

Reference No:
Name and Identification No:
Evaluation covering the last
year as a Resident:
Address:

In the view of the Residency Program Committee, this resident has acquired the competencies of the specialty/subspecialty as prescribed in the Objectives of Training and is competent to practice as a specialist. **YES**
 NO

The following sources of information were used for this evaluation:

- | | |
|--------------------------------------------------------------------------|---------------------------------------------------------------------------------|
| <input type="checkbox"/> written examinations | <input type="checkbox"/> oral examinations |
| <input type="checkbox"/> clinical observations (e.g. ITERs) from faculty | <input type="checkbox"/> Structured Assessment of a Clinical Encounter (STACER) |
| <input type="checkbox"/> feedback from health care professionals | <input type="checkbox"/> OSCEs |
| <input type="checkbox"/> completion of a scholarly project | <input type="checkbox"/> other evaluations_____ |

COMMENTS

Date	Name of Program Director/Assessor for CCR	Signature
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Date	Name of Postgraduate Dean/ Assessor for CCR	Signature
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Date	Name of Resident	Signature
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This is to attest that I have read this document.

Identification number: _____

RESIDENT'S COMMENTS:

Note: If during the period from the date of signature of this document to the completion of training, the Residency Program Committee judges that the candidate's demonstration of competence is inconsistent with the present evaluation, it may declare the document null and void and replace it with an updated FITER. Eligibility for the examination would be dependant on the updated FITER.

GERIATRIC PSYCHIATRY FITER (2011)

(Please read the attached Explanatory Notes before completing this report)

<p>A rationale must be provided to support ratings with asterisks.</p>	<p>EXPECTATIONS</p>				
	<p>* Rarely meets</p>	<p>* Inconsistently meets</p>	<p>Generally meets</p>	<p>Sometimes exceeds</p>	<p>* Consistently exceeds</p>
<p>MEDICAL EXPERT</p>					
<p>a. Functions effectively as a consultant in Geriatric Psychiatry, at the Advanced level, integrating all of the CanMEDS Roles to provide optimal, ethical, and patient-centered medical care</p>					
<p>b. Establishes and maintains clinical knowledge at an Advanced level, appropriate to Geriatric Psychiatrists, in the following:</p>					
<ul style="list-style-type: none"> • Normal and abnormal biological, psychological, and cognitive aspects of the aging 					
<ul style="list-style-type: none"> • Systems of mental health care and delivery, community resources, institutions, services, and alternative living environments available for the elderly 					
<ul style="list-style-type: none"> • Psychotherapeutic constructs—individual, family and group, as appropriate to the elderly 					
<ul style="list-style-type: none"> • Psychopharmacology and somatic therapies appropriate and inappropriate as treatments in the elderly 					
<ul style="list-style-type: none"> • Mental health legislation and regulations as they pertain to the elderly, and awareness of provincial variation in these regulations across the country 					
<ul style="list-style-type: none"> • Principles of decisional capacity/competency determination in multiple domains, including the elderly person's ability to manage property, grant a power of attorney, consent to placement in a supervised living setting, and consent to medical treatment 					
<ul style="list-style-type: none"> • Caregiver issues / burden 					
<ul style="list-style-type: none"> • Elder abuse 					
<ul style="list-style-type: none"> • End of life issues 					
<p>c. Establishes and maintains clinical knowledge, skills, and attitudes at an Advanced level, appropriate to Geriatric Psychiatrists, in the following disorders:</p>					
<ul style="list-style-type: none"> • Anxiety disorders in late life 					
<ul style="list-style-type: none"> • Behavioural and Psychological Symptoms of Dementia (BPSD) 					

GERIATRIC PSYCHIATRY FITER (2011)

• Delirium					
• Dementia					
• Mood disorders in late life					
• Movement disorders in late life					
• Psychiatric conditions secondary to medical conditions					
• Psychiatric complications of neurodegenerative diseases					
• Psychotherapeutic constructs for the elderly					
• Psychotic disorders in late life					
d. Establishes and maintains clinical knowledge skills and attitudes at a Proficient level, appropriate to Geriatric Psychiatrists, in the following disorders:					
• Adjustment disorders in late life					
• Alcohol-related disorders in late life					
• Developmental disabilities in the elderly					
• Personality disorders in the elderly					
• Sleep disorders in late life					
• Somatoform disorders in late life					
e. Performs a complete and appropriate assessment of an elderly patient					
f. Uses preventive and therapeutic interventions effectively in elderly patients					
g. Seeks appropriate consultation from other health professionals					
<p>Please comment on the strengths and weaknesses of the candidate and provide a rationale for your ratings. Make direct reference to the specific objectives and give specific examples wherever possible.</p>					

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PROCEDURES AND CLINICAL SKILLS					
Demonstrates the ability to perform diagnostic and therapeutic procedures described in the Medical Expert section 5.1 of the Objectives of Training in Geriatric Psychiatry					
a. Demonstrates safe, effective, appropriate and timely performance of Electroconvulsive Therapy (ECT), minimizing risks and discomforts to elderly patients					
b. Demonstrates a detailed cognitive assessment of a geriatric patient, including selection of screening instruments appropriate to the clinical situation					
<p>Please comment on the strengths and weaknesses of the candidate and provide a rationale for your ratings. Make direct reference to the specific objectives and give specific examples wherever possible.</p>					

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	* Rarely meets	* Inconsistently meets	Generally meets	Sometimes exceeds	* Consistently exceeds
COMMUNICATOR					
a. Develops rapport, trust, and ethical therapeutic relationships with elderly patients, families and caregivers					
b. Elicits and synthesizes relevant information and perspectives of elderly patients and families/caregivers, colleagues, and other professionals accurately					
c. Conveys relevant information and explanations to elderly patients and families/caregivers, colleagues, and other professionals accurately					
d. Develops a common understanding on issues, problems, and plans with patients, families/caregivers, and other professionals to develop a shared plan of care					
e. Conveys effective oral and written information about a medical encounter					
<p>Please comment on the strengths and weaknesses of the candidate and provide a rationale for your ratings. Make direct reference to the specific objectives and give specific examples wherever possible.</p>					

GERIATRIC PSYCHIATRY FITER (2011)

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COLLABORATOR					
a. Participates effectively and appropriately in an interprofessional circle of care					
b. Describes the roles and responsibilities of other professionals within the geriatric mental health care team, across various typical geriatric psychiatry settings					
c. Recognizes the roles of family members and caregivers of elderly patients as important members of the health care team					
d. Works with others to assess, plan, provide and review other tasks such as research problems, educational work, program review, system delivery issues, or administrative responsibilities					
e. Collaborates with local community resources as integral components of the spectrum of services available to elderly persons, their families and caregivers					
f. Works effectively with other health professionals to prevent, negotiate, and resolve interprofessional conflict					
<p>Please comment on the strengths and weaknesses of the candidate and provide a rationale for your ratings. Make direct reference to the specific objectives and give specific examples wherever possible.</p>					

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MANAGER					
a. Participates in activities that contribute to the effectiveness of their health care organizations and systems					
b. Participates in systematic quality process evaluation and improvement, such as patient safety initiatives, as relevant to health care service delivery for the elderly					
c. Demonstrates the ability to prioritize professional duties when faced with multiple complex patients and problems					
d. Recognizes the importance of just allocation of health care resources, balancing effectiveness, efficiency and access with optimal care of elderly patients					
e. Serves, as appropriate, in a process to lead or implement change in health care delivery for the elderly					
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<p>HEALTH ADVOCATE</p>					
<p>a. Responds to individual elderly patient health needs and issues as part of patient care</p>					
<p>b. Identifies opportunities for advocacy, health promotion and disease prevention for elderly patients to whom they provide care</p>					
<p>c. Responds to the health needs of the communities that they serve</p>					
<p>d. Appreciates the possibility of competing interests between the elderly and other populations</p>					
<p>e. Identifies the determinants of health for the populations that they serve</p>					
<p>f. Promotes the health of individual elderly patients, communities, and populations</p>					
<p>g. Identifies and prioritizes the health needs of individual elderly patients, their families and caregivers</p>					
<p>h. Describes how public policy impacts on the health of the elderly population and their caregivers</p>					
<p>Please comment on the strengths and weaknesses of the candidate and provide a rationale for your ratings. Make direct reference to the specific objectives and give specific examples wherever possible.</p>					

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SCHOLAR					
a. Maintains and enhances professional activities through ongoing learning in Geriatric Psychiatry					
b. Critically evaluates medical information and its sources, and applies this appropriately to practice decisions in Geriatric Psychiatry					
c. Facilitates the learning of patients, families, students, residents, other health professionals, the public, and others in topics of Geriatric Psychiatry					
d. Contributes to the development, dissemination, and translation of new knowledge and practices in Geriatric Psychiatry					
This resident has successfully completed a scholarly project				YES <input type="checkbox"/>	NO <input type="checkbox"/>
<p>Please comment on the strengths and weaknesses of the candidate and provide a rationale for your ratings. Make direct reference to the specific objectives and give specific examples wherever possible.</p> <div style="font-size: 4em; opacity: 0.1; transform: rotate(-30deg); position: absolute; top: 50%; left: 50%; pointer-events: none;"> SAMPLE </div>					

GERIATRIC PSYCHIATRY FITER (2011)

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	* Rarely meets	* Inconsistently meets	Generally meets	Sometimes exceeds	* Consistently exceeds
PROFESSIONAL					
a. Demonstrates a commitment to their patients, profession, and society through ethical practice					
b. Maintains appropriate relations with elderly patients, families and caregivers					
c. Demonstrates awareness of, and appropriately manage, one's own reactions when dealing with elderly patients					
d. Demonstrates a commitment to their patients, professions, and society through participation in profession-led regulation					
e. Demonstrates a commitment to physician health and sustainable practice					
<p>Please comment on the strengths and weaknesses of the candidate and provide a rationale for your ratings. Make direct reference to the specific objectives and give specific examples wherever possible.</p>					