/> Some aspects of assessment were conducted in a non-formal manner and / or were not completed	<input type="checkbox"/> Most assessments were provided in verbal or written format (as required). Assessments were completed within 7 days of the end of the rotation. Resident was able to discuss openly with preceptor	<input type="checkbox"/> All assessments were provided in verbal or written format (as required) in a timely manner. Assessments were completed on the last day of the rotation. Resident was encouraged to discuss openly with preceptor
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	N/A	1	2	3	4
Provided feedback consistently highlighting areas of strength and areas for improvement		Areas of strength / improvement were not discussed	Feedback was not timely, consistent or specific. Areas of strength / improvement were briefly discussed	Feedback was consistently provided. Areas of strength / improvement were usually discussed with specific examples. Some defined steps and suggestions for improvement were identified	Feedback was timely, consistent and specific. Areas of strength / improvements were always discussed using concrete examples. Resident was asked to self reflect and guided towards an action plan (if appropriate)
Demonstrated a patient-centred practice, respectful, empathetic and compassionate care with patients	<input type="checkbox"/>	<input type="checkbox"/> Does not demonstrate compassionate and respectful patient-centred care	<input type="checkbox"/> Demonstrates compassionate and respectful care in some situations but not all. Patient's goals inconsistently considered	<input type="checkbox"/> Consistently demonstrates compassionate and respectful care to all patients	<input type="checkbox"/> Consistently demonstrates compassionate and respectful patient-centred care for all patients. Advocates for patient's goals. Engages resident in discussion on shared decision-making
Demonstrated collaborative communication skills and professional relationships with colleagues and members of interprofessional teams	<input type="checkbox"/>	<input type="checkbox"/> Demonstrates lack of professionalism when interacting with peers and other team members	<input type="checkbox"/> Demonstrates professionalism when interacting with some team members but not others OR inconsistently	<input type="checkbox"/> Demonstrates professionalism when interacting with peers and all team members consistently	<input type="checkbox"/> Promotes collaboration and professional relationships with inter- / intra-professional teams.

	N/A	1	2	3	4
					Respected by team members
Demonstrated professional values and ethics such as honesty and integrity	<input type="checkbox"/>	<input type="checkbox"/> Demonstrates lack of professional values and / or unethical behaviour	<input type="checkbox"/> Usually models professional values and ethics	<input type="checkbox"/> Consistently models high standards for professional values and ethics. May engage resident in discussions around ethical issues	<input type="checkbox"/> Consistently models exemplary professional values and ethics. Engages resident in discussions around ethical issues. Is a role model

Note: expected level is 3 in each domain

Overall the preceptor:

	1	2	3	4
Was an effective educator and role model	<input type="checkbox"/> Failed to teach resident. Is not a role model	<input type="checkbox"/> Teaching skills are developing OR lacks confidence to be a preceptor	<input type="checkbox"/> Teaching skills are consistently effective. Resident was appropriately challenged. Preceptor was a good role model	<input type="checkbox"/> Exceptional teaching skills to promote critical thinking in the resident. Preceptor was an exemplary role model



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*Please share any other comments / suggestions:

Resident Signature: _____ Date: _____

Preceptor Signature: _____ Date: _____

Residency Coordinator: _____ Date: _____

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