





ASTEM Structured Reference Form 2024

- 1. The Reference Report Form is CONFIDENTIAL once completed and must be handled accordingly.
- 2. The following guidelines are for trainers completing the form:
- Complete as fully as possible the trainee details in the first section.
- Where more than one trainer is involved with the trainee a consensus opinion should be expressed on the form which should be signed by all trainers.
- Complete the main assessment by placing an '\(\mathbf{\scale}\)' in one box against each criterion. The following guidelines should to be used when assessing each category.

Note: All information contained in this document is deemed to be a record held by ICEMT and is subject to the provisions of the Freedom of Information Acts 1997 and 2003

ADVANCED SPECIALIST TRAINING PROGRAMME IN EMERGENCY MEDICINE STRUCTURED REFERENCE REPORT FROM A RECENT CLINICAL POST JULY 2023 INTAKE

(One of the five required referees must be from your current post)

This is an important and official document, which will be used as part of the selection process for Advanced Specialist Training in Emergency Medicine. Following completion you should forward it to Ms. Orla Mockler, Senior Team Lead, Emergency Medicine Training, The Royal College of Surgeons in Ireland, 121 St. Stephens Green Dublin 2.

Trainee name:		
Referee Name		
Hospital:		
Specialty:		
Post Start Date:		
End Date:		

Notes:

- Complete the form by placing an '✓' in one box against each assessment. A "satisfactory" grade indicates that the trainee performed according to reasonable expectations but was no better and no worse than average. The majority of trainees would be expected to score "satisfactory"
- Trainers who award a "Poor" or "Excellent" grade should clarify why this grade is being awarded in the "Overall Comments" section below
- This form is accompanied by a list of grading descriptors to assist trainers in grading the trainees.
- When assessing trainees the trainer should consider the trainee's performance in all of the domains in which he or she works.

Any attempt to provide misleading or false information to improve your reference score will result in automatic disqualification.

A. Clinical Skills	Poor	Deficient	Satisfactory	Above Average	Excellent
History Taking					
Physical Examination					
Diagnostic Investigations					
Diagnostic Skills					
Clinical Judgement					
Technical Skills					
B. Professional Development	Poor	Deficient	Satisfactory	Above Average	Excellent
Teaching Activities					
Clinical Audit					
Presentations					
Research					
C. Personal Skills	Poor	Deficient	Satisfactory	Above Average	Excellent
Communication					
Teamwork					
Leadership					
Self Awareness and Insight					
Motivation and Drive					
Disposition and Appearance					
Management of Stress and Workload					
Management of Crises					
Reliability					

D.	Relationships	Poor	Deficient	Satisfactory	Above Average	Excellent
Med	lical Colleagues					
Nurs	sing and Paramedical Staff					
Pati	ents and Relatives					
			l	I		
Did oost	this doctor perform well in this			Vorumell	Satisfactory	Door
Vοι	uld you be happy to work again wi	th this doctor?		Very well	Satisfactory	Poor
				Yes	No	
com	our knowledge has this candidate plaints process/ investigation relaise provide more details under the	ating to a patie	nt incident? If yes,	Yes	No	
	ou think this doctor is suitable for					
	this doctor any outstanding chara			Yes	Unsure	No
nave	u have any further comments/cor e not been covered above, please ner correspondence.					
	al Assessment					
	ase indicate on scale of 1-10 years suitability for Advanced S					

(10 = strongest possible support; 1 = very little support)

Signature:

Date:

A. Clinical Skills	Poor / Deficient	Satisfactory	Above Average / Excellent
History taking	Incomplete, inaccurate, poorly recorded.	Usually complete, orderly and systematic	Precise, perceptive, 'can spot the rarity'
Physical Examination	Physical Examination Lacks basic skills		Thorough, accurate. Knows and elicits specialist signs
Diagnostic Investigations	Haphazard or inappropriate ordering of diagnostic tests. Unaware of significance of appropriate testing.	Orders laboratory and imaging investigations appropriately.	Very good awareness of most appropriate and efficient diagnostic pathway.
Diagnostic Skills	Fails to interpret and synthesise symptoms, signs and investigations	Competent clinician. Good knowledge with an orderly logical approach to differential diagnosis.	Outstanding diagnostician. Excellent clinical memory.
Clinical Judgement	Deficient assessments of patient status. Does not recognise own limitations. Does not call for help.	Sound patient assessments. Recognises the sick patient.	Outstanding clinician who is aware of his / her limits. Always knows when to call for help.
Technical Skills	Clumsy or hesitant. Totally lacking in self-confidence technically	Competent. Handles procedures well	Promises to develop into an excellent technical emergency physician
B. Professional Development	Poor / Deficient	Satisfactory	Above Average / Excellent
Teaching Activities	Uninterested and avoids teaching. Contributes little to the education of students or junior medical staff.	Competent and conscientious in teaching others.	Excellent enthusiastic teacher who inspires others.
Clinical Audit	Little interest in auditing clinical activity. Poor knowledge of audit process.	Participates actively in regular audit.	Very good understanding of role of audit. Plays active role in collection and storage of audit data.
Presentations	No interest in giving papers or making presentations within the hospital or at clinical meetings.	Keen to give presentations which are well illustrated and well delivered.	Fully researched original ideas. Enthusiastic presenter. Answers questions lucidly.
Research	Has neither inclination nor ideas. Unable to carry out "directed" projects.	Keen to do research but needs direction.	Flair for original research and ability to carry it out independently. Good grasp of statistics and research methods.
C. Personal Skills	Poor / Deficient	Satisfactory	Above Average / Excellent
Communication	Does not communicate satisfactorily with patients, relatives or other team members.	Good communicator.	Pays great attention to importance of good communications skills. Regularly seeks feedback that his / her message has been understood.
Teamwork	Poor team player. Works alone. Does not contribute to team performance.	Good team player. Understands importance of teamwork.	Good understanding of team roles of his / her role on team. Works harmoniously with all other team members.
Leadership	Very limited. 'Switches people off'. Colleagues and other staff confused by his / her instructions	Competent but lacks inspiration. Gives clear instructions.	Outstanding team leader with exceptional ability to motivate others

Self Awareness and Insight	Little or no understanding of own limitations or deficiencies.	Aware of his / her strengths and weaknesses.	Very secure person. Recognises own deficiencies and prepared to make appropriate changes.
Motivation and Drive	No inclination to organise work. Needs to be 'pushed' constantly	Able to organise working routine without supervision. Looks for opportunities to learn	Constantly pro-active, always prepared to accept additional opportunities to advance.
Disposition and Appearance	Sloppy in appearance and work manner. Does not inspire confidence in others.	Good overall attitude. Presents himself / herself well.	Highly motivated enthusiastic and ambitious.
Management of Stress and Workload	Constantly disorganised. Does not identify priorities. Always behind in workload.	Manages priorities well in face of excessive workloads.	Very good handling of stress and workload. Prioritises appropriately. Delegates or seeks help when necessary.
Management of Crises	Falls apart at times of crises. Unable to deal satisfactorily with emergencies.	Remains calm and organised at time of crises.	Handles crises situations very well. Calm demeanour. Inspires other team members.
Reliability	Unreliable, scatterbrained. Forgets to do things to the possible detriment of patients	Dependable. Does not need reminding. Conscientious in patient care	Highly conscientious. Anticipates problems.
D. Relationships	Poor / Deficient	Satisfactory	Above Average / Excellent
Medical Colleagues	Fails to get on with seniors, contemporaries or juniors. May even undermine them. Refuses to help them out	Good rapport with colleagues. Usually willing to help in a crisis. Trusted, easy to work with.	Always willing to help even if personally inconvenient. Able to diffuse problems in the Emergency Department team. 'An excellent colleague'.
Nursing & Paramedical Staff	Treats them with disdain. Generates as opposed to solving problems. Rude	Sound and professional yet approachable. Treats others with respect and is respected in return	Inspires enthusiasm. Exceptional communication skills.
Patients and Relatives	Increases patient's and relatives anxieties. Rude. Patients do not want him / her as their doctor. Bad listener & communicator	Sound caring attitude. Can allay fears of patients and relatives. Takes time. Listens well. Explains well. Trusted by the patients and relatives.	Inspires confidence. Establishes excellent rapport. Excellent communicator. Patients delighted to be looked after by him / her