

DOCUMENT GUIDE



DOCUMENT NAME: HORIZONTAL FAMILY MEDICINE PSYCHIATRY END OF SHIFT REPORT

DESCRIPTION:

To be completed by the clinical supervisor **at the end of a clinical supervision period** to contribute to MRAs and ITARs, and to specifically identify the number and nature of procedures completed on a clinical supervision period. This report is specific to horizontal experiences in Psychiatry during Family Medicine Block Time.

NOTE: An MRA should be created upon completion of 50% of the horizontal experience, and at 6 monthly intervals for experiences greater than 12 months duration.

ACCESS TO DOCUMENT:

- Go to Family Medicine website - http://umanitoba.ca/faculties/health_sciences/medicine/units/family_medicine/index.html
- Click on “Documents and Forms”
- Form is available under “Assessments”

AUTHORITY/RESPONSIBILITY:

- Program Assistant
- Site Medical Lead
- Site Education Director
- Primary Preceptor
- Alternate/Secondary Preceptor
- Faculty Lead
- Resident
- Postgraduate Director
- Associate Director, Enhanced Skills Program
- Assistant Director, Enhanced Skills
- Postgraduate Program Office

SCHEDULE:

UPDATE/COMPLETE	SUBMIT/PRESENT	ENTER IN VENTIS (yes/no)	COMMENTS
Preceptors provide feedback following direct observation	Upon completion of 50% of horizontal experience, and at 6 monthly intervals for experiences greater than 12 months duration. Program Assistant collects Psychiatry End of Shift Reports and files in Resident Portfolio Binder	No	

HORIZONTAL FAMILY MEDICINE PSYCHIATRY END OF SHIFT REPORT



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Date:
Resident:
Supervisor:

<i>Doing well implies doing it correctly at the level of a graduating PGY2</i>	<i>Unable to do this</i>	<i>Does not do this well</i>	<i>Is starting to do this well</i>	<i>Does this well</i>	<i>Can supervise</i>	<i>N/A</i>
Assess, manage, and follow up patients with common mental health issues						
Integrates psychosocial and cultural aspects of normal human development into family practice, with knowledge of family systems, life cycle, and relationship dynamics						
Recognizes and diagnoses mental health problems commonly co-existing with health issues						
Recognizes and provides care to patients presenting with a history of abuse						
Describes specific approaches to screening/recognizing/diagnosing/managing common (key) mental health conditions						
Prescribes appropriate psychopharmacology for common psychiatric conditions						
Becomes familiar with and employs specific primary care counselling skills that have either been designed for or are useful in a family practice setting						
Provides care to patients with substance abuse problems						
Number of patients seen on this shift:						
Comments:						
What has been done well:				CanMEDS-FM 2017 <input type="checkbox"/> FM Expert <input type="checkbox"/> Patient-centered <input type="checkbox"/> Selectivity <input type="checkbox"/> Clinical reasoning <input type="checkbox"/> Procedural skill <input type="checkbox"/> Communicator <input type="checkbox"/> Collaborator <input type="checkbox"/> Leader <input type="checkbox"/> Health Advocate <input type="checkbox"/> Scholar <input type="checkbox"/> Professional		
What could be done differently:				CanMEDS-FM 2017 <input type="checkbox"/> FM Expert <input type="checkbox"/> Patient-centered <input type="checkbox"/> Selectivity <input type="checkbox"/> Clinical reasoning <input type="checkbox"/> Procedural skill <input type="checkbox"/> Communicator <input type="checkbox"/> Collaborator <input type="checkbox"/> Leader <input type="checkbox"/> Health Advocate <input type="checkbox"/> Scholar <input type="checkbox"/> Professional		
Overall Performance	<input type="checkbox"/> Unable to do this (cannot practice this) <input type="checkbox"/> Does not do this well (practice with full supervision) <input type="checkbox"/> Is starting to do this well (practice with supervision on demand) <input type="checkbox"/> Does this well (ready for "unsupervised" practice) <input type="checkbox"/> Can supervise others to do this (ready to supervise junior learners)					
Action Plan	<input type="checkbox"/> Flag for review					
Supervisor Signature	Resident Signature					



Please return the signed form to your program assistant