



Instructions

Trainee: Please print out as many copies of this form that you need for your activity and hand them out to your observers. The observers should return their completed forms to you (please make sure the observers do not enter on the form their names or other personal data that could identify them as the observer). Please scan and upload the completed forms to your trainee e-portfolio and link them to your completed electronic Observation Assessment Tool (OAT).

Observer: Please complete the 'Details' and 'General' sections, one of the specific activity sections (e.g. 'Meeting – chairperson') and the 'Overall comments' section below. Please return your completed form to the trainee. Please do not enter on the form your name or other personal data that could identify you as the observer.

Trainee's name:	
Trainee's GMC (if known):	
Date of observation:	
Activity observed (please select only one):	

General (to be completed for all observations)	
How did the trainee perform in the following aspects? (Please tick only one box)	
Introduction of self	<input type="checkbox"/> Needs improvement <input type="checkbox"/> Good <input type="checkbox"/> Excellent
Adapted to specific situation	<input type="checkbox"/> Needs improvement <input type="checkbox"/> Good <input type="checkbox"/> Excellent
Ensure technology/logistics appropriate	<input type="checkbox"/> Needs improvement <input type="checkbox"/> Good <input type="checkbox"/> Excellent
Appropriate engagement with audience	<input type="checkbox"/> Needs improvement <input type="checkbox"/> Good <input type="checkbox"/> Excellent
Good use of voice/ tone / body language	<input type="checkbox"/> Needs improvement <input type="checkbox"/> Good <input type="checkbox"/> Excellent
Knowledge of subject	<input type="checkbox"/> Needs improvement <input type="checkbox"/> Good <input type="checkbox"/> Excellent
Gained attention of audience	<input type="checkbox"/> Needs improvement <input type="checkbox"/> Good <input type="checkbox"/> Excellent
Responsive to audience needs	<input type="checkbox"/> Needs improvement <input type="checkbox"/> Good <input type="checkbox"/> Excellent
Time management	<input type="checkbox"/> Needs improvement <input type="checkbox"/> Good <input type="checkbox"/> Excellent
Maintain engagement of audience	<input type="checkbox"/> Needs improvement <input type="checkbox"/> Good <input type="checkbox"/> Excellent



Presentation – face to face group

How did the trainee perform in the following aspects? (Please tick only one box)

State objectives	<input type="checkbox"/> Needs improvement <input type="checkbox"/> Good <input type="checkbox"/> Excellent
Key points emphasised	<input type="checkbox"/> Needs improvement <input type="checkbox"/> Good <input type="checkbox"/> Excellent
Clear concise delivery	<input type="checkbox"/> Needs improvement <input type="checkbox"/> Good <input type="checkbox"/> Excellent
Logical sequence	<input type="checkbox"/> Needs improvement <input type="checkbox"/> Good <input type="checkbox"/> Excellent
Content appropriate to audience	<input type="checkbox"/> Needs improvement <input type="checkbox"/> Good <input type="checkbox"/> Excellent
Check for audience understanding/engagement	<input type="checkbox"/> Needs improvement <input type="checkbox"/> Good <input type="checkbox"/> Excellent
Responses to questions	<input type="checkbox"/> Needs improvement <input type="checkbox"/> Good <input type="checkbox"/> Excellent
State the conclusions	<input type="checkbox"/> Needs improvement <input type="checkbox"/> Good <input type="checkbox"/> Excellent
Collecting feedback from audience	<input type="checkbox"/> Needs improvement <input type="checkbox"/> Good <input type="checkbox"/> Excellent
Other comments (please use space opposite to write additional comments):	



Presentation – online

How did the trainee perform in the following aspects? (Please tick only one box)

State objectives	<input type="checkbox"/> Needs improvement <input type="checkbox"/> Good <input type="checkbox"/> Excellent
Key points emphasised	<input type="checkbox"/> Needs improvement <input type="checkbox"/> Good <input type="checkbox"/> Excellent
Clear concise delivery	<input type="checkbox"/> Needs improvement <input type="checkbox"/> Good <input type="checkbox"/> Excellent
Logical sequence	<input type="checkbox"/> Needs improvement <input type="checkbox"/> Good <input type="checkbox"/> Excellent
Content appropriate to audience	<input type="checkbox"/> Needs improvement <input type="checkbox"/> Good <input type="checkbox"/> Excellent
Ensure audience understanding/engagement (teleconference or present)	<input type="checkbox"/> Needs improvement <input type="checkbox"/> Good <input type="checkbox"/> Excellent
Responses to questions	<input type="checkbox"/> Needs improvement <input type="checkbox"/> Good <input type="checkbox"/> Excellent
State the conclusions	<input type="checkbox"/> Needs improvement <input type="checkbox"/> Good <input type="checkbox"/> Excellent
Collecting feedback from audience	<input type="checkbox"/> Needs improvement <input type="checkbox"/> Good <input type="checkbox"/> Excellent
Other comments (please space opposite to write additional comments):	



Meeting – chairperson

How did the trainee perform in the following aspects? (Please tick only one box)

Ensuring all attendees aware of purpose of meeting	<input type="checkbox"/> Needs improvement <input type="checkbox"/> Good <input type="checkbox"/> Excellent
Ensuring relevant participation from all attendees	<input type="checkbox"/> Needs improvement <input type="checkbox"/> Good <input type="checkbox"/> Excellent
Impartiality	<input type="checkbox"/> Needs improvement <input type="checkbox"/> Good <input type="checkbox"/> Excellent
Decisiveness	<input type="checkbox"/> Needs improvement <input type="checkbox"/> Good <input type="checkbox"/> Excellent
Summarising outcomes and next steps	<input type="checkbox"/> Needs improvement <input type="checkbox"/> Good <input type="checkbox"/> Excellent
Ensure audience understanding/engagement (teleconference or present)	<input type="checkbox"/> Needs improvement <input type="checkbox"/> Good <input type="checkbox"/> Excellent
Other comments (please use space opposite to write additional comments):	

Meeting – contributor

How did the trainee perform in the following aspects? (Please tick only one box)

Ensuring others knew purpose of his/her contribution	<input type="checkbox"/> Needs improvement <input type="checkbox"/> Good <input type="checkbox"/> Excellent
Meaningful and relevant contribution to meeting	<input type="checkbox"/> Needs improvement <input type="checkbox"/> Good <input type="checkbox"/> Excellent
Collaborative approach	<input type="checkbox"/> Needs improvement <input type="checkbox"/> Good <input type="checkbox"/> Excellent
Respect for others' opinions	<input type="checkbox"/> Needs improvement <input type="checkbox"/> Good <input type="checkbox"/> Excellent
Engagement with meeting/discussion	<input type="checkbox"/> Needs improvement <input type="checkbox"/> Good <input type="checkbox"/> Excellent
Other comments (please use space opposite to write additional comments):	



One to one teaching

How did the trainee perform in the following aspects? (Please tick only one box)

State objectives	<input type="checkbox"/> Needs improvement <input type="checkbox"/> Good <input type="checkbox"/> Excellent
Key points emphasised	<input type="checkbox"/> Needs improvement <input type="checkbox"/> Good <input type="checkbox"/> Excellent
Clear concise delivery	<input type="checkbox"/> Needs improvement <input type="checkbox"/> Good <input type="checkbox"/> Excellent
Logical sequence	<input type="checkbox"/> Needs improvement <input type="checkbox"/> Good <input type="checkbox"/> Excellent
Content appropriate to learner	<input type="checkbox"/> Needs improvement <input type="checkbox"/> Good <input type="checkbox"/> Excellent
Check for learner's understanding/engagement	<input type="checkbox"/> Needs improvement <input type="checkbox"/> Good <input type="checkbox"/> Excellent
Responses to questions	<input type="checkbox"/> Needs improvement <input type="checkbox"/> Good <input type="checkbox"/> Excellent
State the conclusions	<input type="checkbox"/> Needs improvement <input type="checkbox"/> Good <input type="checkbox"/> Excellent
Collecting feedback from learner	<input type="checkbox"/> Needs improvement <input type="checkbox"/> Good <input type="checkbox"/> Excellent
Other comments (please use space opposite to write additional comments):	

Other activity

Please state the activity and explain how the trainee performed it.

Comments (please use space opposite to write your comments):	
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Overall comments

Please state your overall comments about the trainee's performance.

What went well? What could be improved?

Competency level (Tick one only)

- Needs major improvement for competency
- Needs minor improvement for competency
- Fully competent